

Edgar Filing: CHOUEST LANEY J MD - Form 5

CHOUEST LANEY J MD

Form 5

February 14, 2003

1. Name and Address of Reporting Person
 Chouest, M.D., Laney J.
 16201 East Main Street
 PO Box 310
 Galliano, LA 70354
 USA
2. Issuer Name and Ticker or Trading Symbol
 Kaman Corporation (KAMNA)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year
 12/2002
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
 Director 10% Owner
 Officer (give title below) Other (specify below)
7. Individual or Joint/Group Filing (Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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

| 1. Title of Security | 2. Trans- action Date (Month/ Day/ Year) | 2A.Execu- tion Date (Month/ Day/ Year) | 3. Trans- action Code | 4. Securities Acquired (A) or Disposed of (D) Amount A/D Price | 5. Amo Securi Benefi Owned Follow Yea |
|----------------------|---------------------------------------------------------|-------------------------------------------------------|-----------------------------|----------------------------------------------------------------------------|------------------------------------------------------|
| Kaman Class A Common | | | | | 4923 |

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

| 1. | 2. | 3. | 3A. | 4. | 5. | 6. | 7. |
|------------------------------------|-----------------------------|--------------------------|--------------------------|-----------|--------------------------------------------------------------------------------|-------------------------------------------|-------------------------------------------------------------------------------------------|
| Title of Derivative Security | Deriv- ative Security | (Month/ Day/ Year) | (Month/ Day/ Year) | tion Code | Number of Derivative Securities Acquired(A) Disposed(D) (A) (D) | Date Exercis- able (Month/Day/Year) | Title and Amount of Underlying Securities Amount or Number of Shares |

Explanation of Responses:

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SIGNATURE OF REPORTING PERSON
/s/ Laney J. Chouest, M.D.

DATE
02/14/2003