### Edgar Filing: HEALTH CARE REIT INC /DE/ - Form 4

HEALTH CARE REIT INC /DE/ Form 4 December 16, 2005

#### **OMB APPROVAL** FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or response... 0.5 Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b). (Print or Type Responses) 1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **BRAUN RAYMOND W** Issuer Symbol HEALTH CARE REIT INC /DE/

			[HCN]				
(Last) (First) (Middle) ONE SEAGATE, SUITE 1500		~ /	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2005	Director 10% Owner X Officer (give title Other (specify below) below) President & CFO			
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)			

#### **TOLEDO, OH 43604**

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	Secu	rities Aco	uired, Disposed	of, or Beneficia	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose 4 and (A) or	ed 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 Stock	12/15/2005		Code V F	Amount 1,771	(D) D	Price \$ 33.92	58,843	D	
Common Stock							10,008	Ι	Custodian
Common Stock							30,570	Ι	Revocable Trust (2)
Common Stock							6,000	Ι	Custodian $(3)$

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

(Check all applicable)

\_X\_ Form filed by One Reporting Person \_\_\_\_ Form filed by More than One Reporting

Person

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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. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	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**

Reporting Owner Name / Address	Relationships							
F8	Director	10% Owner	Officer	Other				
BRAUN RAYMOND W ONE SEAGATE SUITE 1500 TOLEDO, OH 43604			President & CFO					
Signatures								
By: Frin C Ibele Attorney-in-F	Fact For 1	Raymond W						

By: Erin C. Ibele Attorney-in-Fact For: Raymond W. Braun

\*\*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).

12/16/2005

Date

- (1) Custodian for Hillary J. Braun under the OH Unif Gift to Minors Act
- (2) Theresa P. Braun Revocable Trust
- (3) Custodian for Raymond W. Braun, Jr. under the OH Unif Gift to Minors Act

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.