Clark Sheila R Form 4 June 05, 2018

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005 Estimated average

Form 5 obligations **SECURITIES**

burden hours per response... 0.5

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Clark Sheila R

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

CHOICEONE FINANCIAL SERVICES INC [NONE]

(Last)

(First) (Middle) 3. Date of Earliest Transaction

Director 10% Owner X_ Officer (give title Other (specify below)

109 EAST DIVISION STREET

(State)

06/01/2018

(Month/Day/Year)

S.V.P. - ChoiceOne Bank (Sub.)

(Street) 4. If Amendment, Date Original

(Month/Day/Year)

(Zip)

6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year) Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SPARTA, MI 49345

(City)

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Beneficial Indirect (I) Ownership Owned Following (Instr. 4) (Instr. 4) Reported

(A)

Transaction(s) (Instr. 3 and 4)

Code V Amount (D) Price

Common Stock

 $21,166 \frac{(1)}{2}$ D

Common Stock

401(k) 5,576.39 (1) I 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.

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$\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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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)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 25.65	06/01/2018		A	375	06/01/2018	05/31/2028	Common	375
Stock Option (Right to Buy)	\$ 25.65	06/01/2018		A	375	06/01/2019	05/31/2028	Common	375
Stock Option (Right to Buy)	\$ 25.65	06/01/2018		A	375	06/01/2020	05/31/2028	Common	375
Stock Option (Right to Buy)	\$ 25.65	06/01/2018		A	375	06/01/2021	05/31/2028	Common	375

Reporting Owners

/s/ Thomas L. Lampen, by Power of

Attorney

Reporting Owner Name / Address	Relationships						
F	Director	10% Owner	Officer	Other			
Clark Sheila R 109 EAST DIVISION STREET SPARTA, MI 49345			S.V.P ChoiceOne Bank (Sub.)				
Signatures							

**Signature of Reporting Person Date

Reporting Owners 2

06/05/2018

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).
 - On April 25, 2018, ChoiceOne Financial Services, Inc. announced a 5% stock dividend, payable to all holders of record as of May 10,
- (1) 2018. As a result, the reporting person received 1,269.44 shares of common stock as of May 31, 2018, of which 1,004.00 shares are owned directly and 265.44 shares are owned indirectly through the reporting person's 401(k) 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.