## Edgar Filing: Fabrinet - Form 4

Fabrinet												
Form 4												
December 23	3, 2013											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
UNITED STATES SECURITIES AND EACHANGE COMMISSION								02	3235-0287			
Check th	is hox		Was	hington,	D.C. 20	549			Number:			
if no longer								Expires:	January 31, 2005			
	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNER						NERSHIP OF	Estimated				
Section 1 Form 4 o		SECURITIES							burden hours per			
Form 5		report to	Section 16	S(a) of the	Securit	os F	vehan	ge Act of 1934,	response	0.5		
obligatio	ns Section 17			• •			•	of 1935 or Section	'n			
may cont	inue.			vestment	•	· ·			/11			
See Instru 1(b).	lction	50(II)	or the m	vestment	compun	<i>y</i> 1100	. 01 17	10				
1(0).												
(Print or Type Responses)												
	ddress of Reporting	g Person <u>*</u>	2. Issuer	Name and	Ticker or '	Tradin	ıg	-	Reporting Person(s) to			
LEVINSON FRANK H Symbol Fabrinet [F				/mbol abrinet [FN]				Issuer				
								(Check all applicable)				
(Last)	(First)	(First) (Middle) 3. Date of Earliest Transaction					(Check an applicable)					
(Month/				Ionth/Day/Year)			_X_ Director		6 Owner			
			12/19/20	2/19/2013				Officer (give		er (specify		
STREET #345 below) below)												
(Street) 4. If Am			4. If Amer	Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mon				onth/Day/Year)				Applicable Line)				
_X_Form filed by One Repo Form filed by More than												
SAN FRAN	CISCO, CA 94	114						Person		epotting		
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	f. or Beneficia	llv Owned		
1.Title of	2. Transaction Da	ate 24 Dee		3.	4. Securi			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year		on Date, if	Transactio			or	Securities	Form: Direct	Indirect		
(Instr. 3)		any	Code Disposed of (D)				)	Beneficially	(D) or	Beneficial		
(Month/Day/Year) (Instr. 8)				(Instr. 8)				Owned Following	Indirect (I)	Ownership		
								Reported	(Instr. 4)	(Instr. 4)		
						(A)		Transaction(s)				
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Ordinary	12/10/2012				4,132			(2.507	D			
Shares	12/19/2013			А	(1)	А	\$0	62,587	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 Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
1 0	Director	10% Owner	Officer	Other				
LEVINSON FRANK H C/O FABRINET 4104 24TH STREET #345 SAN FRANCISCO, CA 94114	Х							
Signatures								
Andrew Chew, Attorney-in-fact Levinson	1	12/23/2013						
<u>**</u> Signature of Reporting F	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).
- These are restricted stock units awarded to the Reporting Person as partial compensation for serving on the Issuer's Board of Directors.(1) Each restricted stock unit represents a contingent right to receive one Ordinary Share of Issuer stock and will vest on January 1, 2015, provided the Reporting Person continues to serve through such date.

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.