

Casey Diane S
Form 4
August 17, 2017

FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
Expires: January 31, 2015
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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 *
Casey Diane S

2. Issuer Name and Ticker or Trading Symbol
HEALTHCARE SERVICES GROUP INC [HCSG]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
3220 TILLMAN DRIVE, SUITE 300
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
08/14/2017

Director 10% Owner
 Officer (give title below) Other (specify below)

BENSALEM, PA 19020

(City) (State) (Zip)

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

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)
			Code	V	Amount or Price		
Common Stock	08/14/2017		M		1,000 A \$ 17.5	1,000	D
Common Stock	08/14/2017		M		1,000 A \$ 23.5	2,000	D
Common Stock	08/14/2017		M		1,000 A \$ 28.02	3,000	D
Common Stock	08/14/2017		M		1,000 A \$ 30.3	4,000	D
Common Stock	08/14/2017		M		1,001 A \$ 34.14	5,001	D

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Casey Diane S 3220 TILLMAN DRIVE SUITE 300 BENSALEM, PA 19020	X			

Signatures

/s/ John C. Shea, by Power of Attorney
Date: 08/17/2017

__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).
- (1) These options shall vest and become exercisable at the rate of 20% annually, commencing on the first anniversary of the January 5, 2012 grant date.
- (2) These options shall vest and become exercisable at the rate of 20% annually, commencing on the first anniversary of the January 4, 2013 grant date.
- (3) These options shall vest and become exercisable at the rate of 20% annually, commencing on the first anniversary of the January 3, 2014 grant date.
- (4) These options shall vest and become exercisable at the rate of 20% annually, commencing on the first anniversary of the January 5, 2015 grant date.
- (5) These options shall vest and become exercisable at the rate of 20% annually, commencing on the first anniversary of the January 4, 2016 grant date.

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.