Edgar Filing: Physicians Realty Trust - Form 4

Physicians Re Form 4											
March 10, 20	Л	D STATES	S SECUR	RITIES A	AND EX	СНА	NGE C	OMMISSION		PROVAL	
Check this if no longe subject to Section 16 Form 4 or	er STATI	Washington, D.C. 20549								3235-0287 January 31, 2005 average rs per 0.5	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Filed 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								0.0			
(Print or Type Ro	esponses)										
1. Name and Address of Reporting Person <u>*</u> Page Bradley D.			2. Issuer Name and Ticker or Trading Symbol Physicians Realty Trust [DOC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Check								
				(Month/Day/Year) 03/09/2015				Director 10% Owner X Officer (give title Other (specify below) Senior VP & General Counsel			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
MILWAUKI	EE, WI 53202							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
	2. Transaction D (Month/Day/Yea	ar) Executio any	med on Date, if Day/Year)	Code	4. Securi on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
shares	03/09/2015			Р	630	А	\$ 15.86	18,031	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: Physicians Realty Trust - 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 Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (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	Unde Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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	s Relationships						
	Director	10% Owner	Officer	Other			
Page Bradley D. 735 NORTH WATER STREET, SUITE 1000 MILWAUKEE, WI 53202			Senior VP & General Counsel				
Signatures							
/s/ William J. Rowe, as attorney-in-fact		03/10/2015					
<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.