

Edgar Filing: MCCUSKER WILLIAM L - Form 4

MCCUSKER WILLIAM L  
Form 4  
March 03, 2003

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OMB APPROVAL  
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, DC 20549

FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5  
obligations may continue. See Instruction 1(b).

(Print of Type Responses)

1. Name and Address of Reporting Person\*

McCusker William L.

-----  
(Last) (First) (Middle)

1818 Market Street, 33rd Floor

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(Street)

Philadelphia PA 19103

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(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

Right Management Consultants, Inc. (RHT)

3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary)

4. Statement for Month/Day/Year

2-28-03

5. If Amendment, Date of Original (Month/Day/Year)

6. Relationship of Reporting Person(s) to Issuer



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FORM 4 (continued)

Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned  
(e.g., puts, calls, warrants, options, convertible securities)

[illegible]

Explanation of Responses:

(1) These shares were purchased through the Company's Employee Stock Purchase Plan that is exempt under Section 16 of the Securities Exchange Act.

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/s/ William L. McCusker

3/3/03

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\*\*Signature of Reporting Person

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Date

\* 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 control number.

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