FORM 4

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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] Lachance Carrie			2. Issuer Name and 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.			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2023	X	Officer (give title below) President at	Other (specify below)						
3851 WEST HAMLIN ROAD			4. If Amendment, Date of Original Filed (Month/Day/Year)	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual								
(Street) ROCHESTER				X	Form filed by One Rep Form filed by More that	oorting Person In One Reporting Person						
HILLS	MI	48309	Rule 10b5-1(c) Transaction Indication									
(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Date, Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	06/30/2023		М		25,000	Α	\$3.36	156,095	D	
Common Stock	06/30/2023		F		12,729(1)	D	\$9.57	143,366	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed 4. 5. Numbe Execution Date, Transaction Derivative if any Code (Instr. 8) (Month/Day/Year) 8) Acquired or Dispos (D) (Instr. and 5)		ative ities red (A) posed of str. 3, 4	6. Date Exerce Expiration Date (Month/Day/	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Stock Option (right to buy) ⁽²⁾	\$3.36	06/30/2023		М			25,000	07/19/2019	07/18/2023	Common Stock	25,000	\$0	0	D	

Explanation of Responses:

1. Reflects the number of shares surrendered in connection with the cashless exercise and tax withholding obligations for the exercised option.

2. The option, representing the right to purchase a total of 25,000 shares of InfuSystem Holdings, Inc. common stock, vests 33% per year on the anniversary starting July 19, 2019.

Remarks:

/s/ Kevin Whitman, Attorney-in-07/03/2023 Fact for Carrie Lachance

** Signature of Reporting Person

Date

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

* 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).

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

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 Number.

OMB APPROVAL