INTERFACE INC Form 4 August 06, 2001

	Form 4	UNITED STATES SECURITIES AND EXCHANGE	OMB APPROVAL
		COMMISSION	OMB Number: 3235-0287
		Washington, DC 20549	Expires: December 31, 2001
[]	Check box if no longer subject to Section 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	Estimated average burden hours per
	Form 4 or Form 5 obligations may continue. See instructions 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940	response 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person* Kennedy Christopher G.	2. Issuer Name and Ticke Symbol	6. Relationship of Reporting Person(s) to Issuer (Check all applicable) X				
	Interface, Inc. ((IFSIA)	Director Owner	10%		
(Last) (First)	3. I.R.S. Identification Number of Reporting Person, if an entity voluntary)		Officer (give Other (specify title			
(Middle)			below)	below)		
2859 Paces Ferry Road Suite 2000						

4. Statement for Month/Year

July 2001

(Street)

	Atlanta	Georgia	30339					
7. Individual or Joint/Group Filing								
Form filed by M Table I - Non-Derivative Securi	ore than One Repor			(State)	(Zip)			
		00 00 01, 01 2011011011						
1. Title of Security (Instr. 3)								
2. Transaction Date (Month/Day/Year)								
3. Transaction Code								
(Instr. 8)								
4. Securities Acquired (A) or D (D) (Instr. 3, 4 and 5)	isposed of							
5. Amount of Securities Benefic (Instr. 3 and 4)	cially Owned at End	l of Month						
6. Owner-								
ship Form: Direct (D) or Indirect (I)								
(Instr. 4)								
7. Nature of Indirect Beneficial (Instr. 4)	Ownership							
Code								
V								
		Amount						
		(A) or (D)						
		Price						

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P

162

A

\$5.81

27,357

D

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. * If the form is filed by more than one reporting person, see Instructions 4(b)(v).

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number. (3-99)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

	3.	4.	5.	6. Date Exercisable	7. Title and	8. Price of	9.Number of	10.
onversion	Transaction	Transactio	nNumber	and Expiration Date	Amount of	Derivative	Derivative	Ownership
	Date	Code	of	(Month/Day/Year)	Underlying	Security	Securities	Form of
kercise	(Month/	(Instr. 8)	Derivative	·	Securities	(Instr. 5)	Beneficially	Derivative
ice of	Day/		Securities		(Instr. 3 and 4)		Owned at	Security:

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ivative urity	Year)			(A)	osed) r. 3,					t r		Direct (D) or Indirect (I) (Instr. 4)
		Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
						·						

Explanation of Responses:

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Christopher G. Kennedy

Christopher G. Kennedy

**Signature of Reporting Person

8/3/01

Date

Note:

File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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