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

#### CHOICEONE FINANCIAL SERVICES INC

Form 4

August 11, 2015

## FORM 4

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

OMB Number: 3235-0287

Estimated average

burden hours per

**OMB APPROVAL** 

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

2. Issuer Name and Ticker or Trading

Symbol

response...

5. Relationship of Reporting Person(s) to

Issuer

1(b).

(Print or Type Responses)

JOHNSON MARY J

1. Name and Address of Reporting Person \*

			CHOICEONE FINANCIAL SERVICES INC [NONE]						(Check all applicable)				
(Last) (First) (Middle)  109 EAST DIVISION STREET			3. Date of Earliest Transaction (Month/Day/Year) 08/07/2015						Director 10% Owner _X_ Officer (give title Other (specify below) Secretary				
	SPARTA, M	(Street) II 49345		4. If Ame	ndment, Date Original hth/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)	Tabl	e I - No	n-D	erivative :	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Executio any	ned n Date, if Day/Year)	Code (Instr.	8)	4. Securi n(A) or Di (Instr. 3,	ispose 4 and (A) or	d 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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
	Common Stock	05/14/2015			L	V	360	A	\$ 23.35	2,558.5	I	By spouse's 401(k) Plan	
	Common Stock	08/07/2015			P		427	A	\$ 22.65	2,985.5	I	By spouse's 401(k) Plan	
	Common Stock	08/11/2015			P		473	A	\$ 22.65	3,458.5	I	By spouse's 401(k) Plan	

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Common 9,879,7126 D Stock (2)

Common 401(k)979.488 (1) Ι Stock Plan

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.

9. Nu

Deriv Secu Bene Own Follo Repo Trans (Insti

#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transa Code (Instr.		5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)
				Code	V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
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Director 10% Owner Officer Other

JOHNSON MARY J

109 EAST DIVISION STREET Secretary

**SPARTA, MI 49345** 

### **Signatures**

Mary J. Johnson 08/11/2015

\*\*Signature of Date Reporting Person

### **Explanation of Responses:**

- 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).
- (1) The number of shares in column 5 is based on a plan statement dated December 31, 2014.

Reporting Owners 2

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(2) Column 5 reflects the acquisition of 55.9014 shares from the reinvestment of cash dividends and 92.2996 shares under the ChoiceOne Financial Services, Inc. Employee Stock Purchase 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.