Edgar Filing: KOSA E GENE - Form 4

KOSA E GEN Form 4 May 11, 2018								OMB AI	PPROVAL	
FORM 4UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549OMB Number:3235-0287Check this box if no longer subject to Section 16. Form 4 or 										
1. Name and Add KOSA E GEN	Symbol	TIZENS FINANCIAL SERVICES				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 927 PUSHER	(First) (Midd	(Month/Day	3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018				X_ Director 10% Owner Officer (give title Other (specify below) below)			
ULYSSES, P	lment, Date Original /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) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)	(Month/Day/Year)	Transaction Date 2A. Deemed			(A) or)	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 CLASS	05/10/2018		А	150	А	\$0	4,474.4125	D		
COMMON CLASS							22	Ι	BY 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of			Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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

KOSA E GENE 927 PUSHERSIDING ROAD X ULYSSES, PA 16948

Signatures

GINA MARIE BOOR FOR E GENE KOSA 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).

Remarks:

STOCK AWARD.

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.

05/11/2018

Date