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UNITED RI Form 4	ENTALS INC /	DE									
November 1	8, 2013										
FORM	ЛД										PROVAL
	UNITE	D STATES				ND EX(D.C. 20		NGE C	OMMISSION	OMB Number:	3235-0287
Check th if no lon	oer.									Expires:	January 31, 2005
subject to Section 16. STATEMENT OF CHANGES IN BENEFIC					[CIA	LOW	NERSHIP OF	Estimated average burden hours per			
Form 4 of										response	0.5
Form 5 obligatio								U	e Act of 1934,		
may con See Instr 1(b).	tinue. Section 1		Public Ut of the In	•		•	· ·		1935 or Section 0	1	
(Print or Type	Responses)										
1. Name and A Asplund Da	Address of Reportinale A	ng Person <u>*</u>	Symbol			Ticker or		-	5. Relationship of Issuer	Reporting Pers	son(s) to
						ALS INC	/DE	[URI]	(Checl	k all applicable)
	(First) ED RENTALS, AMFORD PLAC		3. Date of (Month/D 11/15/20	ay/Year		ansaction			Director X Officer (give below) Sr. VP - B		Owner er (specify CIO
	(Street)		4. If Amer			-	l		6. Individual or Jo	int/Group Filin	g(Check
STAMFOR	RD, CT 06902		Filed(Mon	un/Day/1	rear))			Applicable Line) _X_ Form filed by C Form filed by M Person		
(City)	(State)	(Zip)	Table	e I - No	n-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Executio any				4. Securit on(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
G				Code	V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	11/15/2013			А		5,053 (1)	А	\$ 68.59	30,361	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)

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. ofNumber of Derivatives Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu: Bene Own Follo Repo Trans (Insti
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
Reporting O (ner Hunte / H	Reporting Owner Funct / Runess		10% Owner	Officer	Other				
Asplund Dale A C/O UNITED RENTALS, INC. 100 FIRST STAMFORD PLACE - STE 700 STAMFORD, CT 06902				Sr. VP - Bus. Services & CIO					
Signatures									
/ s / Dale A. Asplund	18/2013								

**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) Represents synergy award payable in the form of unrestricted common stock.

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.