QUEST DIAGNOSTICS INC

Form 4 October 04, 2005

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction 1(b).

SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *

PFEIFFER GARY M

(Last)

1.Title of

Security

(Instr. 3)

Symbol

QUEST DIAGNOSTICS INC [DGX]

2. Issuer Name and Ticker or Trading

ONE MALCOLM AVENUE

(First)

(Middle)

3. Date of Earliest Transaction (Month/Day/Year)

10/01/2005

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

OMB

Number:

Expires:

response...

Estimated average

burden hours per

OMB APPROVAL

3235-0287

January 31,

2005

0.5

X_ Director 10% Owner Officer (give title Other (specify below)

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Ownership

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

TETERBORO, NJ 07608

(City) (State) (Zip) 2. Transaction Date 2A. Deemed

(Month/Day/Year)

3. 4. Securities

Execution Date, if Code (Instr. 8) (Month/Day/Year)

TransactionAcquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 5. Amount of Securities Beneficially Owned Following

Reported

Transaction(s)

(Instr. 3 and 4)

Form: Direct (I)

7. Nature of Indirect (D) or Indirect Beneficial Ownership

(Instr. 4) (Instr. 4)

or Code V Amount (D) Price

(A)

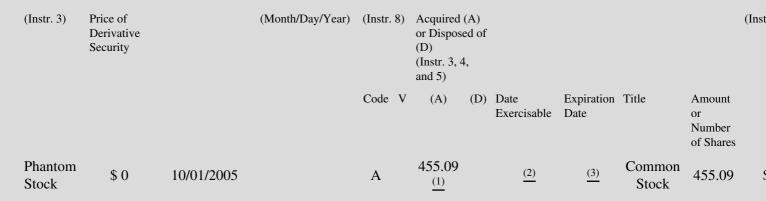
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 8. Pı Derivative (Month/Day/Year) Execution Date, if TransactionDerivative **Expiration Date Underlying Securities** Conversion Deri (Month/Day/Year) (Instr. 3 and 4) Security or Exercise Code Securities Secu any

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Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

PFEIFFER GARY M

ONE MALCOLM AVENUE X

TETERBORO, NJ 07608

Signatures

Sirisha

Gummaregula 10/04/2005

**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).
- The Phantom Stock Units are accrued on a periodic basis under the Quest Diagnostics Incorporated Deferred Compensation Plan and are to be settled in cash based on the then fair market value of the common stock of Quest Diagnostics Incorporated (the "Company") upon the Reporting Person's termination of services as a director of the Company. Reporting Person's current term expires in May 2008. The information was obtained from the plan administrator as of the current date.
- (2) Exercise date is not appplicable as this is not a stock option.
- (3) Expiration date is not applicable since this is not a stock option.
- (4) The total of 797.68 reflected in this column includes only the Phantom Stock Units credited on July 1, 2005 and October 1, 2005. Reporting Person has accrued a total of 1,280.94 Phantom Stock Units to date in his Deferred Compensation Account.

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.

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