FORM 3

C/O J.C. FLOWERS & CO.

NY

10153

(Street) 767 FIFTH

AVENUE, 23RD

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden er response: 0.5

			3	ECORITIES				hours pe	r response:	0.5
				.6(a) of the Securities Exchange At the Investment Company Act of 1						
1. Name and Address of Reporting Person* <u>JCF III Europe Holdings L.P.</u>	R (N	Date of Event equiring Staten Month/Day/Year 7/24/2018	nent	3. Issuer Name and Ticker or Tra ENCORE CAPITAL C	ading Symbol	<u>NC</u> [E	CCPG]			
(Last) (First) (Middle) C/O J.C. FLOWERS & CO.				4. Relationship of Reporting Pers (Check all applicable) Director X				mendment, Da n/Day/Year)	ate of Original Filed	
767 FIFTH AVENUE, 23RD FLOOR (Street) NEW YORK NY 10153				Officer (give title below)	Other (spe below)	ecify		able Line) Form filed b	t/Group Filing (Check by One Reporting Pers by More than One Person	
(City) (State) (Zip)										
1. Title of Security (Instr. 4)	18	able I - Non	2.	ve Securities Beneficial Amount of Securities eneficially Owned (Instr. 4)	3. Ownersh Form: Dire or Indirect (Instr. 5)	ct (D)	4. Natur (Instr. 5		t Beneficial Ownersh	nip
Common Stock				4,327,644	I		See Fo	otnotes ⁽¹⁾⁽²⁾	1	
	(e.g			Securities Beneficially		s)				
1. Title of Derivative Security (Instr. 4)		2. Date Exerc Expiration Day/\ (Month/Day/\	ate	3. Title and Amount of Secur Underlying Derivative Secur		4. Conve	rsion (rcise F	5. Ownership Form:	6. Nature of Indired Beneficial Owners (Instr. 5)	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Deriva Securi	tive c	Direct (D) or Indirect (I) (Instr. 5)		
Name and Address of Reporting Person* JCF III Europe Holdings L.P.										
(Last) (First) C/O J.C. FLOWERS & CO. 767 FIFTH AVENUE, 23RD FLOOR	(Middle)									
(Street) NEW YORK NY	10153									
(City) (State)	(Zip)									
1. Name and Address of Reporting Person* JCF Associates III L.P.										
(Last) (First) C/O J.C. FLOWERS & CO. 767 FIFTH AVENUE, 23RD FLOOR	(Middle)									
(Street) NEW YORK NY	10153									
(City) (State)	(Zip)									
Name and Address of Reporting Person* JCF Associates III Ltd.										
(Last) (First)	(Middle)									

FLOOR						
(City)	(State)	(Zip)				
1. Name and Address of Reporting Person* Flowers J. Christopher						
	(Last) (First) (Middle) C/O J.C. FLOWERS & CO. 767 FIFTH AVENUE, 23RD FLOOR					
(Street) NEW YORK	NY	10153				
(City)	(State)	(Zip)				

Explanation of Responses:

1. Represents securities held directly by JCF III Europe Holdings L.P. JCF Associates III L.P. is the general partner of JCF III Europe Holdings L.P. JCF Associates III Ltd. is the general partner of JCF Associates III L.P. J. Christopher Flowers is the sole director of JCF Associates III Ltd., and thus may be deemed to control JCF Associates III Ltd. and each entity directly or indirectly controlled by JCF Associates III Ltd., including JCF III Europe Holdings L.P.

2. The Reporting Persons disclaim beneficial ownership of the securities reported on this Form 3, except to the extent of their pecuniary interest therein, and the inclusion of these securities in this report shall not be deemed an admission of beneficial ownership of these securities for purposes of Section 16 of the Securities Exchange Act of 1934 or for any other purpose.

JCF III EUROPE HOLDINGS L.P., By: JCF Associates III L.P., its general partner, By: 08/03/2018 JCF Associates III Ltd., its general partner, By: /s/ J. Christopher Flowers, Director JCF ASSOCIATES III L.P., By: JCF Associates III Ltd., its 08/03/2018 general partner, By: /s/ J. Christopher Flowers, Director JCF ASSOCIATES III LTD., By: /s/ J. Christopher Flowers, 08/03/2018 **Director** 08/03/2018 /s/ J. Christopher Flowers

** Signature of Reporting Person Date

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 Number.