#### FMC TECHNOLOGIES INC

Form 4 March 03, 2006

## FORM 4

### **OMB APPROVAL**

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

OMB Number:

3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

burden hours per

response...

5. Relationship of Reporting Person(s) to

0.5

Form 4 or 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

**SECURITIES** 

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \*

POTTER R	Symbol	Symbol FMC TECHNOLOGIES INC [FTI]					Issuer (Check all applicable)				
	FMCT										
(Last)	(First) (M	(iddle) 3. Date o	3. Date of Earliest Transaction								
1002 GEAR		(Month/Day/Year)				Director _X_ Officer (gi	% Owner ner (specify				
1803 GEAR	03/01/2	03/01/2006				below)	iei (specify				
								Vice President			
	(Street)	4. If Amo	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		Filed(Mo	Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
HOUSTON	, TX 77067							More than One R			
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of	Security (Month/Day/Year) Execut		3. 4. Securities			5. Amount of	6. Ownership	7. Nature of			
Security			on Date, if TransactionAcquired (A) or				Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Day/Year)		Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)			Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
	(Monul/Day/Teal) (Ilisti. 8) (Ilisti. 3, 4 ali			7 and	3)	Following	(Instr. 4)	(Instr. 4)			
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
~			Code V	Amount	(D)	Price	(IIIsti. 3 and 4)				
Common Stock	03/01/2006		F	5,290	D	\$ 0	54,029	D			
C									By		
Common							6,501.71	I	Qualified		
Stock									401(k) Plan		
Reminder: Rep	ort on a separate line	for each class of secu	urities benefi	cially own	ed dir	ectly or	indirectly.				

number.

information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control

SEC 1474

Persons who respond to the collection of

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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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	int 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	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3, 4, and 5)						
									Amount		
									Amount		
						Date	Expiration able Date	or Title Number of			
						Exercisable					
				G 1 W							
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

POTTER ROBERT L 1803 GEARS ROAD HOUSTON, TX 77067

Vice President

## **Signatures**

By: By: James L. Marvin, attorney-in-fact for

03/03/2006

\*\*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).

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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