## Edgar Filing: CLECO CORP - Form 4

CLECO CORP       Form 4       June 02, 2005       States and experimentation of the public states and experimentation of the public Utility Holding Company Act of 1935 or Section 16(a) of the Investment Company Act of 1940       OMB APPROVAL         Check this box if no longer subject to Section 16.       STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES       OMB APPROVAL         State 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 16(b).       State of the Public Utility Holding Company Act of 1935 or Section 1934, Section 17(a) of the Investment Company Act of 1940												
(Print or Type l	Responses)											
POWELL CATHERINE C Symbol									5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	3. Date of Earliest Transaction					(Chec	k all applicable	2)		
(Month/D P.O. BOX 5000 06/01/20			/Day/Year) 2005					Director 10% Owner Officer (give title Other (specify below) below) Sr. Vice President				
			nendment, Date Original onth/Day/Year)					<ul> <li>6. Individual or Joint/Group Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting Person</li> </ul>				
(City)	(State)	(Zip)	Table	e I - Nor	ı-D	erivative S	Securi	ties Aca	uired, Disposed of	or Beneficial	llv Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution Execution any	med	3. Transa Code (Instr. 3	ctio 8)	4. Securit m(A) or Dis (Instr. 3, 4	ies Ac sposed 4 and 5 (A) or	equired l of (D) 5)	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	
Common Stock, \$1 par	02/25/2004			Code G <u>(1)</u>	v	Amount 808	(D) D	Price \$ 19.1 (2)	31,520	D		
Common Stock, \$1.00 par	06/01/2005			D		15,714	D	<u>(3)</u>	15,806	D		
Common Stock, \$1.00 par	06/01/2005			A		15,602	A	<u>(4)</u>	31,408	D		

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

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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.

 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)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
POWELL CATHERINE C P.O. BOX 5000 PINEVILLE, LA 71361-5000			Sr. Vice President					
Signatures								
Judy P Miller Atty-in-Fact for	· Catherin	e C						

Judy P. Powell	Powell			
	**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).
- (1) Shares gifted to a charitable organization.
- (2) Closing price of Company stock on date of gift.
- (3) Shares forfeited under the Company's 2000 Long-Term Incentive Compensation Plan upon separation from the Company.
- (4) Shares acquired under the Company's 2000 Long-Term Incentive Compensation Plan upon separation from the Company.

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.