## Edgar Filing: CITIZENS FIRST CORP - Form 4/A

	FIRST CORP											
Form 4/A February 25	2015											
									OMB AF	PROVAL		
FORM	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 c	ger <b>STATE</b> 16.	MENT O	F CHAN	GES IN SECUR		ICIA	AL OWN	NERSHIP OF	Expires: Estimated a burden hour	's per		
Form 5 obligatio may cont See Instr 1(b).	Filed pu ns Section 17	(a) of the l	Public U		ding Cor	npan	y Act of	e Act of 1934, 1935 or Section 0	response	0.5		
(Print or Type ]	Responses)											
GRISE SARAH GLENN Symbol			uer Name <b>and</b> Ticker or Trading ol ZENS FIRST CORP [CZFC]				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(Check all applicable)				
1065 ASHL	EY STREET SU	JITE 150	(Month/E 09/11/2	•				X Director Officer (give t below)		Owner r (specify		
	(Street)			endment, Da nth/Day/Year Ω14	-	ıl		6. Individual or Joi Applicable Line) _X_ Form filed by O	-	-		
BOWLING	GREEN, KY 42	2103	071212	014				Form filed by M Person	ore than One Rej	porting		
(City)	(State)	(Zip)	Tabl	le I - Non-D	Derivative	Secur	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		ned 1 Date, if	3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3,	ties Ad	cquired d of (D)	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 Indirect		
Common Stock	09/11/2014			Р	100	А	\$ 11.699	5,423 <u>(1)</u>	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)	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	of	vative rities uired or osed )) r. 3,		ate	Amou Under Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
		Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address					
Troporting C when I w	porting o when runne / runness		10% Owner	Officer	Other
GRISE SARAH GLENN 1065 ASHLEY STREET SUITE 150 BOWLING GREEN, KY 42103		Х			
Signatures					
Kim Harmon, POA	02/25/201	5			
<pre>**Signature of Reporting Person</pre>	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).
- (1) The reporting person's Form 3 and subsequent Form 4s overstated the amount of securities beneficially owned by the reporting person by 1,355 shares.

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.