

CHOICEPOINT INC
Form 4
May 18, 2006

FORM 4

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

OMB APPROVAL

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

STATEMENT OF CHANGES IN 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 *
TRINE DAVID E

(Last) (First) (Middle)
1000 ALDERMAN DRIVE
(Street)

ALPHARETTA, GA 30005

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
CHOICEPOINT INC [CPS]

3. Date of Earliest Transaction (Month/Day/Year)
05/16/2006

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
X Officer (give title below) ___ Other (specify below)
Chief Financial Officer

6. Individual or Joint/Group Filing(Check Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
				(A) or (D)	Price		
			Code	V	Amount		
Common stock ⁽¹⁾	05/16/2006	05/16/2006	A		\$ 3,000		D
					45.7		

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

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SEC 1474 (9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)
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				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option, right to buy ⁽²⁾	\$ 45.75	05/16/2006	05/16/2006	A		6,000		<u>(2)</u>	<u>(2)</u>	common	6,000	\$ 45.75
Stock option, right to buy ⁽³⁾	\$ 45.75	05/16/2006	05/16/2006	A		2,185		<u>(3)</u>	<u>(3)</u>	common	2,186	\$ 45.75
Stock option, right to buy ⁽⁴⁾	\$ 45.75	05/16/2006	05/16/2006	A		3,815		<u>(4)</u>	<u>(4)</u>	common	3,815	\$ 45.75

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
TRINE DAVID E 1000 ALDERMAN DRIVE ALPHARETTA, GA 30005			Chief Financial Officer	

Signatures

David E. Trine 05/18/2006
 **Signature of Date
 Reporting Person

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) Grant of restricted shares issued pursuant to the ChoicePoint Inc. 2003 Omnibus Incentive Plan vesting 100% on 5/16/09.
- (2) Non-qualified stock option granted under the ChoicePoint Inc. 2003 Omnibus Incentive Plan. Vesting based on predetermined increases in operating income or Company stock price for a three-year period.
- (3) Incentive stock option granted under the ChoicePoint Inc. 2003 Omnibus Incentive Plan with 100% vesting 5/16/09.
- (4) Non-qualified stock option granted under the ChoicePoint Inc. 2003 Omnibus Incentive Plan with 100% vesting 5/16/09.

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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.