ASURE SOFTWARE INC Form 3 October 14, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB approval

INITIAL STATEMENT OF 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 A Person <u>*</u> Wolfe Cl | - | - | 2. Date of Event Requ Statement (Month/Day/Year) | | 3. Issuer Name and Ticker or Trading Symbol ASURE SOFTWARE INC [ASUR] | | | | | |
|--|------------------------------|-----------------------------|--|---|--|---|---|--|--|--|
| (Last) | (First) | (Middle) | 10/06/2014 | | 4. Relationship of Reporting Person(s) to Issuer | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| 12504 ALC | ONZA DR | | | | | × × | · / | | | |
| (Street) AUSTIN, TX 78739 | | | | (Check | (Check all applicable) Director 10% Owner Officer Other (give title below) (specify below) Chief Financial Officer | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | | | X Officer (give title below | | | | | | |
| (City) | (State) | (Zip) | Table | e I - Non-Derivat | ive Securitie | es Beneficial | Beneficially Owned | | | |
| 1.Title of Secu (Instr. 4) | rity | | | ount of Securities icially Owned 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Ind Ownership (Instr. 5) | lirect Beneficial | | | |
| Reminder: Rep owned directly | | ate line for ea | ch class of securities b | eneficially SI | EC 1473 (7-02) | | | | | |
| | infor n requir | nation conta ed to respo | pond to the collection ained in this form ar and unless the form MB control number. | re not displays a | | | | | | |
| ſ | Table II - Der | ivative Secu | rities Beneficially Own | ned (e.g., puts, calls, | warrants, opti | ons, convertibl | e securities) | | | |
| 1. Title of Deri (Instr. 4) | vative Securi | Expin | ration Date S /Day/Year) D | . Title and Amount of ecurities Underlying Derivative Security Instr. 4) | 4. Conversio or Exercis Price of | - · · · · · | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |

Date

Exercisable

Expiration

Title

Date

Derivative

Security

Amount or

Number of

Shares

Security:

Direct (D)

or Indirect

(Instr. 5)

(I)

3235-0104

January 31,

2005

0.5

Number:

Expires:

response...

Estimated average burden hours per

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|--------------------|----|-------------------------|-------|--|--|
| | Director 10% Owner | | Officer | Other | | |
| Wolfe Charles Bradford 12504 ALCONZA DR AUSTIN, TX 78739 | Â | Â | Chief Financial Officer | Â | | |
| Signatures | | | | | | |
| /s/ Charles Bradford Wolfe | 10/14/20 | 14 | | | | |
| <u>**</u> Signature of Reporting Person | Date | | | | | |

Explanation of Responses:

No securities are beneficially owned

* If the form is filed by more than one reporting person, see Instruction 5(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).

Â **Remarks:**

The purpose of this filing is to report the election of the Reporting Person as an Officer.

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.