

Harris Stratex Networks, Inc.  
 Form 3  
 July 09, 2008

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

OMB APPROVAL

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**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 <b>and</b> Ticker or Trading Symbol	
Â Stumpe Heinz		(Month/Day/Year)	Harris Stratex Networks, Inc. [HSTX]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		06/30/2008		
120 ROSE ORCHARD WAY			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
	(Street)		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
SAN JOSE,Â CAÂ 95134			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input type="checkbox"/> Form filed by More than One Reporting Person
	(City)	(State)	(specify below)	
		(Zip)	Chief Operating Officer	

**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)
Class A Common Stock <sup>(1)</sup>	20,100	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)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Non-Qualified Stock Option (right to buy)	Â (2)	01/29/2009	Class A Common Stock	3,899	\$ 21.44	D	Â
Non-Qualified Stock Option (right to buy)	Â (2)	03/30/2011	Class A Common Stock	12,500	\$ 17.52	D	Â
Non-Qualified Stock Option (right to buy)	Â (3)	06/06/2013	Class A Common Stock	20,000	\$ 16.04	D	Â
Non-Qualified Stock Option (right to buy)	Â (4)	02/28/2014	Class A Common Stock	11,300	\$ 20.4	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Stumpe Heinz 120 ROSE ORCHARD WAY SAN JOSE, CA 95134	Â	Â	Â Chief Operating Officer	Â

## Signatures

/s/Juan Otero, General Counsel & Secretary, on behalf of Heinz Stumpe 07/09/2008

\_\_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) These shares of Class A Common Stock are restricted.
- (2) The options pursuant to this grant are fully vested.
- (3) The option vests at a rate of 1/3rd of the shares subject to the option on the first anniversary of the grant date (6/6/06) and 1/24th of the remaining shares subject to the option each month thereafter.
- (4) The option vests at a rate of 50% of the shares subject to the option on the first anniversary of the grant date (2/28/07), 25% on the second anniversary of the grant date and the final 25% on the third anniversary 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.