Edgar Filing: PARK NATIONAL CORP /OH/ - Form 4

| Check this box Kumber: if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Expires: 200 Section 16. SECURITIES Estimated average | | | | | | | | | | 3235-0287 January 31, 2005 average urs per | | |
|---|---|---|---|---|---|---------|-------------|--|---|---|--|--|
| (Print or Type I | Responses) | | | | | | | | | | | |
| BUCHWALD MAUREEN Symbol | | | | r Name and NATION | | | - | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| (Last) | (First) (| (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | _X_ Director 10% Owner Officer (give title Other (specify | | | | |
| 50 NORTH THIRD STREET 10/28/2 | | | | - | | | | below) below) | | | | |
| NEWARK, | (Street) OH 43055 | | | endment, Dannent, Dannen, Danne | - | al | | 6. Individual or J Applicable Line) _X_Form filed by Form filed by Person | One Reporting | Person | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative | e Secui | rities Acc | uired, Disposed o | of, or Benefici | ally Owned | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Data (Month/Day/Year) | 2. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year) | | | 4. Securi on(A) or D (Instr. 3, Amount | isposed | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 10/28/2013 | | | А | 300 | А | \$ 80.51 | 3,853 | D | | | |
| Common Stock | | | | | | | | 2,478.6396 | Ι | DRIP | | |
| Common Stock | | | | | | | | 420 | I | Jt. w/husband James | | |
| Common Stock Joint | | | | | | | | 2,880 | Ι | Lincoln Douglas, Jt. w/James | | |

Edgar Filing: PARK NATIONAL CORP /OH/ - Form 4

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)

| 1. Title of | 2. | 3. Transaction Date | 3A. Deemed | 4. | 5. | 6. Date Exer | cisable and | 7. Title | and | 8. Price of | 9. Nu |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------------|--------------------|-----------|--------------------|-------------|--------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transactio | onNumber | Expiration D | ate | Amoun | t of | Derivative | Deriv |
| Security | or Exercise | | any | Code | of | (Month/Day/ | Year) | Underly | ying | Security | Secu |
| (Instr. 3) | Price of | | (Month/Day/Year) | (Instr. 8) | Derivative | e | | Securiti | ies | (Instr. 5) | Bene |
| | Derivative | | | | Securities | | | (Instr. 3 | 3 and 4) | | Owne |
| | Security | | | | Acquired | | | | | | Follo |
| | | | | | (A) or | | | | | | Repo |
| | | | | | Disposed | | | | | | Trans |
| | | | | | of (D) | | | | | | (Instr |
| | | | | | (Instr. 3, | | | | | | |
| | | | | | 4, and 5) | | | | | | |
| | | | | | | | | A | Amount | | |
| | | | | | | Date Exercisable | Expiration Date | Title N | or Number of | | |

Code V (A) (D)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|---------|-------|--|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | | |
| BUCHWALD MAUREEN 50 NORTH THIRD STREET NEWARK, OH 43055 | Х | | | | | | | |
| Signatures | | | | | | | | |
| Maureen Buchwald by David I | Trautm | an | | | | | | |

P.O.A. 10/29/2013

<u>**</u>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).

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.

Shares