## Edgar Filing: HERZOG DANIEL R - Form 4

HERZOG DA	ANIEL R											
Form 4												
May 30, 201	8											
FORM	14										PROVAL	
	UNITE	D STATE				ND EX( D.C. 20		NGE (	COMMISSION	OMB Number:	3235-0287	
Check this box										Expires:	January 31,	
if no long subject to		EMENT O	F CHAN	GES IN	GES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average	
	Section 16.				SECURITIES					burden hours per		
Form 4 or									response 0.5			
Form 5 obligation		•						•	e Act of 1934,			
may cont	inue. Section		Public Ut ) of the In	•		•	- ·		f 1935 or Section	n		
See Instru 1(b).	iction	50(II)	) of the m	vestiller	nv	Joinpan	y Aci	. 01 19-	+0			
1(0).												
(Print or Type R	Responses)											
	ddress of Reporti	ing Person <u>*</u>		r Name and Ticker or Trading				g	5. Relationship of Reporting Person(s) to Issuer			
HERZOG DANIEL R Symbol									155401			
Clear			Clearfie	learfield, Inc. [CLFD]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of		Tra	nsaction						
7050 WINN		N CLUTE	(Month/D	-					Director X Officer (give		Owner er (specify	
100 WINN	ETKA AVE.	N., SUITE	05/26/20	)18					below)	below)		
100									Chief 1	Financial Offic	er	
(Street) 4. If A			4. If Amer	If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
Filed(M				ed(Month/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
BDOOKI V	N PARK, MN	55428								fore than One Re		
DROOKLI	IN FARE, MIN	55420							Person			
(City)	(State)	(Zip)	Table	e I - Non-	-De	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction l	Date 2A. Dee	emed	3.		4. Securi	ties Ad	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if		ctio	n(A) or Di	ispose	d of	Securities	Form: Direct		
(Instr. 3)		any (Month	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Beneficially Owned	· /	Beneficial Ownership			
		Dayrical) (Illsu. o) (Illsu.			(111501. 5,	+ and	5)	Following	(Instr. 4)	(Instr. 4)		
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
~				Code	V	Amount	(D)	Price	(msu. 5 and 4)			
Common Stock	05/26/2018			F <u>(1)</u>		2,175	D	\$ 11.1	44,103	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)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu 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							
L O	Director	10% Owner	Officer	Other				
HERZOG DANIEL R 7050 WINNETKA AVE. N. SUITE 100 BROOKLYN PARK, MN 55428			Chief Financial Officer					
Signatures								
Randy Dehmer by Power of Attor Herzog	ney for D	aniel R.	05/30/2018					
<u>**</u> Signature of Reporting I	Person		Date					
Evelopetion of Deer								

## 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) Payment of tax by withholding shares on vesting the second 1/3 of restricted stock that was granted on May 26, 2016.

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.