Edgar Filing: LANDY R JOSEPH - Form 4

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Form 4											
February 02, 2018							OMB APPROVAL				
	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287	
Check this b if no longer subject to		ES IN BI	ENEFIC		OWI	NERSHIP OF	Expires: Estimated a	January 31, 2005 verage			
Section 16. Form 4 or	SECURITIES						burden hour response				
obligations may continu	<i>See</i> Instruction 30(h) of the Investment Company Act of 1935 of Sector							1			
(Print or Type Res	sponses)										
1. Name and Address of Reporting Person <u>*</u> LANDY R JOSEPH			2. Issuer Name and Ticker or Trading Symbol CITIZENS FINANCIAL SERVICES					5. Relationship of Reporting Person(s) to Issuer			
		INC [CZFS]					(Check all applicable)				
(Last) (First) (Middle) 741 SOUTH MAIN STREET			3. Date of Earliest Transaction (Month/Day/Year) 02/02/2018					X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ATHENS, PA	18810							Form filed by M Person			
(City)	(State) (Zi	p)	Table I	- Non-Der	vivative Se	curiti	es Acq	uired, Disposed of	, or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execut any	eemed ion Date, if n/Day/Year)	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) o of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
COMMON CLASS	02/02/2018			G	1,750	А	\$0	18,746.0517	D		
COMMON CLASS	02/02/2018			G	20	D	\$0	18,726.0517	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.

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration D (Month/Day/ e	6. Date Exercisable and Expiration Date (Month/Day/Year)		le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

LANDY R JOSEPH 741 SOUTH MAIN STREET X ATHENS, PA 18810

Signatures

GINA MARIE BOOR FOR R. JOSEPH LANDY UNDER POWER OF ATTORNEY DATED 08/22/2002

**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).

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.

02/02/2018

Date