

(Print or Type Responses)

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	e 0.5			

INITIAL STATEMENT OF 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

1. Name and Address of Reporting Person* BETTY CHARLES G	2. Date of Event F Statement (Month 05/17/2005		3. Issuer Name and Ticker or Trading Symbol EQUIFAX INC [EFX]				
(Last) (First) (Middle) 1550 PEACHTREE STREET, N.W.	4. Relationship of Issuer			Reporting Persor	\ /	5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street) ATLANTA, GA 30309		(Chec_X_DirectorOfficer (give_below)			Applicable I _X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person	
(City) (State) (Zip)		Table	I - Non-Derivat	ive Securities	Beneficially O	wned	
1.Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	non Stock 0			D			
Reminder: Report on a separate line for each class Persons who respo unless the form dis Table II - Derivati	nd to the collectio	n of informat ralid OMB co	tion contained in t ntrol number.		·		
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivativ Security (Instr. 4)		4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Expiration Date	Title Amo	unt or Number of	nber of Security (I			
D 41 0							

Reporting Owners

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BETTY CHARLES G 1550 PEACHTREE STREET, N.W. ATLANTA, GA 30309	X				

Signatures

By: Kathryn J. Harris as Attorney-in-Fact for	05/19/2005
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.