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Hiscock Greg	gory James										
Form 4											
August 09, 20	018										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								OMB APPROVAL			
	UNITED) STATES		RITIES A shington,			NGE C	COMMISSION	OMB Number:	3235-0287	
check this box if no longer									Expires:	January 31, 2005	
subject to	NIAIH.	MENT O	F CHAN			ICIA	LOW	NERSHIP OF	Estimated average		
	Section 16.				SECURITIES					rden hours per	
Form 4 or Form 5		report to	Section 1	6(a) of the	a Sacurit	ios F	vehang	e Act of 1934,	response 0.		
obligation	¹⁸ Section 17						-	1935 or Section	ı		
may conti <i>See</i> Instru	inue.			vestment	•	· ·					
1(b).	iction	()			F ···	5					
(Print or Type R	(lesponses)										
1. Name and A	ddress of Reporting	g Person <u>*</u>	2. Issuer	r Name and	Ticker or	Tradiı	ıg	5. Relationship of	Reporting Pers	son(s) to	
Hiscock Gre	Symbol	c				Issuer					
	MITEL	MITEL NETWORKS CORP [MITL]] (Check all applicable)					
(Last)	(First)							(Check	k all applicable)		
(Mc			(Month/D	Month/Day/Year)				Director 10% Owner			
	T DRIVE, OTT	TAWA,	08/07/2	018				X Officer (give below)	title Othe below)	er (specify	
A6								· · · · · · · · · · · · · · · · · · ·	ee Remarks		
			4. If Ame	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
			Filed(Mon	Month/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person Form filed by More than One Reporting			
K2K 2W7								Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date 2A. Deen			3.	4. Securit			5. Amount of	6. Ownership		
Security	(Month/Day/Year		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)						Form: Direct In	Indirect Beneficial	
(Instr. 3)		any (Month/I	Day/Year)	Code (Instr. 8)	(instr. 5,	4 and	3)	-		Ownership	
		(· · · · ·		(Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				<u> </u>		or	р.	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price \$				
Shares	08/07/2018			S	119	D	э 11.01	13,325	D		
Shurob							11.01				

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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Securi (Instr.	ınt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Hiscock Gregory James 350 LEGGET DRIVE OTTAWA, A6 K2K 2W7			See Remarks					
Signatures								
/s/ Gregory James Hiscock	08/09/20)18						
<u>**</u> Signature of Reporting Person	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.