

SLADES FERRY BANCORP  
Form 5  
February 14, 2005

**FORM 5**

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).  
Form 3 Holdings Reported Form 4 Transactions Reported

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

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

1. Name and Address of Reporting Person \*  
OLIVEIRA LAWRENCE J

2. Issuer Name and Ticker or Trading Symbol  
SLADES FERRY BANCORP [SFBC]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)  
12/31/2004

Director  10% Owner  
 Officer (give title below)  Other (specify below)

20 HOLLY LANE

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

MATTAPOISETT, MA 02739

Form Filed by One Reporting Person  
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				(A) Amount	or (D) Price			
Common Stock, par value \$0.01	10/15/2004	Â	J	138	A \$ 19.01	233	D	Â
Common Stock, par value \$0.01	10/15/2004	Â	J	1	A \$ 19.01	29,734	I <sup>(1)</sup>	See Note (1)
Common Stock, par value \$0.01	07/23/2004	Â	J	1	A \$ 22.22	0	D	Â

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Common Stock, par value \$0.01	07/23/2004	Â	J	118	A	\$ 22.22	0	D	Â
Common Stock, par value \$0.01	04/16/2004	Â	J4	121	A	\$ 21.8	0	D	Â
Common Stock, par value \$0.01	04/12/2004	Â	S4	1,100	D	\$ 21.86	0	D	Â
Common Stock, par value \$0.01	04/06/2004	Â	S4	1,000	D	\$ 21.9	0	D	Â

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

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(9-02)

**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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
					(A)	(D)	Date Exercisable	Expiration Date		
Stock Option (Right to Buy)	\$ 10	Â	Â	Â	Â	Â	04/10/2000	04/09/2005	Common Stock	2,000
Stock Option (Right to Buy)	\$ 9.5	Â	Â	Â	Â	Â	04/10/2001	04/09/2006	Common Stock	2,000
Stock Option (Right to Buy)	\$ 14.15	Â	Â	Â	Â	Â	04/09/2002	04/10/2007	Common Stock	2,000
Stock Option	\$ 14.59	Â	Â	Â	Â	Â	04/15/2003	04/14/2008	Common Stock	2,000

(Right to Buy)

Stock

Option (Right to Buy)	\$ 19.25	^	^	^	^	^	05/11/2004	05/10/2009	Common Stock	2,000
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
OLIVEIRA LAWRENCE J 20 HOLLY LANE MATTAPOISETT, MA 02739	^ X	^	^	^

## Signatures

/s/ Isola A. Anctil for Lawrence J. Oliveira, by power of attorney 02/10/2005

\_\_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) As Trustee for Business Profit Sharing Plan

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.