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PROCTER & GAMBLE Co Form 4 August 19, 2013 FORM 4 UNITED STATE Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	N OMB Number: Expires: Estimated burden ho response	ours per			
(Print or Type Responses)					
1. Name and Address of Reporting Person $\frac{*}{2}$ Taylor David S	2. Issuer Name and Ticker or Trading Symbol PROCTER & GAMBLE Co [PG]	5. Relationship o Issuer			
(Last) (First) (Middle) ONE PROCTER & GAMBLE PLAZA	3. Date of Earliest Transaction(Month/Day/Year)08/19/2013	(Check all applicable) Director 10% Owner X_ Officer (give title Other (specify below) Grp Pres GlobalHealth&Grooming			
(Street) CINCINNATI, OH 45202	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or J Applicable Line) _X_ Form filed by Form filed by Person	-	Person	
(City) (State) (Zip)	Table I - Non-Derivative Securities A	cquired, Disposed o	of, or Benefic	ially Owned	
(Instr. 3) any	med 3. 4. Securities on Date, if TransactionAcquired (A) or Code Disposed of (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price	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	code (Aniount (D) The	43,959.323 <u>(1)</u>	D		
Common Stock		23,537.5292	I	By Retirement Plan Trustees	

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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Title Amour Underl Securit (Instr.	nt of lying	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

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Taylor David S ONE PROCTER & GAMBLE PLAZA CINCINNATI, OH 45202			Grp Pres GlobalHealth&Grooming			
Signatures						
/s/ Sandra T. Lane, attorney-in-fact for D Taylor	David S.	(08/19/2013			
**Signature of Reporting Person			Date			
Explanation of Respon	ses:					

* 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).

(1) Total includes grant of dividend equivalents on August 15, 2013 in the form of Restricted Stock Units settled in common stock.

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.