Emergency Medical Services CORP

Form 4 June 17, 2008

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number:

January 31, Expires: 2005

10% Owner

Other (specify

7. Nature of

Ownership

(Instr. 4)

Indirect

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

EPSTEIN STEVEN B

(First) (Middle)

10105 IRON GATE ROAD

(Street)

POTOMAC, MD 20854

2. Issuer Name and Ticker or Trading

Symbol

Emergency Medical Services CORP [EMS]

3. Date of Earliest Transaction (Month/Day/Year)

06/13/2008

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting Person

(I)

(Instr. 4)

6. Ownership

Form: Direct

(D) or Indirect Beneficial

5. Relationship of Reporting Person(s) to

(Check all applicable)

5. Amount of

Issuer

below)

_X__ Director

Officer (give title

(City) (State)

(Zip) 2. Transaction Date 2A. Deemed

1.Title of Security (Instr. 3)

(Month/Day/Year)

Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

Code V Amount (D) Price

(A)

or

Securities Beneficially Owned Following Reported

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Transaction(s) (Instr. 3 and 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of Derivative Conversion Security or Exercise

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if any

5. Number Transaction of Derivative Expiration Date Code Securities

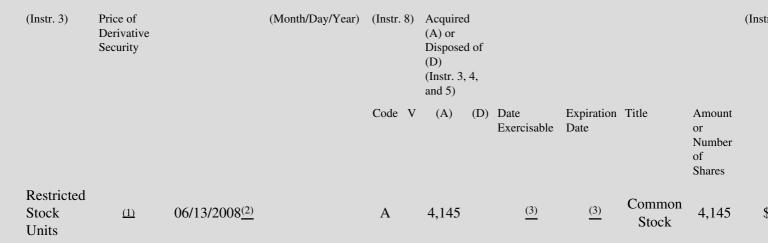
6. Date Exercisable and (Month/Day/Year)

7. Title and Amount of 8. Pr **Underlying Securities** (Instr. 3 and 4)

Deri

Secu

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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
EPSTEIN STEVEN B 10105 IRON GATE ROAD POTOMAC, MD 20854	X			

Signatures

/s/ Carl F. Berglind, as attorney-in-fact

06/17/2008

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(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).
- (1) Each Restricted Stock Unit represents the right to receive one share of the Issuer's class A common stock.
- Pursuant to the terms of the Issuer's Non-Employee Director Compensation Program, on June 13, 2008, the terms of the grant of the Restricted Stock Units were finalized based upon the Issuer's closing stock price as of June 13, 2008.
 - The Restricted Stock Units will vest on the date of the Issuer's 2009 annual meeting of stockholders, immediately prior to the vote for directors, if the reporting person has been a director for the entire year and has attended at least 75% of the meetings held by the Board of
- (3) Directors and the Board committees on which he serves, and will be paid at that time in shares of the Issuer's class A common stock unless the reporting person has made an election to defer the receipt of such shares at the time and in the manner provided by the Board of Directors.

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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