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Western Union Form 4											
October 01, 20	Л								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe subject to Section 16. Form 4 or	r STATEM	IENT O	F CHAN	NERSHIP OF	Expires: January 3 20 Estimated average burden hours per response 0						
Form 5 obligations may contin <i>See</i> Instruc 1(b).	Section 17(a	a) of the l	Public U		ling Com	ipany	Act of	e Act of 1934, 1935 or Sectior 0	1		
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> BATTISTA GUY A			Symbol	r Name and 1 Union C		Tradin	Ig	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (M	/liddle)	3. Date of Earliest Transaction					(Check all applicable)			
THE WESTERN UNION COMPANY, 12500 EAST BELFORD AVENUE			(Month/Day/Year) 09/29/2009					Director 10% Owner Officer (give title Other (specify below) below) EVP & Pres. of WU Fin Svs Inc			
Filed(M				endment, Date Original onth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
	DD, CO 80112	(7 .)						Person			
	(State) 2. Transaction Date (Month/Day/Year)	(Zip) 2A. Deen Execution any (Month/E	Date, if Transaction(A) or Disposed of Code (Instr. 3, 4 and 5)			quired of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Common Stock	09/29/2009			Code V S (1)	Amount 15,966	(D) D	Price \$ 19.26	(Instr. 3 and 4) 117,401	D		
Common	09/29/2009			F	7,200	D	(2) \$ 19.26	110,201	D		
Common Stock								2,494	I	Through 401(K) Plan	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	unt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Unde	rlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
	Derivative				Securities			(Instr	. 3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						,
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	of	Number		
						Excretoisable					
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address				
· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other
BATTISTA GUY A THE WESTERN UNION COMPANY 12500 EAST BELFORD AVENUE ENGLEWOOD, CO 80112			EVP & Pres. of WU Fin Svs Inc	
Signatures				
Sarah J. Kilgore, As Attorney-in-Fact fo Battista	r Guy A.		10/01/2009	
**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).
- The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March (1)3, 2009.

The reporting person has reported the weighted average sale price for the transactions reported on this line. The range of prices for the (2) reported transactions is \$19.17 to \$19.35. The reporting person will provide, upon request by the Securities and Exchange Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price.

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.