Edgar Filing: DEWBERRY J TERRY - Form 4

| Form 4 | | | | | |
|---|--|--|--|--|--|
| | | | | | |
| June 12, 2006 | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | OMB APPROVAL | | | | |
| Washington, D.C. 20549 | OMB 3235-0287 Number: | | | | |
| Check this box if no longer | Expires: January 31, | | | | |
| subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF | Estimated average 2005 | | | | |
| Section 16. SECURITIES | burden hours per | | | | |
| Form 4 or Form 5 Eilad pursuant to Spation 16(a) of the Securities Exchange Act of 1024 | response 0.5 | | | | |
| Form 5 obligations 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 | | | | | |
| may continue. $20(h)$ of the Investment Company Act of 1040 | l | | | | |
| See Instruction 50(1) of the Investment Company Act of 1940 1(b). | | | | | |
| (Print or Type Responses) | | | | | |
| 1. Name and Address of Reporting Person _2. Issuer Name and Ticker or Trading5. Relationship of FDEWBERRY J TERRYSymbolIssuer | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| MATRIA HEALTHCARE INC | (Check all applicable) | | | | |
| [MATR] | . un upplicable) | | | | |
| (Last) (First) (Middle) 3. Date of Earliest TransactionX_ Director | 10% Owner | | | | |
| (Wohll/Day/Tear) below) | Officer (give title Other (specify below) below) | | | | |
| 1960 ALLGOOD ROAD 06/12/2006 | | | | | |
| (Street) 4. If Amendment, Date Original 6. Individual or Join | 6. Individual or Joint/Group Filing(Check | | | | |
| Form filed by M | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| MARIETTA, GA 30062 | I C | | | | |
| (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, | or Beneficially Owned | | | | |
| Security (Month/Day/Year) Execution Date, if Transaction(A) or Disposed of (D) Securities (Instr. 3) Code (Instr. 3, 4 and 5) Beneficially (Month/Day/Year) (Instr. 8) Owned Following Reported | 6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4) | | | | |
| (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price | | | | | |
| Common Stock06/12/2006P1,000A\$ 20.431,000 | 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactie Code (Instr. 8) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exerci Expiration Dat (Month/Day/Y | e | 7. Title and A Underlying S (Instr. 3 and | Securities |
|---|---|---|---|--|---|--|--------------------|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Option (Right to Buy) <u>(1)</u> | \$ 28.86 | 05/31/2006 | | J | 6,000 | 05/31/2007 | 05/31/2016 | Common Stock | 6,000 |

Reporting Owners

| Reporting Owner Name / Address | | Relationsh | | |
|---|------------|------------|---------|-------|
| | Director | 10% Owner | Officer | Other |
| DEWBERRY J TERRY 1960 ALLGOOD ROAD MARIETTA, GA 30062 | Х | | | |
| Signatures | | | | |
| Roberta L. McCaw as Attorney Dewberry | 06/12/2006 | | | |
| <u>**</u> Signature of Repo | 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) Granted on 05/31/2006 under Issuer's Non-employee Stock Option Plan and vesting 1/12 a month.

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.