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Mosso Robert I	B Mr											
Form 4												
May 11, 2018												
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations	STATE Filed pu	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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										
may continu <i>See</i> Instructi 1(b).	le.		of the Inve	•	• •							
(Print or Type Res	ponses)											
1. Name and Address of Reporting Person <u>*</u> Mosso Robert B Mr			2. Issuer Name and Ticker or Trading Symbol CITIZENS FINANCIAL SERVICES INC [CZFS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 12 MORRIS LANE			3. Date of Earliest Transaction (Month/Day/Year) 05/10/2018					Director 10% Owner X Officer (give title Other (specify below) below) SENIOR VICE PRESIDENT				
		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					
WELLSBORG	D, PA 16901							Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Table I	- Non-Der	ivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Execu any	eemed tion Date, if h/Day/Year)	on Date, if TransactionAcquired (A) or Code Disposed of (D)))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
COMMON CLASS	05/10/2018			А	108	А	\$0	722.1358	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.

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

Security	Derivative Conversion (Month/Da Security or Exercise			Execution Date any (Month/Day/Ye	Code	of	Expiration Date (Month/Day/Year)		Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
					Code V	⁷ (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Repor	ting O	wners	•									
Reporting	Owner Name	/ Address	Relationships									
	o wher I value / I value	Autress	Director	r 10% Owner	Officer			Other				
Mosso Ro 12 MORR WELLSB		6901	SENIOR VICE PRESIDENT									
Signa	tures											
GINA MARIE BOOR FOR ROBERT B MOSSO UNDER POWER OF ATTORNEY DATED 06/17/2004									05/11/2018			
			<u>**</u> Sig	nature of Reportin	g Person					:	Date	
Explai	nation	of Re	spo	nses:								

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4.

5.

6. Date Exercisable and 7. Title and

8. Price of 9. Nu

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

3. Transaction Date 3A. Deemed

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Remarks:

1. Title of 2.

STOCK AWARDS GRANTED PURSUANT TO THE CITIZENS FINANCIAL SERVICES, INC. 2016 EQUITY INCENTI

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.