### STONERIDGE INC

Form 3

January 11, 2006

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** 

response...

3235-0104

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**OMB APPROVAL** 

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES** 

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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting

Person \*

À STRICKLER GEORGE E

(Last)

(City)

(First)

(Middle)

(Zip)

2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol

Statement

(Month/Day/Year)

01/09/2006

4. Relationship of Reporting Person(s) to Issuer

5. If Amendment, Date Original

Filed(Month/Day/Year)

4797 PIN OAK ROAD

AKRON, OHÂ 44333

(Street)

(State)

(Check all applicable)

STONERIDGE INC [SRI]

6. Individual or Joint/Group

Director 10% Owner \_X\_\_ Officer Other

(give title below) (specify below)

Filing(Check Applicable Line) \_X\_ Form filed by One Reporting

Person

Form filed by More than One EVP and CFO Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)

Beneficially Owned (Instr. 4)

2. Amount of Securities

Ownership Form:

4. Nature of Indirect Beneficial Ownership

(Instr. 5)

Direct (D) or Indirect (I) (Instr. 5)

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

4. 5. Conversion or Exercise

Price of

Derivative

6. Nature of Indirect Ownership Beneficial Ownership Form of Derivative

(Instr. 5)

Expiration Date Exercisable Date

Amount or Title Number of Shares

Security Direct (D) or Indirect (I)

(Instr. 5)

Security:

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

STRICKLER GEORGE E

4797 PIN OAK ROAD Â Â ÊVP and CFO Â

AKRON, OHÂ 44333

# **Signatures**

/s/ Robert M. Loesch, by power of attorney 01/11/2006

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- \*\* 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.

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