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PROCTER Form 4 May 13, 200	& GAMBLE CO									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSI Washington, D.C. 20549							OMMISSION	OMB APPROVAL OMB 3235-028 Number:		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Set ion 16. Filed pursuant to S Section 17(a) of the 30(h)			CHAN ection	NGES IN SECU	January 31 2005 Estimated average burden hours per response 0.5					
(Print or Type 1. Name and A CLARK R	Address of Reporting	Person <u>*</u>	2. Issue Symbol	er Name an	id Ticker o	or Trad	ing	5. Relationship of Issuer	Reporting Pe	erson(s) to
(Last) ONE PROO PLAZA	(First) (Middle) 1BLE	3. Date of	TER & G of Earliest T Day/Year) 2005			[PG]	_X_ Director _X_ Officer (give below)		% Owner her (specify
CINCINN	(Street) ATI, OH 45202			endment, I onth/Day/Ye	-	nal		6. Individual or Jo Applicable Line) _X_ Form filed by M Person	One Reporting 1	Person
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivativ	e Secu	rities Acq	uired, Disposed of	f, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deema Execution any (Month/Da	ed Date, if	3. Transactio Code (Instr. 8)	4. Securi on(A) or D (Instr. 3, Amount	ties Ad isposed 4 and (A) or	cquired d of (D)	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	05/12/2005			S	9,984	D	\$ 55.578	152,507	D	
Common Stock								9,089.77	I	By Retirement Plan Trustees
Common Stock								1,794	I	Cust. Acct. for Alissa
Common Stock								1,794	Ι	Cust. Acct. for Heather

<u>**</u>Signature of Reporting Person

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(2)

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
CLARK R KERRY ONE PROCTER AND GAMBLE PLAZA CINCINNATI, OH 45202	Х		V. COB-Glb Health Baby Family				
Signatures							
R. KERRY 05/13/2005 CLARK 05/13/2005							

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) By Norah J. Clark as Custodian for daughter, Alissa.
- (2) By Norah J. Clark as Custodian for daughter, Heather.

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.