

PRIMO WATER CORP /CN/

Reported by LEITER GREGORY

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 05/10/12 for the Period Ending 05/08/12

Address 4221 W. BOY SCOUT BLVD.

SUITE 400

TAMPA, FL, 33607

Telephone 813-313-1732

CIK 0000884713

Symbol PRMW

SIC Code 2086 - Bottled and Canned Soft Drinks and Carbonated Waters

Industry Non-Alcoholic Beverages

Sector Consumer Non-Cyclicals

Fiscal Year 12/28



] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

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STATEMENT OF CHANGES IN 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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				*	2. Issuer Name and Ticker or Trading Symbol									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Leiter Gregor	ry			ŀ	CO	TT CO	RP/	CN	N/ [C	CO	[]							
(Last) (First) (Middle)				(3. Date of Earliest Transaction (MM/DD/YYYY)) Directo	or	_	10% O	wner	
5519 W. IDLEWILD AVENUE					E 10 13 11 3								below)	XOfficer (give title below)Other (specify below) Vice President and Controller				
	(Street)					Amendm DD/YYYY)	ent, D	ate	e Origi	nal	Filed		6. Individu Applicable Li		nt/Group I	Filing (Che	eck	
TAMPA, FL (City)	33634 (State)		(Zip)												Reporting Per		1	
		Tab	ole I - Nor	ı-Deri	ivati	ve Secur	ities A	Acq	quired,	Dis	sposed	of, o	or Beneficially	y Owned				
1. Title of Security (Instr. 3)			2. Tr Date			3. Trans. Code (Instr. 8)		4. Securities A (A) or Dispos (Instr. 3, 4 and		ed of (D) Follow			nount of Securities Beneficially Owned wing Reported Transaction(s) . 3 and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership		
						any	Code	V	Amount	(A) or (D)	Price	;				or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Shares				5/8/2	2012		S		2500	D	\$7.051	(1)	98	8653		D		
Tak	ole II - De	rivati	ive Securi	ities B	Benef	ficially O	wned	(4	e.g. , pu	ıts,	calls,	warr	ants, options,	, convert	ible secur	ities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Trans. Date	Deemed Execution	4. Γrans. Code (Instr. 8)	Deri Secu Acq Disp	fumber of ivative urities quired (A) or posed of (D) tr. 3, 4 and	6. Date Exercisable and Expiration Date			7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		derlying curity)	ing Derivative	derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	V (A)	(D)	Date Exerci	isab	Expira ole Date	ition		mount hares	or Number of	Number of Transaction (s) (Instr. 4)		[4)		

Explanation of Responses:

(1) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$7.061 to \$7.081 inclusive. The reporting person undertakes to provide to Cott Corp., any security holder of Cott Corp., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this Footnote 1 to this Form 4.

Reporting Owners

Paparting Owner Name / Address	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Leiter Gregory 5519 W. IDLEWILD AVENUE			Vice President and Controller						
TAMPA, FL 33634									

Signatures

/s/ Marni Morgan Poe, Attorney-in-Fact

5/10/2012

^{**} Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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. 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.