FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Ad	dress of Reporting	. Date of Event Requiring Stater Month/Day/Yea	ment	3. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [ CRY ]						
(Last) 1655 ROBER (Street) KENNESAW (City)	(First) TS BLVD., NW GA (State)	(Middle)	99/10/2015		(Check a	onship of Reporting Pers ill applicable) Director Officer (give title below) Senior VP, Global	10% Own Other (spe below)	er 6.	onth/Day/Year) Individual or Join plicable Line) X Form filed b Person	oate of Original Filed  out/Group Filing (Check  y One Reporting  y More than One  derson
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)						lly Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock						0	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)  Date Exercisable a Expiration Date (Expiration Date Exercisable Date Exercisable Date Exercisable Date Exercisable Date			ite	3. Title and Amount of Secu Underlying Derivative Secu 4)			4. Conversio	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
				Expiration Date	n Title		Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	

**Explanation of Responses:** 

/s/ D. Ashley Lee

09/17/2015

\*\* 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 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).

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.

## CONFIRMING STATEMENT

This Statement confirms that the undersigned has authorized and designated the Chief Executive Officer, Chief Financial Officer, or the Corporate Secretary of CryoLife, Inc. to execute and file on the undersigned's behalf all Forms 3, 4 and 5 (including any amendments thereto) that the undersigned may be required to file with the U.S. Securities and Exchange commission as a result of the undersigned's ownership of or transactions in securities of CryoLife, Inc. The authority of the Chief Executive Officer, Chief Financial Officer, or the Corporate Secretary of CryoLife, Inc. under this Statement shall continue until the undersigned is no longer required to file Forms 3, 4 and 5 with regard to the undersigned's ownership of or transactions in securities of CryoLife, Inc., unless earlier revoked in writing. The undersigned acknowledges that the Chief Executive Officer, Chief Financial Officer, or the Corporate Secretary of CryoLife, Inc. is not assuming any of the undersigned's responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

Dated as of September 10, 2015

/s/ John Davis John Davis