			UNITED STATES SECURITIES AND EXCHANGE COMMISSION													OMB APPI						
FORM	/ ſ	Washington, D.C. 20549										OMB Expire	Number: 3235-028 es: January 31, 200	7 5								
	4 T																Estima	ated average burde	n			
4																	hours	per response 0.5				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP																						
Check this box longer	x if no																					
subject to 16. Form	rsuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public																					
Form 5 o may cont Instructio	olding Compa	Utility ing Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940																				
(Print or 1																						
Response	25)																					
1. Name and Addre	ess of R	Reporting P	erson*	2. Issuer Na	2. Issuer Name and Ticker or Trading Symbol											6. Rela (Check	tionship of Reporting all applicable)	Person(s) to Issuer				
Wish	Bar	ry Nea	.1	Ocwen	Fina	ncial C	orpor	ation							x	Director					10%	
vv1511,	Dal				Ocwen Financial Corporation (NYSE:OCN)																Owner	
(Last)	(First)	(Middl			Social Secu	4. Statement for Month/Year					Offic		jive			Other (specify)						
					Number of Reporting Person (Voluntary)				Month/Year December/2002									title below)			below)	
4.077 7. 1																						
1675 Palm F	Beac (Stre		es Blvd		<u>l</u>									1. <i>i</i> -	, ·		m-1-		、 、			
Mast D-1	01			Date of Original					7. Individual or Joint/Group Filing (Check Applicabl					e)								
West Palm E	101									Form filed by More than One												
(City)	(2	State)	(Zip)										1.0		<u> </u>	c · 1						
						1	3.	1	le I Non-Deri		curities	Acqui	red, Di	sposed of	1, or B							
1. Title of Security (Instr. 3)	a	ans-		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)					Securi Benefi	cially	6. Owner ship	of										
					ate		(instr. 3, 4 and 5) Ow					Owned	1 at	Form: Direct	Indire Bene-	•						
																			ficial- Owne			
																			ship			
					/Ionth/ ay/							End of Month		D) or Indirec	:							
			Year) Code V				Amount (A) or (D)				Price	Price (Instr.			3 and	(I)	(Instr. 4)					
													4)			-	(Instr. 4)	(
Common Stock *		12/18/02 S 1,0				1,00	00 D \$2.80				0					I	By Wishco					
															8,530,3	305						
						<u> </u>																
<u> </u>																						
<u> </u>																						
*Sale in accordance	e with t	the Plan.																				
<u> </u>						<u> </u>		<u> </u>														
<u> </u>						<u> </u>																
FORM 4 (continued)						,	Table	II I	Derivativ	ve Secu	ıritie	es Ac	cquir	red, D	Dispo	osed o	f, or I	Beneficially	Owned			
(continueu)	'							((<i>e.g.</i> , put	ts, calls	s, wa	irrai	nts, c	ption	1S, C	onver	tible	securities)				
1. Title of		2.		3.		4.			5. Number o				. Date			7. Title a		8.	9.		wner- ship	
Derivative Security	/	Co	Conver- Trans- sion or action Exercise Date			Trans- Transac- action tion		ative Securities Acquired (A) or Disposed of (D)			Exe		xer- isable ai	- Amoun Underly ble and Securit		Amount Underly Securitie	t of Price ving of		Number of Deriv-	Form	of Deriv- Securit y	
(Instr. 3)		Price of Deriv- ative		(Month/ Day/		(Instr.			(Instr. 3, 4, a			E	xpiratio Date			(Instr. 3 4)		ative Secur- ity	ative Secur- ities		Direct (D) or Indirect	
			ecurity	Year)								М	íonth/D 'ear)	ay/				(Instr. 5)	Bene- ficially Owned		(I) (Instr.	
																		-,	at End of		4)	
<u> </u>											Date		Expira			Am	ount		Month			
											are		-spire	-		or			(Instr.			

										Number of		4)		
			Code	v	(A)	(D)	Exer- cisable	tion Date	Title	Shares			-	
						/s/	E. Paul Rubino,	, Attorney-in-	-Fact		12/19/02			
							**Signature of Reporting Person Date							
See 18 U.S. Note: File three copie If Potential persons who	**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 provided 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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