## Edgar Filing: HEALTHCARE SERVICES GROUP INC - Form 4

HEALTHCARE SERVICES GROUP INC Form 4

November 04,	, 2005									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this if no longer	r	ENT OF CHAN	<b>DF CHANGES IN BENEFICIAL OWN</b>					Expires:	January 31, 2005	
subject to Section 16. Form 4 or			SECURITIES					Estimated a burden hour response		
Form 5 obligations may contin <i>See</i> Instruc 1(b).	Section 17(a)	uant to Section 10 of the Public Ut 30(h) of the In	ility Hold	ing Com	pany	Act of 1				
(Print or Type Re	esponses)									
1. Name and Add HUDSON RI	erson <u>*</u> 2. Issuer Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
			HCARE S INC [HC		ES		(Check	all applicable	)	
(Last) 3220 TILLM	(First) (Mi AN DR, SUITE 3	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 11/02/2005				Director 10% Owner X Officer (give title Other (specify below) below) Vice President			
		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check Applicable Line)				
BENSALEM	, PA 19020					_	X_ Form filed by O Form filed by Me erson			
(City)	(State) (Z	Cip) Table	e I - Non-De	erivative S	Securi	ties Acqui	red, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, in			4. Securi or(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(msu. 4)		
COMMON STOCK	11/02/2005		М	5,220	А	\$ 8.2889	12,908	D		
COMMON STOCK	11/02/2005		S	5,220	D	\$ 19.22	7,688	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.

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
STOCK OPTION	\$ 8.2889	11/02/2005		М	5,220	06/26/2004	12/26/2013	COMMON STOCK	5,220

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 8	Director	10% Owner	Officer	Other				
HUDSON RICHARD W 3220 TILLMAN DR SUITE 300 BENSALEM, PA 19020			Vice President					
Signatures								
/S/ RICHARD W. HUDSON	11/04	/2005						
**Signature of Reporting Person	Dat	te						

## **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.