

Edgar Filing: RAYOVAC CORP - Form 4

RAYOVAC CORP  
 Form 4  
 November 09, 2001  
 FORM 4

( ) Check this box if no longer  
 subject to Section 16. Form 4  
 or Form 5 obligations may continue.  
 See Instruction 1(b).

UNITED STATES  
 SECURITIES AND EXCHANGE COMMISSION  
 WASHINGTON, D.C. 20549

|                       |
|-----------------------|
| OMB APPROVAL          |
| OMB NUMBER: 3235-0287 |
| EXPIRES:              |
| DECEMBER 31, 2001     |
| ESTIMATED AVERAGE     |
| BURDEN HOURS          |
| PER RESPONSE ... 0.5  |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person

|  |           |          |
|--|-----------|----------|
| Jones                                      | David     | A.       |
| (Last)                                     | (First)   | (Middle) |
| c/o Rayovac Corporation, 601 Rayovac Drive |           |          |
| (Street)                                   |           |          |
| Madison                                    | Wisconsin | 53711    |
| (City)                                     | (State)   | (Zip)    |

2. Issuer Name and Ticker or Trading Symbol

Rayovac Corporation (ROV)

3. I.R.S. Identification Number of Reporting Person, if an entity  
 (Voluntary)

4. Statement for Month/Year

October/2001

5. If Amendment, Date of Original (Month/Year)

6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

- Director
  - 10% Owner
  - Officer (give title below)
  - Other (specify title below)
- Chief Executive Officer

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- 7. Individual, or Joint/Group Filing (Check Applicable Line)  
  (X ) Form filed by One Reporting Person  
  ( ) Form filed by More than One Reporting Person  
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TABLE I - NON-DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF,  
          OR BENEFICIALLY OWNED

-----

1. Title of Security (Instr. 3)  
-----
2. Transaction Date (Month/Day/Year)  
-----
3. Transaction Code (Instr. 8)  
-----
4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)  
-----
5. Amount of Securities Beneficially Owned at End of Month  
  (Instr. 3 and 4)  
-----
6. Ownership Form: Direct(D) or Indirect(I) (Instr. 4)  
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7. Nature of Indirect Beneficial Ownership (Instr. 4)  
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Reminder: Report on a separate line for each class of securities  
          beneficially owned directly or indirectly.

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TABLE II - DERIVATIVE SECURITIES ACQUIRED, DISPOSED OF, OR BENEFICIALLY  
          OWNED  
          (E.G., PUTS, CALLS, WARRANTS, OPTIONS, CONVERTIBLE SECURITIES)

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1. Title of Derivative Security (Instr. 3)  
    Employee Stock Option (Right to Buy)  
-----
2. Conversion or Exercise Price of Derivative Security  
    \$14.50  
-----
3. Transaction Date (Month/Day/Year)  
    10/1/2001  
-----
4. Transaction Code (Instr. 8)  
    A; V  
-----
5. Number of Derivative Securities Acquired (A) or Disposed of (D)  
  (Instr. 3, 4, and 5)  
    Granted option to purchase 87,500 shares of common stock (A)  
-----
6. Date Exercisable and Expiration Date (Month/Day/Year)  
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See Footnote (1)

7. Title and Amount of Underlying Securities (Instr. 3 and 4)

Common Stock; 87,500 shares

8. Price of Derivative Securities (Instr. 5)

9. Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4)

87,500

10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)

(D)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

Not applicable.

EXPLANATION OF RESPONSES:

(1) The option vests and becomes exercisable in equal annual installments over a three-year period that commenced October 1, 2001. The option expires on October 1, 2011.

/s/ James T. Lucke, as attorney-in-fact

November 8, 2001

\*\* SIGNATURE OF REPORTING PERSON

DATE

\*\* INTENTIONAL MISSTATEMENTS OR OMISSIONS OF FACTS CONSTITUTE FEDERAL CRIMINAL VIOLATIONS. SEE 18 U.S.C. 1001 AND 15 U.S.C. 78ff(a).

NOTE: FILE THREE COPIES OF THIS FORM, ONE OF WHICH MUST BE MANUALLY SIGNED. IF SPACE IS INSUFFICIENT, SEE INSTRUCTION 6 FOR PROCEDURE.

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 NUMBER.