DIEBOLD INC Form 4 April 07, 2005

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16.

January 31, Expires: 2005

Form 4 or Form 5 obligations STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BOCKIUS LOUIS V III**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Symbol

(Middle)

(Zip)

DIEBOLD INC [DBD]

(Check all applicable)

(First) (Last)

3. Date of Earliest Transaction

(Month/Day/Year)

04/05/2005

_X__ Director 10% Owner Other (specify Officer (give title

C/O DIEBOLD. **INCORPORATED, 5995 MAYFAIR**

(Street)

(State)

ROAD

(City)

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

NORTH CANTON, OH 44720

(City)	(State)	(Zip) Tabl	e I - No	n-D	erivative :	Secur	ities Acqu	uired, Disposed of	f, or Beneficial	ly Owned
1. Title of Security	2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transa Code	ectio	4. Securi	ispose	d of (D)	5. Amount of Securities	6. Ownership Form: Direct	7. Nature of Indirect Beneficial
(Instr. 3)		any (Month/Day/Year)	(Instr.	8)	(Instr. 3,	(A)	3)	Beneficially Owned Following Reported	(D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
			Code	V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common	04/05/2005		M		3,500	A	\$ 28.59	186,087	D	
Common	04/06/2005		G	V	665	D	\$0	185,422	D	

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.

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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)	Secur Acqui (A) or	rivative ities ired rosed of . 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amo or Num of Share
Non-Qualified Stock Option	\$ 28.59	04/05/2005		M		3,500	04/19/2001	04/18/2005	Common Stock	3,5
Non-Qualified Stock Option	\$ 29.91						04/26/2002	04/25/2006	Common Stock	4,0
Non-Qualified Stock Option	\$ 38.64						04/25/2003	04/24/2012	Common Stock	4,0
Non-Qualified Stock Option	\$ 39.26						04/24/2004	04/23/2013	Common Stock	4,0
Non-Qualified Stock Option	\$ 49.24						04/22/2005	04/21/2014	Common Stock	4,5

Reporting Owners

Reporting Owner Name / Address	Relationships						
• 0	Director	10% Owner	Officer	Other			
BOCKIUS LOUIS V III C/O DIEBOLD, INCORPORATED 5995 MAYFAIR ROAD NORTH CANTON, OH 44720	X						

Signatures

Chad F. Hesse, Att'y.-in-Fact for Louis V.

Bockius III

**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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