## Edgar Filing: ALLIANCE IMAGING INC /DE/ - Form 4

ALLIANCE IMAGING INC /DE/ Form 4 October 02, 2006 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 FREEMAN KENNETH W/NJ Issuer Symbol ALLIANCE IMAGING INC /DE/ (Check all applicable) [AIQ] (Last) (First) (Middle) 3. Date of Earliest Transaction X\_ Director 10% Owner Officer (give title Other (specify (Month/Day/Year) below) below) 1900 S. STATE COLLEGE 09/30/2006 BLVD., SUITE 600 (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person \_ Form filed by More than One Reporting ANAHEIM, CA 92806 Person (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 4. Securities 5. Amount of 1.Title of 2. Transaction Date 2A. Deemed 3. 6. Ownership 7. Nature of Security (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Securities Form: Direct Indirect (Instr. 3) any Code Disposed of (D) Beneficially (D) or Indirect Beneficial (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) Owned **(I)** Ownership Following (Instr. 4) (Instr. 4) Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Numbe	r 6. Date Exercisable and	7. Title and Amount	8. Pric
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction of Deriva	ive Expiration Date	of Underlying	Deriva

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)			(Month/Day/Year)		Securities (Instr. 3 and 4)		Securit (Instr. :
				Code N	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock	\$ 7.81 <u>(1)</u>	09/30/2006		А	800.3		<u>(1)</u>	(1)	common stock	800.3	\$ 7.81

## **Reporting Owners**

Reporting Owner Name / Add	lress	Relationships				
	Director	10% Owner	Officer	Other		
FREEMAN KENNETH W/N 1900 S. STATE COLLEGE F SUITE 600 ANAHEIM, CA 92806						
Signatures						
Christopher J. Joyce 10	0/02/2006					

<u>\*\*</u>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) The phantom shares are to be settled in common stock upon the reporting person's separation from the Issuer's Board of Directors on a one for one basis for shares of common stock.
- (2) The phantom stock units were accrued under the Issuer's Directors' Deferred Compensation Plan during the third quarter of 2006 at \$7.81 per phantom share.

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.