#### Edgar Filing: GLATFELTER P H CO - Form 3

### GLATFELTER P H CO Form 3 September 25, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### 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> Brown Bruce			2. Date of Event Requir Statement (Month/Day/Year)		3. Issuer Name <b>and</b> Ticker or Trading Symbol GLATFELTER P H CO [GLT]				
(Last)	(First)	(Middle)	09/23/2014		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
8015 REMIN	NGTON R	OAD				`	<b>,</b> ,		
	(Street)			(Check	(Check all applicable)		6. Individual or Joint/Group		
CINCINNA	ΓΙ, OHÂ	45242		X Director Officer (give title below	Other	Owner Filing( _X_Fo w) Person For	Filing(Check Applicable Line) _X_ Form filed by One Reporting		
(City)	(State)	(Zip)	Table I	I - Non-Derivat	ive Securitie	es Beneficia	eneficially Owned		
1.Title of Secur (Instr. 4)	ity			nt of Securities ally Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of E Ownership (Instr. 5)	ndirect Beneficial		
Reminder: Repo		ate line for ea	ch class of securities ben	eficially SI	EC 1473 (7-02)				
	infor <del>n</del> requir	nation conta red to respo	oond to the collection ained in this form are nd unless the form di MB control number.	not					
Т	able II - Der	vivative Secur	rities Beneficially Owner	d (e.g., puts, calls,	warrants, opti	ons, converti	ole securities)		
1. Title of Deriv (Instr. 4)	vative Securi	Expir	ration Date Sec (Day/Year) Der	Fitle and Amount of curities Underlying civative Security str. 4)	4. Conversio or Exercis Price of		(Instr. 5)		

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Brown Bruce 8015 REMINGTON ROAD CINCINNATI, OH 45242	ÂX	Â	Â	Â	
Signatures					
Linda M. Levans by POA	9/25/201	4			
**Signature of Reporting Person	Date				

## **Explanation of Responses:**

#### No securities are beneficially owned

\* 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.