

OPTION CARE INC/DE
Form 4
October 05, 2005

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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 *
BONACCORSI JOSEPH

(Last) (First) (Middle)

485 HALF DAY ROAD, SUITE 300

(Street)

BUFFALO GROVE, IL 60089

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
OPTION CARE INC/DE [OPTN]

3. Date of Earliest Transaction (Month/Day/Year)
10/05/2004

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)
Secretary

6. Individual or Joint/Group Filing(Check Applicable Line)
 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)	(A) or (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 Ownership (Instr. 4)
Common Stock	10/05/2005		M	1,600	A	\$ 9.02 1,600	D	
Common Stock	10/05/2005		M	1,600	D	\$ 14.38 0	D	
Common Stock	10/05/2005		M	1,395	A	\$ 9.02 1,395	D	
Common Stock	10/05/2005		M	1,395	D	\$ 14.4 0	D	
Common Stock	10/05/2005		M	100	A	\$ 9.02 100	D	

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Common Stock	10/05/2005	M	15,000	A	\$ 9.02	15,000	D
Common Stock	10/05/2005	M	15,000	D	\$ 14.5	0	D
Common Stock	10/05/2005	M	1,400	D	\$ 14.52	0	D
Common Stock	10/05/2005	M	1,400	A	\$ 9.02	1,400	D
Common Stock	10/05/2005	M	100	D	\$ 14.45	0	D
Common Stock	10/05/2005	M	100	A	\$ 9.02	100	D
Common Stock	10/05/2005	M	100	A	\$ 14.49	0	D
Common Stock	10/05/2005	M	100	A	\$ 9.02	100	D
Common Stock	10/05/2005	P	1,600	D	\$ 14.47	0	D
Common Stock	10/05/2005	M	1,600	A	\$ 9.02	1,600	D
Common Stock	10/05/2005	M	100	D	\$ 14.43	0	D
14.43	10/05/2005	M	100	D	\$ 14.41	0	D
Common Stock	10/05/2005	M	100	A	\$ 9.02	100	D

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)

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 Acquired (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)
				Code V	(A) (D)		Title

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					Date Exercisable	Expiration Date		Amount or Number of Shares	
Stock Option (right to buy)	\$ 9.02	10/05/2004		M	21,395	03/31/2003	03/31/2012	Common Stock	21,395

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BONACCORSI JOSEPH 485 HALF DAY ROAD SUITE 300 BUFFALO GROVE, IL 60089			Secretary	

Signatures

Joseph P.
Bonaccorsi

10/05/2005

**Signature of
Reporting Person

Date

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) The reported transaction is the exercise of a derivative security (e.e., stock options); the exercise price is found in column 2.

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.