PROLOGIS Form 3 September 23, 2005 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> GARVEY CHRISTINE				2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol PROLOGIS [PLD]				
	(Last)	(First)	(Middle)	09/15/2005	5	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
14	100 E. 35	TH PLAC	E							
(Street) AURORA, CO 80011					(Check all applicable)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 		
					Director 10% Owner Officer Other (give title below) (specify below)					
	(City)	(State)	(Zip)		Table I - N	lon-Deriva	tive Securiti	ies Be	neficially Owned	
1.Title of Security (Instr. 4)				2. Amount of Beneficially (Instr. 4)						
Common Shares of Beneficial Interest, p value \$0.01				terest, par	25,164		D	Â		
	minder: Repo	-		ach class of sec	urities benefici	ially S	SEC 1473 (7-02	2)		
		inforr requi	mation cont red to resp	spond to the c tained in this ond unless th MB control n	form are not e form displ					

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial Ownership	
		Derivative Security	or Exercise	Form of	(Instr. 5)	
		(Instr. 4)	Price of	Derivative		
		Title	Derivative	Security:		
			Security	Direct (D)		

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address									
		ector	10% Owner	Officer	Other				
GARVEY CHRISTINE 14100 E. 35TH PLACE AURORA, CO 80011	Â	X	Â	Â	Â				
Signatures									
Kate M. Meade, Attorney-in-fa Garvey	09/23/2005								

**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.