## Edgar Filing: ESCARRA VICKI B - Form 4

ESCARRA	VICKI B									
Form 4 June 29, 20	75									
								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check t if no lor subject Section Form 4	NGES IN BENEFICIAL OWNERSHIP OF SECURITIES					imated average den hours per				
Form 5 obligation may con <i>See</i> Inst 1(b).	ons Section 17(a	suant to Section a) of the Public U 30(h) of the I	Jtility Hole	ding Cor	npany	Act of	1935 or Section			
(Print or Type	Responses)									
ESCARRA VICKI B Symbo			Issuer Name <b>and</b> Ticker or Trading nbol WARDS A G INC [age]				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M		of Earliest Ti		;c]		(Check	k all applicable	)	
· · ·	R LINES INC, 950	(Month/	Day/Year)	lansaction			X Director Officer (give below)		Owner r (specify	
			mendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ATLANTA	A, GA 30308						Form filed by M Person			
(City)	(State) (	Zip) Tak	ole I - Non-I	Derivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	sposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
common	06/28/2005		P	139	A	\$ 42.86	2,243	D		

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. ofNumber 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 Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
ESCARRA VICKI B DELTA AIR LINES INC 950 POST OFFICE 20706 ATLANTA, GA 30308	Х						
Signatures							
Gabriel Vuagniaux By POA	06/29/2	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).

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.