

NOYES ADAM P  
Form 4  
January 09, 2002

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, D.C. 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person

ADAM P. NOYES

13244 ROYAL GEORGE AVENUE

ODESSA, FL 33556

U.S.A.

2. Issuer Name and Ticker or Trading Symbol

CHECKERS DRIVE-IN RESTAURANTS, INC. (CHKR)

3. IRS or Social Security Number of Reporting Person (Voluntary)

4. Statement for Month/Year

December 2001

5. If Amendment, Date of Original (Month/Year)

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6. Relationship of Reporting Person(s) to Issuer (Check all applicable)

Director  10% Owner  Officer (Give Title Below)  Other (Specify Below)

Vice President of Operations and Purchasing

7. Individual or Joint/Group Filing (Check Applicable)

Form filed by One Reporting Person

Form filed by More than One Reporting Person

SUBJECT COMPANY:

COMPANY DATA:

COMPANY CONFORMED NAME: CHECKERS DRIVE-IN RESTAURANTS, INC.

CENTRAL INDEX KEY: H000879554

STANDARD INDUSTRIAL CLASSIFICATION: RETAIL-EATING PLACES [5812]

IRS NUMBER: M81654960

STATE OF INCORPORATION: DE

FISCAL YEAR END: I231

SEC FILE NUMBER: H00-19649

BUSINESS/MAILING ADDRESS:

STREET 1: L300 WEST CYPRESS STREET, SUITE 600

CITY: TAMPA

STATE: FL

ZIP: K3607

BUSINESS PHONE: 8132837000

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

Title of Non-Derivative Security	Transaction Date	Transaction Code	Security Amount	Securities Acquired/ Disposed (A/D)	Securities Price	Amount Beneficially Owned at End of the Month	Ownership Direct or Indirect	Nature of Indirect Beneficial Ownership
Common Stock	12/26/01	V/P	110.94*	A	6.5000	365.64	D	

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

Version exercised	Transaction Date	Transaction Code	Securities Acquired/ Disposed	Date Exercisable	Expiration Date	Title	Number of Shares	Price of Security	Number Beneficially Owned End of Month	Ownership Direct or Indirect

Explanation of Responses:

\* Stock is part of an Employee Stock Purchase Plan.

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Signature of Reporting Person

Date