FIELDER JOHN R Form 3 January 09, 2013 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB Number:

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 of Reporting Person _* FIELDER JOHN R	2. Date of Event Requir Statement (Month/Day/Year)	0 3. 155der 1 (unie	3. Issuer Name and Ticker or Trading Symbol AMERICAN STATES WATER CO [AWR]				
(Last) (First) (Midd	lle) 01/02/2013	4. Relationship Person(s) to Issu			5. If Amendment, Date Original Filed(Month/Day/Year)		
3950 CEDAR AVE							
(Street)		(Check al	(Check all applicable) 6. Individual o				
LONG BEACH, CA 908	07	X Director Officer (give title below)	10% Own Other (specify below)	er Filing(Cho _X_Form Person	eck Applicable Line) filed by One Reporting filed by More than One		
(City) (State) (Zip) Table]	I - Non-Derivativ	e Securities	Beneficially	y Owned		
1.Title of Security (Instr. 4)		ially Owned () I I ((Ownership Ov	Nature of Indi wnership 1str. 5)	irect Beneficial		
Reminder: Report on a separate line owned directly or indirectly.	for each class of securities ber	neficially SEC	C 1473 (7-02)				
information required to	o respond to the collection contained in this form are respond unless the form d lid OMB control number.	not					
Table II - Derivative	Securities Beneficially Owne	ed (e.g., puts, calls, w	arrants, option	s, convertible	securities)		
1. Title of Derivative Security (Instr. 4)	Expiration Date Sec (Month/Day/Year) Det	Fitle and Amount of curities Underlying rivative Security str. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

Date

Exercisable

Expiration

Title

Date

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Reporting Owners

Reporting Owner Name / Address	Relationships					
1 0	Director	10% Owner	Officer	Other		
FIELDER JOHN R 3950 CEDAR AVE LONG BEACH, CA 90807	ÂX	Â	Â	Â		
Signatures						
/s/ John R. 01/0 Fielder 01/0	9/2013					
<u>**</u> Signature of I Reporting Person	Date					

Explanation of Responses:

No securities are beneficially owned

* 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.