## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1 Name and Address of			1										
Name and Address of Reporting Person*  Cutlip Robert G			2. Issuer Name and Ticker or Trading Symbol GLADSTONE COMMERCIAL CORP [GOOD]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director T Officer (give title below)  Other (specify below)					
1521 WESTBRAN	(First) NCH DRIVE, S	(Middle) SUITE 200	3. Date of Earliest Transaction (Month, 08/02/2013			onth/Day	y/Year)		President				
(Street) MCLEAN, VA 22102			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Ow					Owned					
1.Title of Security (Instr. 3)		ate Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	Beneficial
			(Month/Day/Year)	Code	V	(A) or Amount (D) I		Price	(Instr. 3			or Indirect (I)	Ownership (Instr. 4)
Common Stock	08	8/02/2013		P		1,500	A	\$ 18.343	7,000			D	
					Pers	sons wr	าo resp	ond to	tne colle	ction of inf	ormation	SEC	1474 (9-02)
			Derivative Securi		cont the f	tained in form dis	n this f splays of, or B	orm ard a curre	e not requ ntly valid	uired to res OMB con	formation spond unle trol numbe	SS	1474 (9-02)
1. Title of Derivative Security (Instr. 3)  Price of Derivative Security  Security		3A. Deemed Execution Da	Derivative Securive.g., puts, calls, w  4. Transaction Code Year) (Instr. 8)	arrants, op 5.	the f	tained in form dis	of, or Borcisable on Date	eneficia curities) 7. T Am Uno	e not requ ntly valid	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (l or Indire	11. Natu of Indire Beneficie Ownersh (Instr. 4)

## Keporung Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Cutlip Robert G 1521 WESTBRANCH DRIVE SUITE 200 MCLEAN, VA 22102			President				

# **Signatures**

Michael LiCalsi, Attorney-in-fact	08/06/2013
**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).

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.