Edgar Filing: CITIZENS FINANCIAL SERVICES INC - Form 4

CITIZENS FIN Form 4 May 16, 2014	JANCIAL SEI	RVICES	INC								
FORM 4 OMB APPROVAL VINITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number: 3235-02 Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP SECURITIES Expires: January 20									3235-0287 January 31, 2005 verage		
(Print or Type Res	ponses)										
Freeman Thomas E. Symbol				Name and Ticker or Trading S FINANCIAL SERVICES FS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				of Earliest Transaction Day/Year) 2014				X_ Director 10% Owner Officer (give title Other (specify below)			
(Street) 4. If Amenda Filed(Month/ MANSFIELD, PA 16933				ment, Date Original /Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Table I	- Non-Der	ivative Se	curitio	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
COMMON CLASS	05/15/2014			А	94	A	\$0	4,300.5314	D		

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

	Director	10% Owner	Officer	Other					
Freeman Thomas E. 831 KELLYTOWN ROAD MANSFIELD, PA 16933	Х								
Signatures									
GINA MARIE BOOR FOR TI DATED 12/23/2009	HOMAS	E FREEMAI	N UNDE	ER POWER OF ATTORNEY	05/1				
	**Signature of Reporting Person								
Explanation of Responses:									
* If the form is filed by more than o	one reporting	g person, <i>see</i> In	struction 4	(b)(v).					

Relationships

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Reporting Owners

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)
			Code V	7 (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

Reporting Owners

Reporting Owner Name / Address

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Remarks:

STOCK AWARD

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.

/16/2014

Date

9. Nt

Deriv Secu Bene Own Follo Repo Trans (Insti