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C INC 4					
hber 07, 2001 UNITED STATES SECURITIES A Washington, D.C. 20549	ND EXCHANGE COMMIS	SION			
FORM 4 STATEMENT OF CHANGES IN BE	NEFICIAL OWNERSHIP				
 Check this box if no l Form 4 or Form 5 oblig Name and Address of Rep Cloninger, III, Kriss #5 Odom Drive 	ations may continu				
Hamilton, GA 31811 2. Issuer Name and Ticker AFLAC INCORPORATED (AFL 3. I.R.S. Identification N)	Person, if	an entity	(Voluntary)
 Statement for Month/Yea 11/01 If Amendment, Date of O Relationship of Reporti [X] Director [X] Officer (give title President AFLAC Incorpo Chief Financial Officer 	riginal (Month/Yea ng Person(s) to Is [] 10% Ow below) [] Other	suer (Check ner		able)	
7. Individual or Joint/Gro [X] Form filed by One R [] Form filed by More Table I Non-Derivative S	eporting Person than One Reporting	Person		ficially O	wned
1)Title of Security		2)Trans- action Date (Month/ Day/Year)	action Code Code V	or Dispose	A or
Table II (PART 1) Derivat 1)Title of Derivative Security	ive Securities Acq	uired, Dispo	sed of, or 4)Tr. actic Code	ans- 5)Nui on Secui or D. V A	mber of Derivativ rities Acquired (isposed of (D) D
Employee Stock Option (rig buy) (1)	ht to\$24.9800	11/13/01	А		00

Table II (PART 2) Derivative Securities Acquired, Disposed of, or Beneficially Owned (Columns 1 _____ 1)Title of Derivative 3)Trans- 7)Title and Amount 8)Price

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Security action Date		of Underlying Securities Amount or Number of		of Deri- vative Security
_		Title	Shares	
Employee Stock Option (right t buy) (1)	011/13/01	Common Stock	57,000	

SIGNATURE OF REPORTING PERSON
/S/ By: Patricia A. Bell
 For: Kriss Cloninger, III
DATE