WEISNER AIMEE S Form 4

July 28, 2005

FORM 4

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

OMB Number: 3235-0287

Estimated average

burden hours per

response...

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

0.5

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue. See Instruction

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(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * WEISNER AIMEE S							Is	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) C/O ADVANCED MEDICAL OPTICS, INC., 1700 E. ST. ANDREW PLACE			UMOHIH/Day/Tear) =					Director 10% Owner _X Officer (give title Other (specify below) CVP, General Counsel & Sec'y			
	(Street)				Oate Origin ar)	al	Α	5. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting			
SANTA A	NA, CA 92705						– P	Person	re man one rep	orting	
(City)	(State)	(Zip)	Tal	ole I - Non-	Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) Execution Date any (Month/Day/Ye			Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)				5. Amount of Securities Ownership Indirect Beneficially Form: Beneficia Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4)			
Common Stock	07/26/2005			M	12,136	A	\$ 8.9401	15,522.5678 (1)	D		
Common Stock	07/26/2005			S(2)	12,136	D	\$ 40.6696	3,386.5678 (1)	D		
Common Stock	07/26/2005			M	62	A	\$ 7.0347	3,448.5678 (1)	D		
Common Stock	07/26/2005			S(2)	62	D	\$ 40.6696	3,386.5678 (1)	D		

303.1595

I

Edgar Filing: WEISNER AIMEE S - Form 4

Common By Stock 401(k) Trust (as of

5/23/05)

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.

SEC 1474 (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 or 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 8.9401	07/26/2005		M	12,136	01/24/2004	01/24/2010	Common Stock	12,136
Employee Stock Option (Right to Buy)	\$ 7.0347	07/26/2005		M	62	12/10/2003	12/10/2009	Common Stock	62

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

WEISNER AIMEE S C/O ADVANCED MEDICAL OPTICS, INC. 1700 E. ST. ANDREW PLACE SANTA ANA, CA 92705

CVP, General Counsel & Sec'y

Reporting Owners 2

Signatures

Aimee S. 07/28/2005 Weisner

**Signature of Date
Reporting Person

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) Includes an aggregate of 3,347.5678 shares acquired under the Advanced Medical Optics, Inc. Employee Stock Purchase Plan through June 30, 2005.
- (2) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on February 18, 2005.

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.

Signatures 3