# FORM 4

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

# **UNITED STATES SECURITIES AND EXCHANGE** COMMISSION

Washington, D.C. 20549

#### Section 16. Form 4 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB Number: 3235 0287 Expires: November 30 Estimated average burden hours per 0.5 response.

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)										
Name and Address of Reporting Person - SINGH DILIP			Susuer Name <b>and</b> Ticker or Trading Symbol InfuSystem Holdings, Inc [INFU]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  X Director 10% Owner			
(Last) (First) (Middle) C/O INFUSYSTEM HOLDINGS, INC., 31700 RESEARCH PARK DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 04/24/2012				X_ Director X_ Officer (give title Other (specify below) below) Interim CEO				
(Street) MADISON HEIGHTS, MI 48071			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				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities A					d of, or Bene	eficially		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any	med on Date, if Day/Year)	Code (Instr. 8)	ion	Dispose (Instr. 3,	d (A) d of 4 an (A) or	(D) d 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	٧	Amount	(D)	Price	(Instr. 3 and 4)		
	eport on a separate		each class	of securi	ties						
					iı r	nformati equired	on co to re	ontain spond	nd to the collection ed in this form are lunless the form control number.	e not displays a	SEC 1474 (9-02)

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

1. Title of 2 8. Price of 9. Number of 11. Nature 3. Transaction 6. Date Exercisable and 7. Title and Amount 3A. Deemed 5. Number of 10. Transaction Derivative Conversion Date Execution Date, if Derivative **Expiration Date** of Underlying Derivative Derivative Ownership of Indirect Security or Exercise (Month/Day/Year) Code Securities (Month/Day/Year) Securities Security Securities Form of Beneficial any (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired (A) (Instr. 3 and 4) Beneficially Derivative Ownership Derivative or Disposed Owned Security: (Instr. 4) Direct (D) of (D) (Instr. 3, 4, Security Following or Indirect Reported and 5) Transaction(s (Instr. 4) (Instr. 4) Amount Date Expiration Title Number Exercisable Date Code (A) of Shares Option \$ 2.25 (1) 04/24/2012 (right to Α 500,000 04/24/2015 500,000 (1) 500,000 D buy)

### **Reporting Owners**

Demontion Comes Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SINGH DILIP						
C/O INFUSYSTEM HOLDINGS, INC.	Х		Interim CEO			
31700 RESEARCH PARK DRIVE MADISON HEIGHTS, MI 48071						

# **Signatures**

/s/ Dilip Singh	04/26/2012
-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.
- On April 24, 2012, the issuer granted the reporting person options to purchase 500,000 shares of common stock under (1) the InfuSystem Holdings, Inc. 2007 Stock Incentive Plan in connection with his appointment as the Company's Interim CEO. The price represents the closing price of the issuer's common stock on the date of grant.
- The options vest ratably on the 24th day of each month for the next six months. The options will vest immediately upon a (2) change of control or upon termination of Mr. Singh's employment for any reason other than for cause, or otherwise at the discretion of the Compensation Committee.

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

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.