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AMERISERV FINANCIAL INC /PA/ Form 4 December 20, 2013

December	20, 2013						
FORI	М 4				OMB AP	PROVAL	
-	UNITE	D STATE:	S SECURITIES AND EXCHANGE (Washington, D.C. 20549	COMMISSION	OMB Number:	3235-0287 January 31,	
Check if no lo subject Sectior Form 4 Form 5 obligat	to SIATE						
may co	Section 1 struction) of the Investment Company Act of 194		l		
(Print or Type	e Responses)						
1. Name and Address of Reporting Person <u>*</u> WISE ROBERT L			2. Issuer Name and Ticker or Trading Symbol AMERISERV FINANCIAL INC	5. Relationship of Reporting Person(s) to Issuer			
			/PA/ [ASRV]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction(Month/Day/Year)12/16/2013	X Director Officer (give t below)		Owner r (specify	
РА	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M	ne Reporting Per	son	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acc	Person	or Bonoficial	v Owned	
1.Title of Security	2. Transaction Da (Month/Day/Year	te 2A. Deem	ned 3. 4. Securities Acquired (A		6. Ownership	7. Nature of Indirect	

1.1100.01	2. If answerion Dute	Li i. Decinica	5.	1. Decumeos	ricqui	100 (11)	5. I fillount of	0.	7.1 (atare of
Security	(Month/Day/Year)	Execution Date, if	Transaction Disposed of (D)			Securities	Ownership	Indirect	
(Instr. 3)		any	Code (Instr. 3, 4 and 5)		Beneficially	Form:	Beneficial		
		(Month/Day/Year)	(Instr. 8)				Owned Following	Direct (D)	Ownership
					()		Reported	or Indirect	(Instr. 4)
					(A)		Transaction(s)	(I)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(Instr. 4)	
Common	12/16/2013	12/19/2013	Р	231.0231	А	\$ 3.03	110,772.9399	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. 6. Date Exercisable an orNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		n Date	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	7 (A) (I	D) Date Exercisab	Expiration le Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
WISE ROBERT L							
	Х						
PA							
Signatures							
Sharon M. Callihan, Attorney-in-Fact	12/20/2013						
<u>**</u> 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).

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.