Edgar Filing: HEALTH CARE REIT INC /DE/ - Form 4

HEALTH CARE REIT INC /DE/

Form 4

November 19, 2007

Section 16.

Form 4 or

FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 January 31,

Expires: 2005
Estimated average

burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

1(b).

(Print or Type Responses)

BRAUN RAYMOND W

1. Name and Address of Reporting Person *

2.1			HEALTH CARE REIT INC /DE/ [HCN]					(Check all applicable)					
Ol	(Last) (First) (Middle) ONE SEAGATE, SUITE 1500				of Earliest T Day/Year) 2007	ransactior	1		_X_ Director 10% Owner _X_ Officer (give title Other (specify below) President				
(Street) TOLEDO, OH 43604				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				
10LEDO, OH 43004									Person				
	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Own										ally Owned		
Se	Fitle of curity str. 3)	2. Transaction Da (Month/Day/Year	ned n Date, if Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
	ommon ock	11/15/2007			S(1)	883	D	\$ 43.951	105,082	D			
	ommon ock								10,000	I	Custodian (2)		
	ommon ock								10,008	I	Custodian (3)		
	ommon ock								37,698	I	Revocable Trust (4)		

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

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SEC 1474 (9-02)

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.	6. Date Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	nNumber Expiration		ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security	ity Acquired								Follo	
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						Ì
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable Date	Title Number				
						Z.ici cisuoie	2		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

X

Director 10% Owner Officer Other

BRAUN RAYMOND W ONE SEAGATE SUITE 1500

President

TOLEDO, OH 43604

Signatures

By: Erin C. Ibele Attorney-in-Fact For: Raymond W. Braun

> **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 shares covered by this Form 4 have been sold pursuant to a Rule 10b5-1 Sales Plan dated March 12, 2007 and as modified effective November 14, 2007.

11/19/2007

- (2) Custodian for Raymond W. Braun, Jr. under the OH Unif Gift to Minors Act
- (3) Custodian for Hillary J. Braun under the OH Unif Gift to Minors Act
- (4) Theresa P. Braun Revocable Trust

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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