OFFICEMAX INC Form 8-K October 25, 2006

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, DC 20549

#### FORM 8-K

**Current Report** 

Pursuant to Section 13 or 15(d) of The Securities Exchange Act of 1934

Date of Report: Date of earliest event reported October 25, 2006 October 20, 2006

SEC 1473 (7-02)

### **OFFICEMAX INCORPORATED**

3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)4. Nature of Indirect Beneficial Ownership (Instr. 5)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
FREEMAN JANE A C/O SCIENTIFIC LEARNING CORP 300 FRANK H. OGAWA PLAZA, SUITE 600 OAKLAND, CA 94612	ÂX	Â	Â	Â	
Signatures					
/s/ Catherine F. Kennedy by power of attorney	01/05/2015				
**Signature of 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.