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MAUER DAVID M

Form 5

April 21, 2003

1. Name and Address of Reporting Person Mauer, David One Whitehall Street New York, NY 10004-2109

USA

- Issuer Name and Ticker or Trading Symbol The Topps Company, Inc. (topp)
- 3. IRS or Social Security Number of Reporting Person (Voluntary)
- 4. Statement for Month/Year 03/2003
- 5. If Amendment, Date of Original (Month/Year)
- 6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
 - (X) Director () 10% Owner
 - () Officer (give title below) () Other (specify below)
- 7. Individual or Joint/Group Filing (Check Applicable Line)
 - (X) Form filed by One Reporting Person
 - () Form filed by More than One Reporting Person

TABLE I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

+	+		+		+				+	+
1. Title of Security	12.	Trans-	2A	.Execu-	13.	Trans- 4.	Securities	Acquired	(A)	5. Amo
1		action		action		action	or Dispose	d of (D)	J	Securi
1		Date		Date		Code				Benefi
1										Owned
1		(Month/		(Month/		1				Follow
1		Day/		Day/		+		+	+	+ Yea
1		Year)		Year)		Am	nount A	/D Price	J	
+	+		-+		+		+	+	1	+

Common Stock 29000