## Edgar Filing: OPTION CARE INC/DE - Form 4/A

OPTION CA Form 4/A May 26, 2000											
FORM	IA								OMB AF	PROVAL	
	UNITE	D STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long	er								Expires:	January 31, 2005	
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERS						NERSHIP OF	Estimated average burden hours per				
Form 4 or Form 5		urguant to	Section 1	6(a) of th	e Securit	ies F	vchang	e Act of 1934,	response	0.5	
obligation may cont <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public Ut		ding Con	npan	y Act of	1935 or Section	n		
(Print or Type F	Responses)										
BLECHSCHMIDT EDWARD A Symbol			Name and			-	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			(Chec	k all applicable	)	
485 HALF I	DAY ROAD, S	SUITE 300	(Month/D 05/25/20	ay/Year)				X Director Officer (give below)		Owner er (specify	
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	oint/Group Filin	g(Check	
Filed(Mon 05/25/20 BUFFALO GROVE, IL 60089				ith/Day/Year 005	)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
DUITALO		////						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any	ned n Date, if Day/Year)	Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	ispose 4 and (A) or	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)		
Common Stock	05/25/2006			P	Amount 3,940	(D) A	Price \$ 11.25	5,000	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivativ Security (Instr. 3)	e Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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		Relationsh					
	Director	10% Owner	Officer	Other			
BLECHSCHMIDT EDWARD A 485 HALF DAY ROAD SUITE 300 BUFFALO GROVE, IL 60089	Х						
Signatures							
Joseph Bonaccorsi, Attorney-In-Fact	05/	/26/2006					
**Signature of Reporting Person		Date					
Explanation of Responses:							

## 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).

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.