FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

(I fill of Type nesponses	S)							
Name and Address of Reporting Person * Kopra Timothy L.	Rec (Mo	2. Date of Event Requiring Statement (Month/Day/Year) - 04/08/2010		3. Issuer Name and Ticker or Trading Symbol InfuSystem Holdings, Inc [INHI.OB]				
(Last) (First) C/O INFUSYSTEM HOLDINGS, INC., 3 RESEARCH PARK	(Middle) B1700			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)X Director 10% Owner			5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) MADISON HEIGHTS, MI 4807	1			Officer (give title belo	Oth w) (specify be		Filing(Che _X_ Form fil Person	ual or Joint/Group ck Applicable Line) led by One Reporting led by More than One Person
(City) (State)	(State) (Zip) Table I - Non-Derivative Securities Beneficially Owned							
1.Title of Security (Instr. 4)		Sec Owi		it of Beneficially	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ership	direct Beneficial
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who 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. SEC 1473 (7-02)								
Table II - Derivative Se	ecurities Benef	icially Own	ed (<i>e.</i>	g., puts, call	s, warrants	, opti	ons, conv	ertible securities
1. Title of Derivative Security (Instr. 4)		Date Exercisable Expiration Date of Se Unde Deriv (Instr		tle and Amour ecurities erlying rative Security r. 4)	Convers or Exercis Price of	Conversion	5. Ownership I Form of Coerivative (Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable			Amount or Number of Shares	Derivati Security	, c	Direct (D) or Indirect I) Instr. 5)	
Reporting O	wners							

Reporting Owner Name / Address		neialionsinps					
neporting Owner Hair	Owner Name / Address		10% Owner	Officer	Other		
Kopra Timothy L. C/O INFUSYSTEM HC 31700 RESEARCH PA MADISON HEIGHTS, N	ARK DRIVE	X					

Signatures

/s/ Timothy Kopra	04/19/2010
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).

Remarks:

No securities beneficially owned.

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.