FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	Washington, B.O. 20045	
	0= 0114110=0 IN DENIESION	
STATEMENT	OF CHANGES IN BENEFICIAL	OWNERSHIP

OMB A	PPROVAL
OMB Number:	3235-028

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

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

l	OIVID ALL INC	7V//L				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	hours per response:	0.5				

1. Name and Address of Reporting Person* Goldberger Daniel S					2. Issuer Name and Ticker or Trading Symbol electroCore, Inc. [ECOR]							(Che	elationship o eck all applic Director	able)	Perso	on(s) to Issu 10% Ov	
(Last) (First) (Middle) 150 ALLEN ROAD, SUITE 201					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2019						2	X Officer (give title below) Chief Executive			Other (specify below) Officer		
(Street) BASKIN RIDGE	IG N	J	07920	4	4. If Amendment, Date of Original Filed (Month/Day/Year)				Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(S	itate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date			. Transact ate Month/Day	Execution Date,		Code (Instr.		ed (A) or str. 3, 4 and 5	Beneficia Owned Fe	s Fo ally (D collowing (I)	Form: (D) or	Ownership form: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) o	r Price	Reported Transacti (Instr. 3 a	on(s)			(instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Yea	Code (Instr. Securities		tive ties (Month/Day/Year) of Securities Underlying Derivative Secu (Instr. 3 and 4)		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	on(s)		
Restricted Stock Units	\$0.00	10/01/2019		A		215,053		(1)	10	0/01/2029	Common Stock	215,053	\$0.00	215,05	i3	D	
Stock Option	\$1.86	10/01/2019		A		764,331		(2)	10	0/01/2029	Common Stock	764,331	\$0.00	764,33	31	D	

Explanation of Responses:

- 1. Represents a grant of restricted stock units of the Issuer. Each restricted stock unit represents the contingent right to receive, upon vesting of the unit, one share of Issuer common stock. Subject to accelerated vesting in certain circumstances, one-fourth of the restricted stock units are scheduled to vest on each of the first four anniversaries of the Start Date (as defined in the Offer Letter, dated September 26, 2019, between the Reporting Person and the Issuer), as long as the Reporting Person remains in the service of the Issuer through the respective vesting date.
- 2. Subject to accelerated vesting in certain circumstances, one-fourth of the option is scheduled to vest on each of the first four anniversaries of the Start Date, as long as the Reporting Person remains in the service of the Issuer through the respective vesting date.

Remarks:

/s/ Daniel Goldberger

10/03/2019

** 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 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.

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 Number.