Edgar Filing: Heritage Insurance Holdings, Inc. - Form 4/A

Heritage Insurance Holdings, Inc. Form 4/A September 25, 2014

September 25,	2014											
FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
Washington, D.C. 20549								OMB Number:	3235-0287			
Check this if no longer	•			Expires:	January 31 2005							
subject to Section 16. Form 4 or	SIAIEM	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES										
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 4 or Fried pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 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 Re	sponses)											
1. Name and Add Neilson Paul	Symbol	Name and Insuranc				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
	[HRTG]											
(Last) (First) (Middle) 3. Date of (Month/Date)				Earliest Transaction				Director 10% Owner X Officer (give title Other (specify below) below)				
HOLDINGS,	GE INSURANO INC., 2600 K DRIVE SUIT		08/15/20)14				· ·	resident of Clai	ms		
	(Street) 4. If Amerr Filed(Mont 08/19/20				-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
CLEARWAT	ER, FL 33759		00/19/20	/14					Aore than One Ro			
(City)	(State)	Zip)	Table	e I - Non-D	erivative S	ecuriti	ies Acq	uired, Disposed o	f, or Beneficia	lly Owned		
(Instr. 3) any		emed on Date, if 'Day/Year)	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			j)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	or		Transaction(s) (Instr. 3 and 4)				
Common Stock				Code v	Amount	(D)		7,650	D			
Reminder: Repor	t on a separate line	for each c	lass of secur	ities benefi	cially owne	ed direc	ctly or i	ndirectly.				

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)	3. Transaction Date (Month/Day/Year)	Code	5. ofNumber of Derivative Securities Acquired			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo
			(A) or Disposed of (D) (Instr. 3,						Repo Trans (Instr
		Code V	4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number of		
_		Coue v	(A) (D)				Shares		

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Reporting Owners

Reporting Owner Name / Address			Relationships			
1	Director	10% Owner	Officer	Other		
Neilson Paul C/O HERITAGE INSURANCE HOLDING 2600 MCCORMICK DRIVE SUITE 300 CLEARWATER, FL 33759	SS, INC.		Vice President of Claims			
Signatures						
/s/ Bruce Lucas, by Power of Attorney	09/25/2014					
**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).

Remarks:

The reporting person initially filed a Form 4 on August 19, 2014 (the "Initial Form 4") reporting the award of stock options to

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.