Edgar Filing:	ADVENT/CLA	YMORE ENH	ANCED GRO	WTH & INCC	ME FUND -	Form 4
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ADVENT/C Form 4 August 27, 2	LAYMORE ENF	HANCED	O GROW	TH & IN	COME F	UND	1			
FORM	Л								OMB AF	PPROVAL
Check th	UNITED	STATES		RITIES A shington,			NGE (COMMISSION	OMB Number:	3235-0287 January 31,
if no long subject to Section 1 Form 4 o	6. STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17(a) of the	Public U		ling Com	ipany	Act of	e Act of 1934, f 1935 or Section 40	n	
(Print or Type I	Responses)									
1. Name and A SEIZERT C	Address of Reporting	Person [*]	Symbol	Name and		Tradin	g	5. Relationship of Issuer		
		ENHANCED GROWTH & INCOME FUND [LCM]					(Check all applicable) 10% Owner			
(Last)	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/27/2015					Officer (give titleX Other (specify below) below) Trustee			
227 W. MO FLOOR	NROE STREET,									
01110100	(Street)			ndment, Da hth/Day/Year	-			6. Individual or Jo Applicable Line) _X_ Form filed by O Form filed by M	One Reporting Pe	rson
CHICAGO,								Person		F 0
(City)	(State)	(Zip)	Tabl	e I - Non-D	Perivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8)		sposed	of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)		
Stock	08/26/2015			Р	1,900	А	ф 8.14	54,995.2797	D	
Common Stock	08/26/2015			Р	200	А	\$ 8.15	55,195.2797	D	
Common Stock	08/26/2015			Р	3,000	А	\$ 8.19	58,195.2797	D	
Common Stock	08/26/2015			Р	1,600	А	\$ 8.2	59,795.2797	D	
	08/26/2015			Р	200	А		59,995.2797	D	

Common Stock					\$ 8.23		
Common Stock	08/26/2015	Р	900	А	\$ 8.24	60,895.2797	D
Common Stock	08/26/2015	Р				71,095.2797	

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		· · ·		Securities			(Instr.	3 and 4)		Owne
	Security				Acquired				<i>,</i>		Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(mon
					(insu: 5, 4, and 5)						
					+, and <i>5</i>)						
									Amount		
						Data	E		or		
						Date	Expiration	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Relations					
1	Director	10% Owner	Officer	Other			
SEIZERT GERALD L 227 W. MONROE STREET 7TH FLOOR CHICAGO, IL 60606	Х			Trustee			
Signatures							
/s/ Gerald L. Seizert, by Mark E. Mathiasen Pursuant to a Power of Attorney 08/27/201							
<u>**</u> Signatu	are of Reporti	ng Person			Date		

Reporting Owners

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).

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.