

Greenland Adom
Form 4
February 05, 2018

FORM 4

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

OMB APPROVAL

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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 *
Greenland Adom

2. Issuer Name and Ticker or Trading Symbol
CHOICEONE FINANCIAL SERVICES INC [NONE]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
109 EAST DIVISION STREET
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
02/01/2018

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
S.V.P. - ChoiceOne Bank (Sub.)

SPARTA, MI 49345

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	02/01/2018		P	V 383 A	\$ 854.8626 ⁽¹⁾ 24.25 ₍₂₎	I	IRA
Common Stock					2,872.7058 _{(2) (3)}	D	

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

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(9-02)

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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
				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
Greenland Adom 109 EAST DIVISION STREET SPARTA, MI 49345			S.V.P. - ChoiceOne Bank (Sub.)	

Signatures

/s/ Adom J.
Greenland

02/02/2018

**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).

- On April 27, 2017, ChoiceOne Financial Services, Inc. announced a 5% stock dividend, payable to all holders of record as of May 10, 2017. As a result, the reporting person received 144.6148 shares of common stock as of May 31, 2017, of which 21.9925 are owned indirectly through the reporting person's IRA and 122.6223 are owned directly.
- (1) 2017. As a result, the reporting person received 144.6148 shares of common stock as of May 31, 2017, of which 21.9925 are owned indirectly through the reporting person's IRA and 122.6223 are owned directly.
 - (2) Column 5 reflects the acquisition of 10.0201 shares from the reinvestment of cash dividends.
 - (3) Column 5 reflects the acquisition of 258.7667 shares under the ChoiceOne Financial Services, Inc. Employee Stock Purchase Plan, and 35.7706 shares from the reinvestment of cash dividends.

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.