Edgar Filing: HUBBLE DON W - Form 4

| HUBBLE DO Form 4 | ON W | | | | | | | | | | | |
|---|---|---|--|--|-----|-------------|----------------|--|--|--|----------------|--|
| January 24, 2 | 2005 | | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION | | | | | | | | | . | OMB APPROVAL | | |
| Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | | |
| Check thi if no long subject to Section 14 Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b). | Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section 16 (a) of the Investment Company Act of 1940 | | | | | | | Expires: January 31 2005 Estimated average burden hours per response 0.5 | | | | |
| (Print or Type R | Responses) | | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> HUBBLE DON W | | | 2. Issuer Name and Ticker or Trading Symbol ANGELICA CORP /NEW/ [AGL] | | | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) | (First) (| Middle) | 3. Date of Earliest Transaction | | | | (Cheo | ck all applicable | 5) | | | |
| 1105 SANCTUARY PARKWAY, SUITE 210 | | | (Month/Day/Year) 01/20/2005 | | | | | | X Director Officer (give below) | e title 10% Owner e titleX Other (specify below) Chairman | | |
| | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| ALPHAKEI | TTA, GA 50004 | | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non | -De | erivative S | Securit | ties Acc | quired, Disposed o | f, or Beneficia | lly Owned | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year) | | 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price | | |) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| Common Stock, \$1 par value | 01/20/2005 | | | | | 900 | D | \$ 0 | 46,613 | D | | |
| Common Stock, \$1 par value | | | | | | | | | 17,900 | I <u>(1)</u> | Held by spouse | |

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.

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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) | ; | Date | 7. Titl Amou Under Secur (Instr. | int of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Relationships | | | | | |
|---------------|-----------|--------------------|----------------------------|--|--|
| Director | 10% Owner | Officer | Other | | |
| Х | | | Chairman | | |
| | | | | | |
| | 2.1000 | Director 10% Owner | Director 10% Owner Officer | | |

/s/ Don W. 01/21/2005 Hubble

**Signature of Reporting Person 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) Reporting person disclaims beneficial ownership of these shares.

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.