Edgar Filing: STROBEL PAMELA B - Form 4

Form 4	PAMELA B										
October 02,									OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								MMISSION	OMB Number:	3235-0287	
Check the if no lon subject to Section Form 4	nger STATE	MENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January 31, 2005 Estimated average burden hours per response 0.5		
Form 5 obligation may corn <i>See</i> Insta 1(b).	ons Section 17	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> STROBEL PAMELA B			2. Issuer Name and Ticker or Trading Symbol Domtar CORP [UFS]					5. Relationship of Reporting Person(s) to Issuer			
(Last) C/O DOM CORPORA PARK DR	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2017				_	(Check all applicable) _X_ Director 10% Owner Officer (give title 0ther (specify below) below)					
(Street)			Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
FORT MIL	L, SC 29715.						P	erson	Sie than One Rej	Jorning	
(City)	(State)	(Zip)	Tab	ole I - Non-	Derivative Se	curiti	es Acqui	red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deen (Month/Day/Year) Execution any (Month/D				4. Securities Acquired (A oppr Disposed of (D) (Instr. 3, 4 and 5) (A)			Securities Beneficially Owned Following Reported	Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	09/30/2017			М	755.6093	А	<u>(1)</u>	755.6093	D		
Common Stock	09/30/2017			D	755.6093 (<u>2)</u>	D	\$ 43.39	0	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.

Edgar Filing: STROBEL PAMELA B - Form 4

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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of Derivative or Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and A Underlying S (Instr. 3 and
	Security			Code V	(A)	(D)	Date Exercisable	Expiration Date	Title
Deferred Share Units	<u>(1)</u>	09/30/2017		M		. ,	09/30/2017	09/30/2017	Common Stock
Deferred Share Units	<u>(1)</u>	09/30/2017		А	619.3823		(4)	(4)	Common Stock

Reporting Owners

Reporting Owner Name / Address		Relationsh					
	Director	10% Owner	Officer	Other			
STROBEL PAMELA B C/O DOMTAR CORPORATION 234 KINGSLEY PARK DRIVE FORT MILL, SC 29715	Х						
Signatures							
Razvan L. Theodoru, Attorney-in-fact for Ms.							
Strobel		10/02/2017					
** Signature of Reporting Perso	n		Date				
Explanation of Resp	onse	es:					
		es:	Da				

- * 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) Each Deferred Share Unit is the economic equivalent of one share of Domtar Corporation Common Stock.
- (2) The reporting person settled her Deferred Units in cash.
- (3) Total includes prior Deferred Share Units that have different exercise and expiration dates.
- (4) The Deferred Share Units credited to the reporting person's account will be settled in cash or shares of Domtar Corporation on the first anniversary of the grant date.

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.