#### SLADES FERRY BANCORP

Form 4

March 16, 2005

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Check this box if no longer

subject to Section 16. Form 4 or

Form 5 obligations may continue.

See Instruction

1. Name and Address of Reporting Person \*

MACOMBER FRANCIS A

**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

2. Issuer Name and Ticker or Trading

SLADES FERRY BANCORP

Symbol

1(b).

(Print or Type Responses)

		[SFBC]				(Check an applicable)					
(Last) (First) (Middle) 27 CYPRESS ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/16/2005					_X_ Director 10% Owner Officer (give title Other (specify below)		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
	SOMERSET	, MA 02726						Form filed by More than One Reporting Person			
	(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	ally Owned
	1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8)	Disposed (Instr. 3,	d (A) o	Price	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 Indirect Beneficial Ownership (Instr. 4)
	Stock, par value \$.01	03/16/2005			M	2,000	A	\$ 10	100,664	D	
	Common Stock, par value \$.01								5,471	I	Self as custodian for family members
	Common Stock, par value \$.01								1,544	I	Spouse as custodian for family members

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

**OMB** 

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Estimated average

burden hours per

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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. Transacti Code (Instr. 8)	Transaction Derivative Code Securities		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
Option (right to buy)	\$ 10	03/16/2005		M		2,000	04/10/2000	04/09/2005	Common Stock (\$.01 par value)	2,000
Option (right to buy)	\$ 9.5						04/10/2001	04/09/2006	Common Stock (\$.01 par value)	2,000
Option (right to buy)	\$ 14.15						04/09/2002	04/10/2007	Common Stock (\$.01 par value)	2,000
Option (right to buy)	\$ 14.59						04/15/2003	04/14/2008	Common Stock (\$.01 par value)	2,000
Option (right to buy)	\$ 19.25						05/11/2004	05/10/2009	Common Stock (\$.01 par value)	2,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
• 0	Director	10% Owner	Officer	Other			

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MACOMBER FRANCIS A
27 CYPRESS ROAD X
SOMERSET, MA 02726

## **Signatures**

/s/ Insola A. Anctil for Francis A. Macomber by power of attorney 03/16/2005

\*\*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.

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