Edgar Filing: NEIGHBORCARE INC - Form 4

NEIGHBOR	CARE INC										
Form 4											
November 24	4, 2004										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi if no long subject to Section 10 Form 4 or Form 5 obligation	er STATEM 6. Filed purs	uant to Section	SECUR	ITIES e Securit	ies Ez	xchan	VNERSHIP OF ge Act of 1934, of 1935 or Sectio	Expires: Estimated a burden hou response	irs per		
may conti <i>See</i> Instru 1(b).		30(h) of the	Investment	Compan	y Act	of 19	40				
(Print or Type R	lesponses)										
1. Name and A ARLOTTA	suer Name and ol GHBORCAF			-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
(Last)	(First) (M	iddle) 3. Dat	e of Earliest Tr	ansaction			(Clied	sk all applicable	c)		
NEIGHBOR PRATT STR	CARE, INC, 601 REET		:h/Day/Year) 3/2004				X Director X Officer (give below) Chairman		6 Owner er (specify CEO		
				Amendment, Date Original Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
BALTIMOR	RE, MD 21202							More than One R			
(City)	(State) (2	Zip) T	able I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date any (Month/Day/Ye	Code ear) (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3,	d (A) c d of (D 4 and (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	11/23/2004		F	6,623	D	<u>(1)</u>	154,158	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)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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						
1	Director	10% Owner	Officer	Other			
ARLOTTA JOHN NEIGHBORCARE, INC 601 EAST PRATT STREET BALTIMORE, MD 21202	Х		Chairman, President and CEO				
Signatures							

John F. Gaither, Jr. on behalf of John J. Arlotta by power of attorney

**Signature of 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).
- Represents shares of restricted stock forfeited to fulfill tax obligations resulting for the vested shares granted pursuant to a benefit plan (1) approved in accordance with Rule 16b-3.

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.

11/24/2004 Date