Funk Andrea J.

Form 3

August 15, 2018) STAT	ES SECURITIES A	AND EXCH	ANGE COM	MISSION	OMB AI	PPROVAL		
	5		Washington, D.C. 20549			OMB Number:	3235-0104			
INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF						Expires:	January 31,			
	-	7(a) of tl	SECUR to Section 16(a) of th ne Public Utility Hole (h) of the Investment	e Securities ding Compa	ny Act of 193		Estimated a burden hou response	•		
(Print or Type Resp	oonses)									
1. Name and Addr Person <u>*</u> Funk Andre			2. Date of Event Requirin Statement (Month/Day/Year)		^g 3. Issuer Name and Ticker or Trading SymbolDestination Maternity Corp [DEST]					
		iddle)	08/13/2018				5. If Amendment, Date Original Filed(Month/Day/Year)			
C/O DESTINATION MATERNITY CORPORATION, 232 STRAWBRIDGE DRIVE				(Che	(Check all applicable)					
				Offic	_X_Director10% OwnerOfficerOther					
(Street)			(give title be	elow) (specify bel	0. Inc	lividual or Join g(Check Applica	-		
MOORESTOW	VN, NJ 0	8057				_X_F Person F	form filed by On	e Reporting		
(City) (State) (Z	Zip)	Table I -	Non-Deriv	vative Securit		C C	I		
1.Title of Security (Instr. 4)			2. Amount Beneficial (Instr. 4)	t of Securities ly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Benef	icial		
Reminder: Report of owned directly or i	ndirectly.		h class of securities benef	·	SEC 1473 (7-02	2)				
	informatio required to	n contai o respon	ond to the collection of ned in this form are n d unless the form dis B control number.	ot						
Tabl	le II - Derivati	ve Securi	ties Beneficially Owned	(e.g., puts, cal	lls, warrants, op	tions, convert	ible securities)		

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:	

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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
Funk Andrea J. C/O DESTINATION MATERNITY CORPORATION 232 STRAWBRIDGE DRIVE MOORESTOWN, NJ 08057		ÂX	Â	Â	Â
Signatures					
Andrea J. Funk	08/15/2018				

**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).

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Remarks:

No securities are beneficially owned.

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.