## Edgar Filing: WEST PHARMACEUTICAL SERVICES INC - Form 4

WEST PHARMACEUTIC Form 4	AL SERVI	CES IN	С								
July 19, 2005 FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). JUNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 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							ON OMB Numi Expir Estim burde respo 4,	Der: 3235-0287			
(Print or Type Responses)											
FEDERICI WILLIAM J Sym WE			2. Issuer Name <b>and</b> Ticker or Trading ymbol VEST PHARMACEUTICAL SERVICES INC [(WST)]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) 101 GORDON DRIVE	(Month			e of Earliest Transaction th/Day/Year) 5/2005				Director 10% Owner X Officer (give title Other (specify below) VP & CFO			
			mendment, Date Original Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>				
(City) (State)	(Zip)	Ta	ble I - Non	-Derivati	ve Sec	urities A	Person cauired. Dispose	d of. or Ber	neficially Owned		
1.Title of Security (Instr. 3)2. Transaction Da (Month/Day/Year		ed Date, if	3. Transactio Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ties A ispose 4 and (A) or	cquired d of (D) 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 Indirect Beneficial Ownership (Instr. 4)		
Common 07/15/2005 Stock			Code V	Amount	(D) A	Price \$ 27.86	7,890.6594 ( <u>1)</u>	I	Non-Qualified Deferred Compensation Plan		
Common Stock							24,286.215 (1)	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships							
	Director	10% Owner	Officer	Other				
FEDERICI WILLIAM J 101 GORDON DRIVE LIONVILLE, PA 19341			VP & CFO					
Signatures								
By: By: Joanne K. Boyle as Agent for		07/19/2005						

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).

(1) Reflects additional shares purchased through dividend reinvestments based on most recent plan statement.

Date

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.