

APRIA HEALTHCARE GROUP INC  
Form 4  
October 30, 2008

**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 \*  
**HIGBY LAWRENCE M**

2. Issuer Name and Ticker or Trading Symbol  
**APRIA HEALTHCARE GROUP INC [AHG]**

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)  
**10/02/2008**

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
**Chief Executive Officer**

**C/O APRIA HEALTHCARE GROUP INC., 26220 ENTERPRISE COURT**

(Street)

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

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

**LAKE FOREST, CA 92630**

(City) (State) (Zip)

**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)
			Code	V	Amount	(A) or (D)			
Common Stock	10/02/2008		G	V	15,528	D	\$ 0	97,580	D
Common Stock	10/28/2008		J <sup>(1)</sup>		97,580	D	(1)	0	D
Common Stock	10/28/2008		J <sup>(2)</sup>		80,000	D	(2)	0	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**

SEC 1474 (9-02)

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)	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)	Date Exercisable	Expiration Date	Title	Amount Number Shares
Restricted Stock Units	\$ 0	10/28/2008		J <sup>(3)</sup>	33,333	<sup>(3)</sup> 12/31/2008		Common Stock	33,333
Restricted Stock Units	\$ 0.001	10/28/2008		J <sup>(4)</sup>	68,493	<sup>(4)</sup> 02/16/2010		Common Stock	68,493
Restricted Stock Units	\$ 0.001	10/28/2008		J <sup>(5)</sup>	86,090	<sup>(5)</sup> 12/31/2010		Common Stock	86,090
Restricted Stock Purchase Right (Right to Buy)	\$ 7.6	10/28/2008		J <sup>(6)</sup>	64,000	12/31/2010 02/15/2014		Common Stock	64,000
Restricted Stock Purchase Right (Right to Buy)	\$ 6.46	10/28/2008		J <sup>(6)</sup>	128,000	12/31/2009 08/12/2013		Common Stock	128,000

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HIGBY LAWRENCE M C/O APRIA HEALTHCARE GROUP INC. 26220 ENTERPRISE COURT LAKE FOREST, CA 92630	X		Chief Executive Officer	

## Signatures

/s/ Lawrence M, Higby by Raoul Smyth,  
Attorney-In-Fact

10/28/2008

\_\_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) Canceled pursuant to the Agreement and Plan of Merger, dated as of June 18, 2008 (the "Merger Agreement"), by and among the Issuer, Sky Acquisition LLC and Sky Merger Sub Corporation and converted into the right to receive a cash payment of \$21.00 per share.
- (2) These restricted shares, which were scheduled to vest on 12/31/2011, were canceled pursuant to the terms of the Merger Agreement and the plan under which they were issued in exchange for a cash payment of \$21.00 per share.
- (3) These restricted stock units, which were scheduled to vest on 12/31/2008, were canceled pursuant to the terms of the Merger Agreement and the plan under which they were issued in exchange for a cash payment of \$21.00 per share.  
These restricted stock units, 34,246 of which were scheduled to vest on 2/16/2010 and 34,247 of which were scheduled to vest on  
(4) 2/16/2009, were canceled pursuant to the terms of the Merger Agreement and the plan under which they were issued in exchange for a cash payment of \$21.00 per share.  
These restricted stock units, 28,697 of which were scheduled to vest on 2/18/2010, 28,696 of which were scheduled to vest on 12/31/2010  
(5) and 28,697 of which were scheduled to vest on 2/18/2009, were canceled pursuant to the terms of the Merger Agreement and the plan under which they were issued in exchange for a cash payment of \$21.00 per share.  
Pursuant to the terms of the Merger Agreement and the plan under which they were issued, upon consummation of the merger on October  
(6) 28, 2008, these restricted stock purchase rights were canceled and converted into the right to receive cash in the amount of \$21.00 per right, less any applicable exercise price per right.

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.