Edgar Filing: CHICOS FAS INC - Form 4

CHICOS FA	AS INC									
Form 4										
May 02, 201	14									
FORM	ΛΔ							OMB AF	PROVAL	
	UNITED					NGE C	OMMISSION	OMB	3235-0287	
Check th	hov	,	Vashington	n, D.C. 20)549			Number:		
if no lon	ger							Expires:	January 31, 2005	
subject t	- NIATHA	IENT OF CH			ICIA	LOW	NERSHIP OF	Estimated a		
Section			SECU	RITIES				burden hours per		
Form 4 o Form 5		~ ·						response	0.5	
obligatio						•	e Act of 1934,			
may con			•	•	· ·		1935 or Section	1		
See Instr	ruction	30(h) of th	e Investmen	t Compar	ıy Ас	t of 194	0			
1(b).										
(Print or Type	Responses)									
(Thit of Type	(Kesponses)									
1 Name and A	Address of Reporting	Person* 2 I	auar Nama an	d Tieker or	Tradia		5. Relationship of	Reporting Pers	on(s) to	
	GER KENT A			er Name and Ticker or Trading			Issuer			
Symbol				NC [CHS	1					
a 3				-	'J		(Check all applicable)			
(Last)	(First) (I		te of Earliest 7	Transaction			D' (100	0	
			onth/Day/Year) /01/2014				Director X Officer (give	title Other (specify		
11213 10121		04/0	1/2014				below)	below)		
							E	VP- COO		
(Street) 4. If Ame			Amendment, D	endment, Date Original			6. Individual or Joint/Group Filing(Check			
		Filed	(Month/Day/Yea	ar)			Applicable Line)			
							_X_Form filed by O Form filed by M			
FT. MYER	S, FL 33966						Person		porting	
(City)	(State)	(Zip)	Table I - Non-	Derivative	Secur	ities Aca	uired, Disposed of,	or Beneficial	v Owned	
1.Title of			3.	4. Secur			5. Amount of	6.	7. Nature of	
	7 I rangaction Liste	2A. Deemeu		ion(A) or D			Securities	0. Ownership	Indirect	
	2. Transaction Date (Month/Day/Year)	Execution Date	in mansaci	IOII(A) OF L	ispose	d of (D)	Securities			
Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date any	Code	(Instr. 3			Beneficially	Form: Direct		
Security			Code	(Instr. 3			Beneficially Owned	Form: Direct (D) or	Beneficial Ownership	
Security		any	Code	(Instr. 3			Beneficially Owned Following	Form: Direct (D) or Indirect (I)	Beneficial	
Security		any	Code	(Instr. 3	, 4 and (A)		Beneficially Owned Following Reported	Form: Direct (D) or	Beneficial Ownership	
Security		any	Code ar) (Instr. 8)	(Instr. 3,	(A) or	5)	Beneficially Owned Following	Form: Direct (D) or Indirect (I)	Beneficial Ownership	
Security (Instr. 3)	(Month/Day/Year)	any	Code ar) (Instr. 8)	(Instr. 3	(A) or	5) Price	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I)	Beneficial Ownership	
Security		any	Code ar) (Instr. 8) Code V	(Instr. 3,	(A) or	5)	Beneficially Owned Following Reported Transaction(s)	Form: Direct (D) or Indirect (I)	Beneficial Ownership	

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)

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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. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				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			
KLEEBERGER KENT A 11215 METRO PARKWAY FT. MYERS, FL 33966			EVP- COO				
Signatures							
David M. Oliver, Attorney in Fact		05/02/2014					
<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.