

ALLIANCE IMAGING INC /DE/
Form 3
January 11, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â JOYCE CHRISTOPHER J		(Month/Day/Year)	ALLIANCE IMAGING INC /DE/ [AIQ]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
1900 S STATE COLLEGE				
BLVD,Â SUITE 600			(Check all applicable)	
(Street)			___ Director	___ 10% Owner
ANAHEIM,Â CAÂ 92806			<input checked="" type="checkbox"/> Officer	___ Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			Executive Vice President, M&A	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock ⁽¹⁾	52,631	D	Â

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

SEC 1473 (7-02)

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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	---	--	---	--

Edgar Filing: ALLIANCE IMAGING INC /DE/ - Form 3

	Date Exercisable	Expiration Date	Amount or Number of Shares	or Indirect (I) (Instr. 5)
Employee Stock Option	Â (2)	03/22/2015	Common Stock 50,000 \$ 9.6	D Â
Employee Stock Option	Â (3)	02/03/2016	Common Stock 30,000 \$ 4.19	D Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
JOYCE CHRISTOPHER J 1900 S STATE COLLEGE BLVD SUITE 600 ANAHEIM, CA 92806	Â	Â	Â Executive Vice President, M&A	Â

Signatures

Eli H. Glovinsky 01/10/2008

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Represents bonus stock award, vesting on 1/01/10, of a number of shares equal to \$500,000 divided by the fair market value of shares on the vesting date. Number of shares in column 2 is an estimate based on the closing price of common stock on 1/08/08.
 - (2) One half of the option grant vests in equal increments over a five-year period. The second half of the option grant vests on the eighth anniversary of the grant date, subject to acceleration if certain performance targets are met by the issuer.
 - (3) The option grant vests as follows: 5% on the first anniversary of the grant date, 20% on the second anniversary of the grant date, 25% on each of the third, fourth and fifth anniversaries of the grant date.

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.