## Edgar Filing: LOLIGER HANS J - Form 4

LOLIGER H	IANS J										
Form 4	2010										
February 20,	_									PROVAL	
FORM	4 UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Set to 16. Filed pursuant to Section 16(a) of the Section 17(a) of the Public Utility Holding 30(h) of the Investment Cor					BENEFICIAL OWNERSHIP OF RITIES Exchange Act of 1934, ding Company Act of 1935 or Section						
(Print or Type F	Responses)										
LOLIGER HANS J Symbol			Symbol	er Name and Ticker or Trading /N HOLDINGS INC [CCK]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
				e of Earliest Transaction h/Day/Year)			Director 10% Owner				
ONE CROV	VN WAY		02/16/2	018				Officer (give t below)	itle Othe below)	r (specify	
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PHILADEL	PHIA, PA 19154	ŀ						Form filed by Me Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	ed Date, if	3. Transactic Code (Instr. 8) Code V	4. Securi m(A) or Di (Instr. 3,	ties Ad sposed 4 and (A) or	cquired d of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common	02/16/2018			А	663	А	\$ 50.978	72,820	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)

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1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)		4. Transacti	5. orNumber	6. Date Exerce Expiration D		7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Underlying Securities (Instr. 3 and 4)	Security (Instr. 5)	Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
1.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	Director	10% Owner	Officer	Other			
LOLIGER HANS J ONE CROWN WAY PHILADELPHIA, PA 19154							
Signatures							
Rosemary M. Haselroth, by Po Attorney	wer of	02/20/2018					
<b>**</b> Signature of Reporting Perso	n		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.