#### HORTMAN EDWIN W JR

Form 4

March 22, 2012

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Check this box if no longer

subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction

**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(b).

1. Name and Address of Reporting Person \* HORTMAN EDWIN W JR

> (First) (Middle)

> > (Zip)

2. Transaction Date 2A. Deemed

P.O. BOX 3668

(Last)

(City)

1. Title of

Security

(Instr. 3)

Common

(Street)

MOULTRIE, GA 31776

(State)

03/20/2012

(Month/Day/Year)

2. Issuer Name and Ticker or Trading Symbol

Ameris Bancorp [ABCB]

3. Date of Earliest Transaction (Month/Day/Year) 03/20/2012

4. If Amendment, Date Original Filed(Month/Day/Year)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 3. 4. Securities Acquired Execution Date, if Transaction(A) or Disposed of (D)

Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8)

> (A) or Code V Amount (D)

17,300 A (1)

149,927.3195 (2) 13.15

Price

Issuer

below)

Person

\_X\_\_ Director

Applicable Line)

5. Amount of

Securities

Reported

Beneficially

Transaction(s)

(Instr. 3 and 4)

Owned Following

X\_ Officer (give title

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

Number: January 31, Expires:

**OMB APPROVAL** 

2005 Estimated average burden hours per

10% Owner

Other (specify

7. Nature of

Indirect

Beneficial

Ownership

(Instr. 4)

response...

OMB

5. Relationship of Reporting Person(s) to

(Check all applicable)

President & CEO

Ownership

Direct (D)

or Indirect

(Instr. 4)

D

Form:

6. Individual or Joint/Group Filing(Check

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

0.5

3235-0287

#### Edgar Filing: HORTMAN EDWIN W JR - Form 4

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/Year)	4. Transacti Code (Instr. 8)		onNumber Expiration D of (Month/Day, Derivative Securities Acquired (A) or Disposed of (D)		Amou Under Securi	tle and bunt of erlying urities r. 3 and 4)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
					4, and 5)	Date	Expiration		Amount	
				Code V	(A) (D)	Exercisable	Date	Title	Number of Shares	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
<b>rg</b>	Director	10% Owner	Officer	Other				
HORTMAN EDWIN W JR								
P.O. BOX 3668	X		President & CEO					
MOULTRIE, GA 31776								

# **Signatures**

Edwin W. Hortman, Jr., by Cara P. Horne, Attorney In Fact 03/22/2012

### **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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).
  - Restricted stock grant pursuant to the Ameris Bancorp Omnibus Stock Ownership and Long-Term Incentive Plan, vesting on March 20,

Date

- (1) 2016 based upon the achievement of annual performance; provided, however, that vesting shall be limited by any restrictions applicable to participants in the Troubled Assets Relief Program.
- (2) This total includes 282.5631 shares acquired by the reporting person as a participant in an employee stock purchase dividend reinvestment plan.

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.

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