## Edgar Filing: AMERISOURCEBERGEN CORP - Form 4

AMERISOU Form 4 March 02, 20	RCEBERGEN	CORP									
Check this box if no longer subject to Section 16. Check this box								OMB Number: Expires: Estimated a burden hour response	•		
Danilewitz Dale Symbo				ERISOURCEBERGEN CORP				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 1300 MORI	RIS DRIVE	(Middle)	(Month/I 02/27/2	.015					title Othe below) ve Vice Preside		
	(Street) BROOK, PA 190	)87		endment, Da nth/Day/Year	-	ı		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M Person	ne Reporting Per	rson	
(City) 1.Title of Security (Instr. 3) Common	(State) 2. Transaction Dat (Month/Day/Year) 02/27/2015		ned n Date, if	le I - Non-D 3. Transactio Code (Instr. 8) Code V F	4. Securi	ties Ac sposec	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 9,192	or Beneficiall 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Stock	02/2/12013			Г	090	D	102.76	9,192	D		

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (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.	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Danilewitz Dale 1300 MORRIS DRIVE CHESTERBROOK, PA 19087			Executive Vice President				
Signatures							
/s/John G. Chou for Dale Danilewitz		03/02/2015					
**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.