## Edgar Filing: WILSON JEFFREY L - Form 4

WILSON JEFFRI	EY L											
Form 4												
April 15, 2013												
FORM 4	ORM 4							OMB APPROVAL				
. •	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check this box	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires:	January 31,		
if no longer subject to										2005 Worago		
Section 16.			SECURITIES						Estimated average burden hours per			
Form 4 or			response 0.5									
Form 5 obligations	-						-	e Act of 1934,				
may continue.	Section 17(a			•	• •	•		1935 or Section	n			
See Instruction		30(h)	of the Inve	estment Co	ompany	Act of	of 194	0				
1(b).												
(Print or Type Respor	nses)											
1 Name and Address	s of <b>Penorting</b> I	Person *	2 L N	I T	1 7	1.		5 Relationship of	Reporting Per	son(s) to		
1. Name and Address of Reporting Person <u>*</u> WILSON JEFFREY L		2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer					
		CITIZENS FINANCIAL SERVICES										
			INC [CZFS]					(Check all applicable)				
(Last) (	(First)	arliest Transaction				Director 10% Owner						
(Month/D				n/Day/Year)				X_ Officer (give title Other (specify below) below)				
11 IVES STREE	Т		04/12/201	3				· · · · · · · · · · · · · · · · · · ·	VICE PRESID	ENT		
(5	Street)	reet) 4. If A			Original			6. Individual or Joint/Group Filing(Check				
	Filed(Month/Day/Year)					Applicable Line)						
								_X_ Form filed by C				
WELLSBORO, I	PA 16901							Form filed by M Person		porting		
(City) (S	State) (	Zip)	Table I	- Non-Der	ivative Se	curiti	es Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of 2.	Transaction Da	te 2A. De	eemed	3.	4. Securi	ties		5. Amount of	6.	7. Nature of		
Security (N	(Month/Day/Year) Ex		tion Date, if	TransactionAcquired (A) or					Ownership	Indirect		
(Instr. 3)		any		Code Disposed of (D)				Beneficially	(D) or Owne			
		(Mont	h/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned Following	Ownership (Instr. 4)				
						(A)		Reported	(Instr. 4)			
						(A) or		Transaction(s)				
				Code V	Amount	(D)	Price	(Instr. 3 and 4)				
COMMON 04	4/12/2013			А	165	А	\$0	2,254.7033	D			
CLASS							÷Ŭ	, ,				
COMMON								4	Ι	BY		
CLASS								4	1	SPOUSE		

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.

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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)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber 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 Owno Follo Repo Trans (Instr
Repo				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

#### Relationships **Reporting Owner Name / Address** 10% Owner Officer Other Director WILSON JEFFREY L **11 IVES STREET** SENIOR VICE PRESIDENT WELLSBORO, PA 16901 Signatures GINA MARIE BOOR FOR JEFFREY L. WILSON UNDER POWER OF ATTORNEY 04/15/2013

DATED 10/12/2010

\*\*Signature of 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).

## **Remarks:**

STOCK AWARDS GRANTED PURSUANT TO THE CITIZENS FINANCIAL SERVICES, INC. 2006 RESTRICTED STO

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.

Date