#### Edgar Filing: CITIZENS FINANCIAL SERVICES INC - Form 4

CITIZENS FIN Form 4 May 16, 2014	JANCIAL SERV	/ICES	INC								
FORM	Л								OMB AF	PROVAL	
	Washington, D.C. 20549						OMB Number:	3235-0287			
Check this b if no longer									Expires:	January 31, 2005	
subject to STATEMENT OF CHANGE Section 16.				ES IN BENEFICIAL OWNERSHIP OF ECURITIES					Estimated average burden hours per		
Form 4 or Form 5	Filed pure	iont to '	Section 16(	a) of the $S$	Couritio	• Evc	hange	e Act of 1934,	response	0.5	
obligations may continu <i>See</i> Instructi 1(b).	e. Section 17(a)	of the		ity Holdin	g Comp	any A	Act of	1935 or Section	I		
(Print or Type Res	ponses)										
Chappell Robert W Symbol CITIZ			Symbol					5. Relationship of Reporting Person(s) to Issuer			
			CITIZENS FINANCIAL SERVICES INC [CZFS]					(Check all applicable)			
(Last) ENTERPRISE OFFICE BOX	E ROAD, POST	ddle)	3. Date of Ea (Month/Day 05/15/201	/Year)	saction			X Director Officer (give t below)		Owner er (specify	
	(Street) 4. If Amenda Filed(Month/			Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
ROME, PA 18	8837							Form filed by M Person			
(City)	(State) (Z	Zip)	Table I	- Non-Deri	ivative Se	curiti	es Acqu	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execu any		3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	l (A) o l of (D	)	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	4,908.8638	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)

Remarks:	
STOCK AWARD	
*	m, one of which must be manually signed. If space is insufficient, <i>see</i> Instruction and to the collection of information contained in this form are not required to respond

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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. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Other

# **Reporting Owners**

**Reporting Owner Name / Address** 

Chappell Robert W ENTERPRISE ROAD

ROME, PA 18837

POST OFFICE BOX 156

Signatures GINA MARIE BOOR FOR ROBERT W CHAPPELL UNDER POWER OF ATTORNEY DATED 03/30/2006

\*\*Signature of Reporting Person

Relationships

10% Owner Officer

## **Explanation of Responses:**

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Director

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

6 for procedure. pond unless the form displays

05/16/2014

Date