Glazer Jeffrey J Form 4 December 12, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005
Estimated average

burden hours per response... 0.5

Check this box if no longer subject to Section 16.

Section 16.

Form 4 or

Form 5

Obligations

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

Obligations

Section 16(a) of the Securities Exchange Act of 1935, as Section 16(b) of the Securities Exchange Act of 1935, as Section 17(c) of the Securities Exchange Act of 1935, as Section 17(c) of the Securities Exchange Act of 1935, as Section 17(c) of the Securities Exchange Act of 1935, as Section 18(c) of the Securities Exchange Act of 1934, obtained to the Securities Exchange Act of 1934, obtained

may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Glazer Jeffrey J

2. Issuer Name **and** Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

CHOICEPOINT INC [CPS]

(Last) (First) (Middle)

(Street)

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

12/06/2007

____ Director _____ 10% Owner ____ X__ Officer (give title _____ Other (specify

(Check all applicable)

CHOICEPOINT INC., 1000 ALDERMAN DRIVE

4. If Amendment, Date Original

Senior Vice President

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

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

Person

below)

ALPHARETTA, GA 30005

(City)	(State)	(Zip) Tab	le I - Non-	Derivativ	e Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security	2. Transaction Date (Month/Day/Year)	Execution Date, if		omr Dispo	sed of	` ′	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)		any (Month/Day/Year)	Code (Instr. 8)	(Instr. 3,	(A) or		Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
Common stock	12/06/2007	12/06/2007	Code V M	Amount 8,056	(D)	Price \$ 10.9375	51,634	D	
Common stock							7,261	I	By 401(k) Plan

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.

SEC 1474

(9-02)

Edgar Filing: Glazer Jeffrey J - Form 4

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. Transaction Code (Instr. 8)			erivative Expiration Date rities (Month/Day/Year) aired or osed of r. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8 D S (I
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock option, right to buy	\$ 10.9375	12/06/2007	12/06/2007	M		8,056	01/27/1999	01/27/2008	common	8,056	1

Reporting Owners

Reporting Owner Name / Address	Keiauonsnips						
	Director	10% Owner	Officer	Other			

Glazer Jeffrey J CHOICEPOINT INC. 1000 ALDERMAN DRIVE ALPHARETTA, GA 30005

Senior Vice President

Signatures

Jeffrey J. Glazer 12/12/2007

**Signature of 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.

Reporting Owners 2