SEC Form 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response: 0.5

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 * Chatterjee Saurav					2. Issuer Name and Ticker or Trading Symbol <u>Augmedix, Inc.</u> [AUGX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O AUGME	(First) EDIX, INC.	(1	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/18/2023							ive title <mark>FECHNO</mark>	O	Other (specify below) GY OFFICER			
111 SUTTER STREET, SUITE 1300				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)						 Individual or Joint/Group Filing (Check Applicable Lin X Form filed by One Reporting Person 						
(Street) SAN FRANCISCO CA 94104														son porting Person			
(City)	(State	:) (2	Zip)														
		т	able I - Non-I	Derivative S	ecurities Acq	uired,	Disp	osed of	f, or Benef	icially Ow	/ned						
Date				Transaction ate Ionth/Day/Year)	Execution Date,		Transaction Disposed Of (D) (Code (Instr.		es Acquired (A) or Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownershi Form: Direc or Indirect (I (Instr. 4)	(D) Indirect Beneficial Ownership			
					Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)			(Instr. 4)				
					urities Acqui ls, warrants, o						ed						
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Tra Security (Instr. or Exercise (Month/Day/Year) if any Co		Transaction Code (Instr.					derlying	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia	e Owne s Form:	Beneficial					

	Security					(D) (Instr. 3, 4 and 5)							Reported	(I) (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		
Employee Stock Option (right to buy)	\$1.79	02/18/2023		A		70,000		(1)	02/18/2033	Common Stock	70,000	\$ <u>0</u>	70,000	D	

Explanation of Responses:

1. The option is granted under the Augmedix, Inc. (the "Issuer") 2020 Equity Incentive Plan. The option will vest monthly in equal increments over four years starting on the grant date, subject to the Reporting Person's provision of service to the Issuer on each vesting date.

/s/ Todd Holvick, Attorney-in-Fact 02/22/2023

** 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.