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Olson Gary S Form 4 August 29, 20 FORM Check this if no longe subject to Section 16 Form 4 or Form 5 obligation may contin <i>See</i> Instruct 1(b).	4 UNITED ST 4 UNITED ST 5 STATEME 5. Filed pursu Section 17(a)	CNT OF ant to So of the P	Was CHAN	hingto GES II SECU 5(a) of ility He	n, i N H JRI the old	D.C. 20 BENEFI ITIES Securit ing Corr	549 CCIA ies E ipany	L OWN xchange ⁄ Act of	OMMISSION NERSHIP OF e Act of 1934, 1935 or Section 0	OMB Number: Expires: Estimated a burden hou response		
(Print or Type R	esponses)											
Olson Gary S Symbol				Name and Ticker or Trading					5. Relationship of Reporting Person(s) to Issuer			
						insaction			(Check all applicable)			
200 PALMER STREET (Month/D 08/28/20				-					X Director 10% Owner X Officer (give title Other (specify below) below) President and CEO			
Filed(Mon				ndment, Date Original nth/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
(City)	URG, PA 18360 (State) (Zi	in)							Person			
	2. Transaction Date 2				n-Do			-	uired, Disposed of		•	
(Instr. 3)	(Month/Day/Year) H		Date, if	Code (Instr. 8	8)	4. Securit n(A) or Di (Instr. 3, 4	sposed 4 and (A) or	d of (D) 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)		
Common Stock	08/28/2017			Code S	V	Amount 90	(D) D	Price \$ 15.02	104 037 (2) (3)	D		
Common Stock	08/28/2017			S		10	D	\$ 14.86	$\frac{104,027}{(4)} \underbrace{\overset{(2)}{(5)}}_{(5)}$	D		
Common Stock	08/28/2017			S		7,900	D	\$ 14.81	96,127 (2) (3) (4) (5) (5)	D		
Common Stock									40,128 <u>(1)</u>	Ι	By 401(k)	
Common Stock									130	Ι	By spouse's IRA 1	

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Common Stock	136	Ι	By spouse's IRA 2
Common Stock	12,311 <u>(1)</u>	Ι	By ESOP

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerci	sable and	7. Title and A	Amount of	8. P
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Underlying Securities		Der
Security	or Exercise		any	Code	of	(Month/Day/Y	(ear)	(Instr. 3 and	4)	Sec
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	'e				(Ins
	Derivative				Securities	S				
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 12.35					05/23/2009	05/23/2018	Common Stock	100,844	

Reporting Owners

Reporting Owner Name / Address	Relationships							
I B	Director	10% Owner	Officer	Other				
Olson Gary S 200 PALMER STREET STROUDSBURG, PA 18360	Х		President and CEO					
Signatures								
/s/ Marc Levy, pursuant to pow attorney	ver of	08	8/29/2017					
**Signature of Reporting Person	l		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).

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- (1) Reflects transactions not required to be reported pursuant to Section 16 of the Securities Exchange Act of 1934, as amended.
- (2) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2014.
- (3) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2015.
- (4) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2016.
- (5) Includes shares of restricted stock which vest at a rate of 25% per year commencing on September 30, 2017.

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.