

CONSUMER PORTFOLIO SERVICES INC

Form 4

October 30, 2013

**FORM 4****UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

Check this box  
if no longer  
subject to  
Section 16.  
Form 4 or  
Form 5  
obligations  
may continue.  
See Instruction  
1(b).

**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  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
**TERRY CHRIS**

2. Issuer Name **and** Ticker or Trading  
Symbol  
**CONSUMER PORTFOLIO  
SERVICES INC [CPSS]**

5. Relationship of Reporting Person(s) to  
Issuer

(Check all applicable)

(Last) (First) (Middle)  
**19500 JAMBOREE RD**  
  
(Street)

3. Date of Earliest Transaction  
(Month/Day/Year)  
**10/29/2013**

\_\_\_\_ Director \_\_\_\_ 10% Owner  
☒ Officer (give title below) \_\_\_\_ Other (specify below)  
**Sr. Vice President**

**IRVINE, CA 92612**

4. If Amendment, Date Original  
Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check  
Applicable Line)  
☒ 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)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
common stock, no par value	10/29/2013		S	2,000 D	\$ 7.01 55,174	D	
common stock, no par value	10/29/2013		S	1,600 D	\$ 7.02 53,574	D	
common stock, no par value	10/29/2013		S	100 D	\$ 7.025 53,474	D	
common stock, no par value	10/29/2013		S	100 D	\$ 7.028 53,374	D	

Edgar Filing: CONSUMER PORTFOLIO SERVICES INC - Form 4

par value

common  
stock, no  
par value

10/29/2013

S

779

D

\$ 7.03 52,595

D

common  
stock, no  
par value

10/29/2013

S

100

D

\$ 7.12 52,495

D

common  
stock, no  
par value

10/29/2013

S

200

D

\$ 7.13 52,295

D

common  
stock, no  
par value

10/29/2013

S

500

D

\$ 7.14 51,795

D

common  
stock, no  
par value

10/29/2013

S

1,560

D

\$ 7.15 50,235

D

common  
stock, no  
par value

10/29/2013

S

100

D

\$ 7.17 50,135

D

common  
stock, no  
par value

10/29/2013

S

100

D

\$ 7.18 50,035

D

common  
stock, no  
par value

10/29/2013

S

35

D

\$ 7.2 50,000

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.**

SEC 1474  
(9-02)

**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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repor 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
TERRY CHRIS 19500 JAMBOREE RD IRVINE, CA 92612			Sr. Vice President	

## Signatures

/s/Chris Terry

10/30/2013

\_\_\_\_\_  
Signature of  
Reporting Person

Date

## 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.