Edgar Filing: CHOICEPOINT INC - Form 4

| CHOICEPOIN Form 4 | IT INC | | | | | | | | |
|--|--|--|---|--------------------------|---|--|--|---|--|
| October 21, 20 | 05 | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | PPROVAL 3235-0287 | |
| Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b). | A dor tot to a d or tot to sectionSTATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESExpires:Janual Expires:STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESEstimated average burden hours per responseEstimated average burden hours per response5Filed 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 1940Section 17(a) | | | | | | | irs per | |
| (Print or Type Res | sponses) | | | | | | | | |
| 1. Name and Add STORY CHA | Symbol | 2. Issuer Name and Ticker or Trading Symbol CHOICEPOINT INC [CPS] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) 1000 ALDER | (Month/I | 3. Date of Earliest Transaction (Month/Day/Year) 10/20/2005 | | | _X_Director10% Owner Officer (give titleOther (specify below)below) | | | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | |
| ALPHARETT | CA, GA 30005 | | | | | Form filed by Person | More than One Re | eporting | |
| (City) | (State) (| Zip) Tab | le I - Non-De | rivative S | ecurities Ac | quired, Disposed o | of, or Beneficial | lly Owned | |
| | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Disposed (Instr. 3, 4 | (A) or of (D) 4 and 5) (A) or | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common stock | | | Code V | Amount | (D) Price | 2,912 | D | | |

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

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. 6. Date Exp onNumber Expiration of (Month/Da Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | of Underlying | | 8. Price of Derivative Security (Instr. 5) |
|---|---|---|---|--|--|---------------------|--------------------|---------------|--|---|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Phantom stock units <u>(1)</u> | \$ 41.62 | 10/20/2005 | 10/20/2005 | А | 15 | <u>(1)</u> | (1) | common | 15 | \$ 41.62 |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | ips | | | |
|--|-------------|------------|---------|-----------|--|--|
| I B | Director | 10% Owner | Officer | Other | | |
| STORY CHARLES I 1000 ALDERMAN DRIVE ALPHARETTA, GA 30005 | Х | | | | | |
| Signatures | | | | | | |
| David W. Davis, Attorney-in-F Story | Fact for Cl | harles I. | 1 | 0/21/2005 | | |
| <u>**</u> Signature of Reporting | Person | | | Date | | |
| Explanation of Poenoncos: | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(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) Phantom stock units acquired under the director's deferred compensation plan to be distributed in cash upon retirement from the Board.

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.