FORM 3

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

OMB APPROVAL				
OMB Number: 3	235-0104			
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

(Print or Type Responses)									
1. Name and Address of Reporting Person * CASCELLA ROBERT (Last) (First) (Middle) C/O REPRO MED SYSTEMS, INC., 24 CARPENTER ROAD 2. Date of Event Statement (Mon 05/06/2022		nt (Month/D			3. Issuer Name and Ticker or Trading Symbol REPRO MED SYSTEMS INC [KRMD]				
		05/06/2022		Issuer	4. Relationship of Reporting Person(s) Issuer (Check all applicable)		5) to 5. If Amendment, Date Original Filed(Month/Day/Year)		
(Street) CHESTER, NY 10918				_XDirector Officer (give titled)	e 10% Own Other (spe	Applicable 1 X_Form f	6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (State) (Zip)			Tab	ole I - Non-Deriva	- 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		0			D				
Reminder: Report on a separate line for each cl Persons who res unless the form of Table II - Derivative S	pond to the co	ollection o rently valid	of informa d OMB co	ation contained in the ontrol number.					
1. Title of Derivative Security (Instr. 4)	2. Date Exer and Expirati	Date Exercisable		nd Amount of Securitie ng Derivative Security	es 4. Conversion	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title Sha	nount or Number of ares	Security	(D) or Indirect (I) (Instr. 5)			
Reporting Owners									
	Rela	ationships							

Reporting Owner Name / Address	Relationships			
		10% Owner	Officer	Other
CASCELLA ROBERT C/O REPRO MED SYSTEMS, INC. 24 CARPENTER ROAD CHESTER, NY 10918	X			

Signatures

/s/ Karen Fisher, Attorney-in-Fact	05/10/2022		
**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).

Remarks:

Power of Attorney filed herewith as Exhibit 24.

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.

EXHIBIT 24 TO FORM 3

POWER OF ATTORNEY

Know all by these presents, that the undersigned hereby constitutes and appoints each of Linda Tharby and Karen Fisher and their successors in office and designees, signing singly, the undersigned's true and lawful attorney-in-fact to:

- (1) execute and file for and on behalf of the undersigned, in the undersigned's capacity as an officer and/or director of Repro Med Systems, Inc.(the "Company"), Forms 3, 4 and 5 in accordance with Section 16(a) of the Securities Exchange Act of 1934 and the rules thereunder;
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such Form 3, 4 or 5, complete and execute any amendment or amendments thereto, and timely file such form with the United States Securities and Exchange Commission and any stock exchange or similar authority; and
- (3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the best interest of, or legally required by, the undersigned, it being understood that the documents executed by such attorney-in-fact on behalf of the undersigned pursuant to this Power of Attorney shall be in such form and shall contain such terms and conditions as such attorney-in-fact may approve in such attorney-in-fact's discretion.

The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, or proper to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as the undersigned might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that such attorney-in-fact, or such attorney-in-fact's substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted. The undersigned acknowledges that the foregoing attorneys-in-fact, in serving in such capacity at the request of the undersigned, are not assuming, nor is the Company assuming, any of the undersigned's responsibilities to comply with Section 16 of the Securities Exchange Act of 1934.

This Power of Attorney shall remain in full force and effect until the undersigned is no longer required to file Forms 3, 4 and 5 with respect to the undersigned's holdings of and transactions in securities issued by the Company, unless earlier revoked by the undersigned in a signed writing delivered to the foregoing attorneys-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this $_10_$ day of May, 2022.

/s/ Robert A. Cascella (Signature)

Robert A. Cascella (Printed Name)