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OCWEN FINANCIAL CORP

Form 4

April 01, 2003

	UNITE	D STATES SECURITIES AND EXC COMMISSION	OMB APPROVAL				
FORM 4		Washington, D.C. 20549	OMB Number:K235-0287	_			
Check this box if no longer	STATEMEN	IT OF CHANGES IN BENEFICIAL	Expires: January 31, 2005 Estimated average burden hours per responseH.5				
to Sec 16. For or For obl ma cor Sec Ins 1(b) (Pr or	ject Holding tion m 4 m 5 igations y tinue. truction).	nt to Section 16(a) of the Securities E 1934, Section 17(a) of the Public Util g Company Act of 1935 or Section 30 Investment Company Act of 1940	ity				
1. Name a of Reportin	nd Address ng Person*	2. Issuer Name and Ticker or Trading Symbol		6. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
Wi N	sh, Barry Jeal	Ocwen Financial Corporation (NYSE:OCN)	X X	Director	10% Owne		
Last) (First	t) (Middle)						

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			3. IRS or Social Security Number of Reporting Person (Voluntary)	4. Sta for Mont March	h/Year	Officer (give	title below)	Other (specify) below)
1675 Blvd		ach Lakes						
(Street)				5. If Amen	Infen€k Appl		oup Filing	
West Palm Beach Florida K3401				Date of Origin	Reporting al Form f	n filed by One g Person iled by More Reporting		
(City)	(State)	(Zip)						
			Non-Derivative Seco		Table I	d of, or Benefic	ially Owned	
1. T	itle of Seo	·	4. 2. Træns firæn Date Coce (Instr. 8)	or Dispos (D) (Instr. 3, 4			ally Bene-	
			(Month/ Day/			End of Month	D) or Indirect	
			Code V An Year)	nount (A) or (D)	Price	(Instr. 3 and	(Instr. 4) (I)	

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							4)	(Instr. 4)
Common Stock (1)	03/28/0	3 S	1,000	D	\$3.08		I	By Wishco
		S		D		8,462,3	05 I	
*Sale in accordance with the Plan.								

FORM 4 (continued)			Tal	ble II				•	•	osed of, or		·	/ Owned
1. Title of Derivative Security (Instr. 3)	2. C sion or Exer Price of Deri ative Secu	act Da cise (Da 7- Ye	Month/	tion Coc		of Der ativ Sec Acc (A) or	e urities uired posed tr.	cisab and Expira	le tion	7. Title and Amount of Underlyi Securities (Instr. 3 and 4)	_	at Se ity	Deri erivSeer ve ativ curSec ities Ber Instfici
							Date	Exp	ra-	Amount or Number			M (Ins 4)
			Code	V	(4	A) (Exer- D) cisable	tion Date		of Shares			

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			s/ Paul A	A. Koches, -in-Fact								
										nature of ing Person		
**Intentional mi Violations.	sstatements or	omissions of	facts co	nstitu	ite Fed	eral Cr	riminal					
See												
18 U.S.C. 1001 and 15	U.S.C. 78ff(a)											
Note: File three copies of this Form, one of which must be manually signed.												
If space provided 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.												

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