Edgar Filing: BAUR ANDREW N - Form 4

BAUR AND	DREW N										
Form 4											
May 11, 200	19										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB A	OMB APPROVAL			
UNITED STATES SECURITIES AND EACHANGE COMMISSION								OMB	3235-0287		
Check th	is box		Was	shington,	D.C. 205	549			Number:		
Check this box if no longer									Expires:	January 31, 2005	
subject to		EMENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP O				NERSHIP OF	Estimated average		
	Section 16.				SECURITIES				burden hours per		
Form 4 o Form 5			a		a	-			response	0.5	
obligatio	nc *						•	e Act of 1934,			
may cont				•	•	- ·		1935 or Section	n		
See Instr	uction	30(h)	of the In	vestment	Company	y Act	of 194	Ю			
1(b).											
(Print or Type I	Responses)										
(Thin of Type I	(csponses)										
1. Name and A	Address of Reporti	ng Person *	2 Issuer	Name and	Ticker or 7	Fradin	σ	5. Relationship of	Reporting Pers	son(s) to	
BAUR ANDREW N Symbol				Name and Ticker or Trading				Issuer			
			-	AU PAPE	RCORP	ſWI	וקפ				
(I+)	(Einst)					• [• • •	· •]	(Chec	k all applicable	:)	
(Last)	(First)	(Middle)		Earliest Tra	ansaction			X Director	100	Owner	
(Month/D)13205 MANCHESTER ROAD05/06/20				-			Officer (give title Other (specify				
15205 1011			05/00/20	009				below)	below)		
(Street) 4. If			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	th/Day/Year))			Applicable Line)			
								X Form filed by C Form filed by M			
ST. LOUIS,	, MO 63131							Person		porting	
(City)	(State)	(Zip)	Tabl	a I. Mara D		۰. ۱۰۰۰			an Danafiaial	les Oenne d	
		-					_	uired, Disposed of		-	
1.Title of	2. Transaction I			3. T	4. Securit			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year) Execution Date, any			Code (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(Month/Day/Ye			Day/Year)					Owned	Indirect (I)	Ownership	
			•					Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(instr. 5 und 1)			
No Par							¢			F 1 51	
Value	05/06/2009			Р	10,000	А	\$ 9.25	60,000 <u>(1)</u>	Ι	Foul Play,	
Common					,,		9.25	· _		LLC	
Stock											

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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

Edgar Filing: BAUR ANDREW N - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BAUR ANDREW N 13205 MANCHESTER ROAD ST. LOUIS, MO 63131	Х						
Signatures							
Sherri L. Lemmer, Attorney-in-Fact		05/11/2009					
**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).

The reporting person disclaims beneficial ownership of these securities except to the extent of his pecuniary interest therein, and the

(1) inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.

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.