### PRA GROUP INC Form 3 November 02, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval OMB approval

### INITIAL STATEMENT OF 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(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address Person <u>*</u> White Laura	of Reporting	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name PRA GROU			ng Symbol
(Last) (First 140 CORPORAT	, , , , ,	10/22/2015	4. Relationship Person(s) to Is			5. If Amendment, Date Original Filed(Month/Day/Year)
(Stree NORFOLK, VA	eet)		Director X Officer (give title below	Other	ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person
(City) (Stat	te) (Zip)	Table I - N	lon-Derivati	ve Securiti	es Ber	neficially Owned
1.Title of Security (Instr. 4)		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nati Owner (Instr.	1
Common Stock		2,547		D	Â	
Reminder: Report on owned directly or indi	•	ach class of securities benefici	ally SE	EC 1473 (7-02	)	
	information cont required to respo	pond to the collection of ained in this form are not ond unless the form displa MB control number.				
Table I	I - Derivative Secu	rities Beneficially Owned (e.	g., puts, calls,	warrants, opt	ions, co	onvertible securities)

1. Title of Derivative Security	2. Date Exerc	cisable and	3. Title and	Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)			Securities Underlying		Conversion	Ownership	Beneficial Ownership
			Derivative Security		or Exercise Form of		(Instr. 5)
			(Instr. 4)		Price of	Derivative	
	Date	Expiration le Date	Title	Amount or Number of	Derivative	Security:	
					Security	Direct (D)	
	Exercisable					or Indirect	

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

(I) (Instr. 5)

Shares

# **Reporting Owners**

Reporting Owner Name / Add	ress	Relationships					
1 0	Director	10% Owner	Officer	Other			
White Laura 140 CORPORATE BLVD NORFOLK, VA 23502	Â	Â	Chief Compliance Officer	Â			
Signatures							
/s/ Laura White	11/02/2015						
<u>**</u> Signature of Reporting Person	Date						

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 5(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. 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.