#### Edgar Filing: CHOICEONE FINANCIAL SERVICES INC - Form 4

#### CHOICEONE FINANCIAL SERVICES INC

Form 4

December 20, 2016

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

OMB APPROVAL

Number: 3235-0287

Synings: January 31,

Expires: 2005
Estimated average

burden hours per response... 0.5

if no longer subject to Section 16.

Section 16.

Form 4 or

Form 5

Obligations

Filed pursuant to Section 16(a) of the Securities E

Form 5 obligations may continue. See Instruction See Instruction 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * LAMPEN THOMAS L			2. Issuer Name <b>and</b> Ticker or Trading Symbol CHOICEONE FINANCIAL SERVICES INC [NONE]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)		
(Last) 109 EAST D	(First)  IVISION S	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/16/2016	Director 10% Owner Other (specify below)		
SPARTA, M	(Street) I 49345		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 Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned		

(City)	(State)	(Zip) Tab	ole I - Non-	Derivative Se	ecuriti	es Acquir	ed, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)	4. Securities our Disposed (Instr. 3, 4 and	of (D) nd 5)  (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 Stock	12/16/2016		Code V M	Amount 1,000	(D)	Price \$ 17.95	9,789.798 (1)	D	
Common Stock	12/16/2016		F	747.9167	D	\$ 24	9,041.8813	D	
Common Stock							1,458.6261 (2)	I	401(k) Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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number.

8. P Der Sec (Ins

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. Transactic Code (Instr. 8)	Deriv Secu Acqu (A) o Disp of (D	vative rities nired or osed o) r. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 17.95	12/16/2016		M		250	01/18/2007	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	12/16/2016		M		250	01/18/2008	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	12/16/2016		M		250	01/18/2009	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	12/16/2016		M		250	01/18/2010	01/17/2017	Common	250

## **Reporting Owners**

Reporting Owner Name / Address	Kelationships							
	Director	10% Owner	Officer	Other				
LAMPEN THOMAS L 109 EAST DIVISION STREET SPARTA, MI 49345			Treasurer					

Date

## **Signatures**

/s/ Thomas L.

Lampen 12/20/2016

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\*\*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).
- (1) Column 5 reflects the acquisition of 56.8332 shares from the reinvestment of cash dividends and 47.8978 shares under the ChoiceOne Financial Services, Inc. Employee Stock Purchase Plan.
- (2) The number of shares in column 5 is the reporting person's best estimate based on a plan statement dated December 31, 2015.

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.

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