#### Edgar Filing: MANSFIELD WILLIAM L - Form 3

## MANSFIELD WILLIAM L Form 3 May 07, 2012 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

#### (Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> MANSFIELD WILLIAM L			<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>	3. Issuer Name and Ticker or Trading Symbol BEMIS CO INC [BMS]					
(Last)	(First)	(Middle)	05/03/2012		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
ONE NEEN	AH CENTH	ER, 4TH							
FLOOR, P.O. BOX 669				(Check all applicable)					
(Street) NEENAH, WI 54957				X_Director10% Owner OfficerOther (give title below) (specify below)		•	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
							Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I -	Non-Derivat	tive Securiti	es Be	neficially Owned		
1.Title of Security (Instr. 4)			2. Amount Beneficiall (Instr. 4)				*		
No Holdings	5		0		D	Â			
Reminder: Repo owned directly		te line for ea	ch class of securities benefi	cially S	SEC 1473 (7-02	)			
	Persor inform require	ation conta ed to respo	pond to the collection o ained in this form are no nd unless the form disp MB control number.	ot					

#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and		4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative	Security:	
			Security	Direct (D)	

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January 31,

2005

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Number:

Expires:

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Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address		Relationships					
Reporting O when Funce / Funces		Director	10% Owner	Officer	Other		
MANSFIELD WILLIAM L ONE NEENAH CENTER, 4TH FLOO P.O. BOX 669 NEENAH, WI 54957	R	ÂX	Â	Â	Â		
Signatures							
Sheri H. Edison Power of Attorney	05/0	07/2012					
**Signature of Reporting Person		Date					
Evenlay sting of Deeres							

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, *see* Instruction 5(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.