APRIA HEALTHCARE GROUP INC

Form 4 April 18, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * MASTROVICH LAWRENCE A

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

APRIA HEALTHCARE GROUP

(Check all applicable)

President and C.O.O.

C/O APRIA HEALTHCARE

(First)

GROUP INC, 26220 ENTERPRISE COURT

(Street)

04/16/2007

3. Date of Earliest Transaction

Director X_ Officer (give title below)

10% Owner Other (specify

(Middle)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

INC [AHG`]

(Month/Day/Year)

X 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. Transactio Code (Instr. 8)		` ′	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	04/16/2007		M(1)	300	A	\$ 24.18	60,483 (2)	D		
Common Stock	04/16/2007		S(3)	300	D	\$ 34.25	60,183 (2)	D		
Common Stock	04/17/2007		M(1)	49,700	A	\$ 24.18	109,883 (2)	D		
Common Stock	04/17/2007		S(3)	49,700	D	\$ 34.25	60,183 (2)	D		

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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)	th/Day/Year) Execution Date, if TransactionD any Code Se (Month/Day/Year) (Instr. 8) A or (E		5. Number of or 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 Underlying Securitic (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
Employee Stock Option (Right to Buy) (1)	\$ 24.18	04/16/2007		M	300	04/04/2003(1)	04/03/2012	Common Stock	300
Employee Stock Option (Right to Buy) (1)	\$ 24.18	04/17/2007		M	49,700	04/04/2003(1)	04/03/2012	Common Stock	49,7

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

MASTROVICH LAWRENCE A C/O APRIA HEALTHCARE GROUP INC 26220 ENTERPRISE COURT LAKE FOREST, CA 92630

President and C.O.O.

Signatures

Lawrence A. Mastrovich by Robert S. Holcombe, Attorney-In-Fact

**Signature of Reporting Person Date

Reporting Owners 2

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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) Exercise of employee stock options granted under the Issuer's Amended and Restated 1992 Stock Incentive Plan, which vested in three installments and became fully vested on April 3, 2005.
- (2) Includes 40,000 restricted shares subject to vesting.
- (3) Sale made under terms of Reporting person's Rule 10b5-1 Trading Plan entered into on March 7, 2007.

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.