#### Edgar Filing: ANALOGIC CORP - Form 4

ANALOGIC CORP									
Form 4									
March 24, 2005				OMB AF	PROVAL				
FORM 4 UNITED S	OMB Number:	3235-0287							
Check this box		shington, D.C. 20549		Expires:	January 31,				
Subject to Section 16. Form 4 or		NGES IN BENEFICIAL OWN SECURITIES		Estimated average burden hours per response (					
Form 5 obligations may continue. See Instruction 1(b). 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									
(Print or Type Responses)									
1. Name and Address of Reporting P GORDON BERNARD M	Symbol		5. Relationship of Reporting Person(s) to Issuer						
		OGIC CORP [ALOG]	(Check	all applicable	)				
(Last) (First) (M	,	of Earliest Transaction Day/Year)	_X_ Director		Owner				
C/O NEUROLOGICA CORP ELECTRONICS AVENUE	2., 14 03/24/2	2005	Officer (give titleOther (specify below) below)						
(Street)	(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					
DANVERS, MA 01923			Form filed by Mo Person						
(City) (State) (A	(Zip) Tab	le I - Non-Derivative Securities Acqu	uired, Disposed of,	or Beneficial	ly Owned				
(Instr. 3)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired (A) Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price	<ul> <li>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</li> </ul>	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common 03/24/2005 Stock		S 4,000 D \$ 42.7315	905,674	I	by Trust 12/19/86				
Common Stock			15,623	Ι	by Trust 11/18/82				

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.

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 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

**Reporting Owner Name / Address** 

Relationships

10% Owner Officer Other

GORDON BERNARD M C/O NEUROLOGICA CORP. 14 ELECTRONICS AVENUE DANVERS, MA 01923

### Signatures

By: Bruce Garr, by Power of Attorney For: Bernard M. Gordon

\*\*Signature of Reporting Person

# **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Director

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\*\* 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.

03/24/2005

Date