Edgar Filing: BROWN JEFFREY N - Form 4

BROWN JE	FFREY N										
Form 4											
January 21, 2											
FORN	14 UNITED	STATES	SECUR	TTIFS A	ND FX	снл	NGE C	OMMISSION		PROVAL	
	UNITED	JIAILO		shington,					OMB Number:	3235-0287	
Check the				B ••,	210120				Expires:	January 31, 2005	
if no long subject to		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF									
Section 16.				SECUR	ITIES				Estimated average burden hours per		
Form 4 o Form 5	~ • •		response 0.5								
obligation	• •						•	e Act of 1934,			
may cont	inue. Section 17(a			vestment	•	· ·		1935 or Section	n		
See Instru 1(b).	iction	50(II)	of the m	vestillent	Compan	ly AC	101174	0			
1(0).											
(Print or Type F	Responses)										
1. Name and A	ddress of Reporting	Person [*]	2. Issuer	Name and Ticker or Trading 5. Re				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
BROWN JEFFREY N Sym											
				ER FINA	NCIAL	COF	RP				
			[WBS]					(Check an applicable)			
(Last)	(First) (M	Aiddle)	3. Date of Earliest Transaction					Director 10% Owner			
		r	(Month/D	-				XOfficer (give titleOther (specify below) below)			
	FER FINANCIA BANK STREET	L	01/20/20)11				Chief Adı	ministrative Of	ficer	
(Street) 4. If An			4. If Ame	Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed(Mon				nth/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
WATEDDI	RY, CT 06702							_X_ Form filed by C			
WAILKDU	K1, C1 00702							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Executio any	n Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Form: Direct Beneficially (D) or		t Indirect Beneficial	
(IIIsu. 5)		(Month/			(1150. 5,	+ anu	5)	Owned	Ownership		
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common	01/00/2011						\$	42 (77	D		
Stock	01/20/2011			А	124 <u>(1)</u>	А	22.22	43,677	D		
Common	01/00/0011			Г	(0)	D	\$	42 (17	D		
Stock	01/20/2011			F	$60 \frac{(2)}{2}$	D	22.22	43,617	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.

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 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)	4. Transactio Code (Instr. 8)	5. 6. Date Exerct onNumber Expiration Date of (Month/Day/ Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur 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	Relationships						
	Director	10% Owner	Officer	Other			
BROWN JEFFREY N C/O WEBSTER FINANCIAL CORP 145 BANK STREET WATERBURY, CT 06702			Chief Administrative Officer				
Signatures							
Renee P. Seefried by Power of Attorney	01	/21/2011					
**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).

(1) Shares purchased as part of the Stock in Lieu of Salary Program.

(2) Shares withheld for taxes as part of the Stock in Lieu of Salary Program.

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.