Edgar Filing: Rueckert William Dodge - Form 4

Rueckert Willia	am Dodge										
Form 4	10										
October 23, 20											
FORM	4 UNITED 67									PROVAL	
	- UNITED S	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								3235-0287	
Check this b		Washington, D.C. 20347								January 31,	
if no longer	F CHANG	CHANGES IN BENEFICIAL OWNERSHIP OF						Expires: 2005			
Section 16.							Estimated average burden hours per				
Form 4 or								response	0.5		
Form 5	Filed pursu	ant to S	Section 16(a) of the s	Securitie	es Exe	change	e Act of 1934,			
obligations may continu	Section 17(a)	of the	Public Util	ity Holdir	ng Comp	any .	Act of	1935 or Section	ı		
See Instructi		30(h)	of the Inve	estment C	ompany	Act	of 194	0			
1(b).											
(Print or Type Res	(nonses)										
(Thit of Type Kes	sponses)										
1. Name and Address of Reporting Person <u>*</u> Rueckert William Dodge			2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to			
			Symbol					Issuer			
			DELCAT	H SYSTE	EMS, IN	C.					
			[DCTH]					(Check all applicable)			
(Last)	(First) (Mid	idle)	3. Date of E	arliest Tran	saction			_X_ Director	10%	Owner	
		(Month/Day/Year)					Officer (give title Other (specify below)				
	TH SYSTEMS,		09/28/201	8				below)	Delow)		
	ROADWAY, SU	ITE									
22C											
		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
		Filed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person				
NEW YORK,	NV 10010							Form filed by O			
NEW TORK,	NT 10019							Person			
(City)	(State) (Z	ip)	Table I	- Non-Der	ivative Se	ecuriti	ies Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of	2. Transaction Date	2A. De	eemed	3.	4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year)	Execut	tion Date, if			ispose	d of		Ownership	Indirect	
(Instr. 3)		any (Month	Code (D) n/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Beneficially Owned	Form: Direct (D) or	Beneficial Ownership		
		(MOIII	ll/Day/Teal)	(111501.0)	(111501. 5,	4 anu	5)	Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
COMMON	09/28/2018			Р	6,500	А	\$	7,926	D		
STOCK							1.75				

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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5		Amou Under Secur	tle and ount of erlying rities r. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Rueckert William Dodge

C/O DELCATH SYSTEMS, INC. Х 1633 BROADWAY, SUITE 22C NEW YORK, NY 10019 Signatures /s/ Barbra C. Keck pursuant to a Confirming Statement executed by William D. 10/23/2018 Rueckert

Relationships

10% Owner Officer

Other

**Signature of Reporting Person

Director

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.

Date