BRAFORD LEE A

Form 4 June 05, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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obligations

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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 continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BRAFORD LEE A**

2. Issuer Name and Ticker or Trading Symbol

Issuer

CHOICEONE FINANCIAL

SERVICES INC [NONE]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)

10% Owner X_ Officer (give title Other (specify below)

109 EAST DIVISION STREET

(Street)

06/01/2018

S.V.P. - ChoiceOne Bank (Sub.) 6. Individual or Joint/Group Filing(Check

Applicable Line)

Director

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

(Instr. 8)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

SPARTA, MI 49345

(City) (State) (Zip) 1.Title of 2. Transaction Date 2A. Deemed

3. 4. Securities (Month/Day/Year) Execution Date, if TransactionAcquired (A) or Code Disposed of (D) 5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Transaction(s) (Instr. 3 and 4)

Reported

Code V Amount (D) Price

(Instr. 3, 4 and 5)

Common Stock

Security

(Instr. 3)

4,371.6653 (1) D

I

Common Stock

138.409 (1)

401(k) Plan

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

(Month/Day/Year)

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SEC 1474 (9-02)

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$\label{thm:convergence} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

8. P Der Sec (Ins

| 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) | | 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) | \$ 25.65 | 06/01/2018 | | A | 375 | 06/01/2018 | 05/31/2028 | Common | 375 |
| Stock Option (Right to Buy) | \$ 25.65 | 06/01/2018 | | A | 375 | 06/01/2019 | 05/31/2028 | Common | 375 |
| Stock Option (Right to Buy) | \$ 25.65 | 06/01/2018 | | A | 375 | 06/01/2020 | 05/31/2028 | Common | 375 |
| Stock Option (Right to Buy) | \$ 25.65 | 06/01/2018 | | A | 375 | 06/01/2021 | 05/31/2028 | Common | 375 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|-----------------------------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| BRAFORD LEE A 109 EAST DIVISION STREET SPARTA, MI 49345 | | | S.V.P ChoiceOne Bank (Sub.) | | | | |
| Signatures | | | | | | | |

/s/ Thomas L. Lampen, by Power of

Attorney

**Signature of Reporting Person

Date

Reporting Owners 2

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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).
 - On April 25, 2018, ChoiceOne Financial Services, Inc. announced a 5% stock dividend, payable to all holders of record as of May 10,
- (1) 2018. As a result, the reporting person received 214.7635 shares of common stock as of May 31, 2018, of which 208.1745 shares are owned directly and 6.5890 shares are owned indirectly through the reporting person's 401(k) plan.

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.