

AMERIGAS PARTNERS LP

Reported by
FEE TROY E

FORM 3

(Initial Statement of Beneficial Ownership)

Filed 05/29/13 for the Period Ending 05/28/13

Address	460 N GULPH RD BOX 965 VALLEY FORGE, PA 19406
Telephone	6103377000
CIK	0000932628
Symbol	APU
SIC Code	5990 - Retail Stores, Not Elsewhere Classified
Industry	Oil & Gas Operations
Sector	Energy
Fiscal Year	12/31

INITIAL STATEMENT OF 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 Reporting Person *			2. Date of Event Requiring Statement (MM/DD/YYYY)		3. Issuer Name and Ticker or Trading Symbol	
Fee Troy E (Last) (First) (Middle)			5/28/2013		AMERIGAS PARTNERS LP [APU]	
460 NORTH GULPH ROAD (Street)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
KING OF PRUSSIA, PA 19406 (City) (State) (Zip)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below) Vice President /			
			5. If Amendment, Date Original Filed (MM/DD/YYYY)		6. Individual or Joint/Group Filing (Check Applicable Line)	
					<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities beneficially owned.	0	D	

Table II - Derivative Securities Beneficially Owned (e.g. , puts, calls, warrants, options, convertible securities)

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

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Fee Troy E 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406			Vice President	

Signatures

/s/ Troy E. Fee 5/29/2013
Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* 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.

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.

POWER OF ATTORNEY

I, Troy E. Fee, hereby authorize and designate:

- * Monica M. Gaudiosi, Vice President and General Counsel, Secretary of UGI Corporation
- * Steven A. Samuel, Vice President - Law, General Counsel of AmeriGas Propane, Inc.
- * Matthew A. Woodward, Assistant Secretary of AmeriGas Propane, Inc.
- * Jessica A. Milner, Assistant Secretary of UGI Corporation
- * Pamela A. Meredith, Associate Counsel of UGI Corporation
- * Courtney L. Sia, Manager, Human Resources and Executive Compensation
- * Lesley Aronson Shade, Paralegal of UGI Corporation
- * Jean M. Jones, Paralegal of UGI Corporation

each of whom may act individually to execute, acknowledge and file in my name and as my attorney-in-fact a Form 3 Initial Statement of Beneficial Ownership of S

5/29/13
Date

/s/ Troy E. Fee
Signed