## Edgar Filing: Giovanni Ciserani - Form 4

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Giovanni C	iserani										
Form 4	2017										
August 17, 2											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287		
Check the check											
if no lor subject		<b>MENT OF</b>	F CHANGES IN BENEFICIAL OWN SECURITIES					ERSHIP OF	Expires: 2005 Estimated average burden hours per		
Section	16.										
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange						<b>F</b> 1	A - 4 - 6 1024	response	0.5		
obligatio							-				
may continue. 20(h) of the Invistment Company Act of 1935 of Section											
<i>See</i> Inst 1(b).	ruction	50(II) 0	i ule il	rvestmen	t Compa	11y 71		,			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading 5. Relation							5. Relationship of l	Reporting Person(s) to			
Giovanni Ciserani			Symbol					Issuer			
		PROCTER & GAMBLE Co [PG]					(Check all applicable)				
(Last)	(First) (	Middle)	3. Date o	f Earliest T	ransaction	1		(Check	all applicable	:)	
ONE PROCTER & GAMBLE			(Month/Day/Year)					Director 10% Owner			
			08/15/2017					XOfficer (give titleOther (specify below)			
PLAZA							GrpPres-Global F&HC,Baby&Fem				
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
	1	Filed(Month/Day/Year)					Applicable Line)				
CDICDDI						_X_ Form filed by One Reporting Person Form filed by More than One Reporting					
CINCINNA	ATI, OH 45202							Person		porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	e Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. Deeme	d	3.	4. Securi	ties A	cquired (A)	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execution I	Date, if	Transactiomr Disposed of (D)				Securities	Ownership Form:	Indirect	
(Instr. 3) any (Month/			Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)				5)	Beneficially Owned	Beneficial Ownership		
		(11101111/204)	,, 1000)	(mouro)				Following	(Instr. 4)		
						(A)		Reported	(I) (Instr. 4)		
				a		or		Transaction(s) (Instr. 3 and 4)	(IIIstr. 4)		
Common				Code V	Amount	(D)	Price				
Stock	08/15/2017			А	9,667	А	\$ 0 <u>(1)</u>	54,917.002	D		
							¢				
Common	08/15/2017			S	4,589	D	\$ 92.0405	50,328.002	D		
Stock	00/10/2017			5	(2)	D	( <u>3</u> )	30,320.002	2		

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
FB	Director	10% Owner	Officer	Other			
Giovanni Ciserani ONE PROCTER & GAMBLE PLAZA CINCINNATI, OH 45202			GrpPres-Global F&HC,Baby&Fem				
Signatures							
/s/ Robert B. White, attorney-in-fact for C Ciserani	Giovanni		08/17/2017				

\*\*Signature of Reporting Person

## **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).

Date

- (1) Stock award pursuant to issuer's 2014 Stock and Incentive Compensation Plan.
- (2) Shares sold to cover taxes on Stock Award.
- (3) Weighted average price of the shares sold. The price range was \$92.0050 to \$92.1050. Full information regarding the number of shares sold at each separate price available upon request.

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.