CHICOS FAS INC Form 3 June 26, 2017 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB A Washington, D.C. 20549 OMB

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and A Person <u>*</u> KERR D	-	oorting	2. Date of Event Requiring Statement (Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol CHICOS FAS INC [CHS]					
(Last)	(First)	(Middle)	06/22/2017		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)			
11215 MET	RO PARK	WAY				(-				
(Street)				(Check	(Check all applicable)		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
FORT MYE	(Silect) Director Officer (give title below			Other	Owner Filing(_X_Fo w) Person Fo					
(City)	(State)	(Zip)	Table	e I - Non-Derivat	ive Securitie	es Beneficia	Beneficially Owned			
1.Title of Secur (Instr. 4)	rity			ount of Securities icially Owned 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of I Ownership (Instr. 5)	ndirect Beneficial			
Reminder: Repo owned directly		ate line for ea	ach class of securities b	eneficially SI	EC 1473 (7-02)	1				
	inforn requir	nation conta ed to respo	pond to the collection ained in this form around unless the form MB control number.	re not displays a						
Т	able II - Der	ivative Secu	rities Beneficially Own	ned (e.g., puts, calls,	warrants, opt	ions, converti	ble securities)			
1. Title of Deri (Instr. 4)	vative Securi	Expi	ration Date S //Day/Year) D	. Title and Amount of ecurities Underlying Derivative Security Instr. 4)	4. Conversio or Exercis Price of		(Instr. 5)			

Date

Exercisable Date

Expiration

Title

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

OMB Number:	3235-0104						
Expires:	January 31, 2005						
Estimated average							
burden hours per							
response	0.5						

Reporting Owners

Reporting Owner Name / Addr	ess	Relationships					
L O	Director	10% Owner	Officer	Other			
KERR DEBORAH 11215 METRO PARKWAY FORT MYERS, FL 339		Â	Â	Â			
Signatures							
/s/ Todd E. Vogensen)6/26/2017						
**Signature of Reporting Person	Date						

Explanation of Responses:

No securities are beneficially owned

* 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. 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.