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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

pe Response	s)													
1. Name and Address of Reporting Person [*] GASTON KAREN H			2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003					X Officer (give title below) Other (specify below) CVP and Chief Adm Officer						
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 12/31/2003						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
')	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if any	e, if	Code (Instr. 8)				of (D)	Beneficially Owned Following Reported Transaction(s)			Ownership Form:	Beneficial
			(Month/Day/Year)		Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	10 4)		or Indirect (I)	Ownership (Instr. 4)
Stock		12/31/2003			F		3,731			33,268			D	
Stock										4,262			I	401(k) Plan
Report on a s	separate fine i	Table II - 1	Derivative Secu	ırities	s Acquir	Pers cont the f	ons who	respor this for plays a	m are curre eficial	not requesting ntly valid	uired to res	spond unle	ss	1474 (9-02)
	Date	on 3A. Deemed Execution Da any	4. Transaction Code	5. Non Of Do See Ad (A D of (In	5.		6. Date Exercisable and Expiration Date (Month/Day/Year)			ount of erlying irities	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	Ownersl Form of Derivati Security Direct (I or Indire	Beneficia Ownershi (Instr. 4) D)
						Date		Expiration Date	Title	Number of				
	nd Address of N KAREN (i) Security Security 2. Conversion or Exercise Price of Derivative	nd Address of Reporting Ponk KAREN H (Street) (Street)	nd Address of Reporting Person* N KAREN H (Street) (Street) (State) (State) (Zip) Security 2. Transaction Date (Month/Day/Year) 1 Stock 12/31/2003 1 Stock Report on a separate line for each class of secur Table II - I (Conversion or Exercise Price of Derivative) 2. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) A. Deemed Execution Date any (Month/Day/Year) (Month/Day/Year)	2. Issuer Nam EQUIFAX In Middle (Middle) 3. Date of Earl 12/31/2003 (Street) 4. If Amendment 12/31/2003 (State) (Zip) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Table II - Derivative Securities beneficially 2. Table II - Derivative Securities of Exercise Price of Derivative (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Deemed Execution Date (Lag., puts, calls, pu	And Address of Reporting Person* N KAREN H (Middle) Security (Street) (A. If Amendment, D. 12/31/2003 (A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Table II - Derivative Securities beneficially own one Exercise (e.g., puts, calls, ware price of Derivative Security (Month/Day/Year) (Month/Day/Year)	Address of Reporting Person* N KAREN H (Middle) (Street) (A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Code (Instr. 8) (Instr. 8) (Code (Street) (Instr. 8) (Instr. 3)	And Address of Reporting Person Nataren Nataren H	Address of Reporting Person 2 N KAREN H 2. Issuer Name and Ticker or Trading Syme EQUIFAX INC [EFX] 3. Date of Earliest Transaction (Month/Day/12/31/2003 (Street) 4. If Amendment, Date Original Filed(Month/12/31/2003 (Street) 2. Transaction Date (Month/Day/Year) Security 2. Transaction Date (Month/Day/Year) 3. Transaction (A) or D (Instr. 3) Code V Amount Persons who contained in the form distance of Execution Date (e.g., puts, calls, warrants, options, converting any (Month/Day/Year) 2. Table II - Derivative Securities Acquired, Disposed of (D) Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Securities Deneficially owned directly or indirectly or	2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003 (Street)	2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003 4. If Amendment, Date Original Filed(Month/Day/Year) 12/31/2003 5. Transaction Date (Month/Day/Year) 6. Code V Amount (A) or Disposed of (D) (Instr. 3, 4 and 5) 7. Stock 12/31/2003 F 3,731 D \$2.4.5 8. Stock 12/31/2003 F 3,731 D \$2.4.5 9. Table I - Non-Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 1. Stock 12/31/2003 F 3,731 D \$2.4.5 1. Stock 1. Stock	Address of Reporting Person 2 Code V Amount Code V Amount Code Contained in this form are not require for Exercises Price of Derivative Securities Security Securities	Address of Reporting Person *	Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX] 3. Date of Earliest Transaction (Month/Day/Year) 2. Officer (legte tills below) CVP and Chief Adn	2. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX] 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003 4. If Amendment, Date Original Filed(Month/Day/Year) 12/31/2003 5. Relationship of Reporting Person(s) to Issue CVP and Chief Adm Officer CVP and Chief A

Reporting Owners

P 4' 0 N /	Relationships						
Reporting Owner Name / Address	Director 10% Owner		Officer	Other			
GASTON KAREN H			CVP and Chief Adm Officer				

Signatures

Karen H. Gaston	01/05/2004
**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.