Gavales Lisa A

Form 3

March 20, 20	19								
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					MISSION	OMB APPROVAL			
					OMB Number:	3235-0104			
		INITIAL S	STATEMENT OF BEN		OWNERSH	IP OF	Expires:	January 31, 2005	
		on 17(a) of	SECURI t to Section 16(a) of the the Public Utility Holdi 0(h) of the Investment C	Securities I ng Compan	y Act of 193		Estimated burden hou response	average Irs per	
(Print or Type R	esponses)								
Person _			Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Destination Maternity Corp [DEST]					
(Last)	(First)	(Middle)	03/18/2019	4. Relations Person(s) to	hip of Reporting Issuer		Amendment, I Month/Day/Ye	-	
C/O DESTINATION MATERNITY CORPORATION, 232 STRAWBRIDGE DRIVE				(Check all applicable) X_ Director 10% Owner Officer Other (give title below) (specify below) 6 In					
MOORESTO	(Street) DWN, N	IJÂ 08057		(give title bei	ow) (specify del	Filing _X_ F Persor Fo	ividual or Join (Check Applica orm filed by Or form filed by Mo ting Person	able Line) ne Reporting	
(City)	(State)	(Zip)	Table I - N	Non-Deriva	tive Securiti	ies Benefici	ally Owne	d	
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Bene	ficial	
Reminder: Repo owned directly of	-		ach class of securities benefic	ially	SEC 1473 (7-02	!)			
	inforr requi	mation conta red to respo	pond to the collection of ained in this form are not ond unless the form displ MB control number.	t					
Т	able II - De	rivative Secu	rities Beneficially Owned (e	.g., puts, calls	s, warrants, opt	tions, convert	ible securitie	s)	

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
			Derivative	Security:	

Edgar Filing: Gavales Lisa A - Form 3

Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
		Director	10% Owner	Officer	Other
Gavales Lisa A C/O DESTINATION MATERNITY CORPORATION 232 STRAWBRIDGE DRIVE MOORESTOWN, NJ 08057			Â	Â	Â
Signatures					
/s/ Lisa Gavales 0	03/20/2019				

**Signature of Reporting Person Date

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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).

Â

Remarks:

Exhibit List: Exhibit 24.1 - Power of Attorney

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.