BRIGGS JOHN Form 4 April 18, 2012

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **BRIGGS JOHN**

2. Issuer Name and Ticker or Trading

Issuer

5. Relationship of Reporting Person(s) to

Symbol

HEALTHCARE SERVICES **GROUP INC [HCSG]**

(Check all applicable)

(Last) (First) (Middle)

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

X_ Director 10% Owner Officer (give title Other (specify

3220 TILLMAN DRIVE, SUITE

(Street)

(State)

(Zip)

300

4. If Amendment, Date Original

04/17/2012

Filed(Month/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

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

BENSALEM, PA	190	12(
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(City)

		Table 1 - Non-Derivative Securities Acquired, Disposed bi, or Deficically 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)	Transactionor Disposed of (D) Code (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
			Code V	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
Common stock	04/17/2012		M/K	724	A	\$ 14.3067	8,343	D	
Common stock	04/17/2012		M/K	2,078	A	\$ 13.9267	10,421	D	
Common stock	04/17/2012		M/K	2,304	A	\$ 10.3867	12,725	D	

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. 5. Number Transaction Derivative Code Securities (Instr. 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock option	\$ 14.3067	04/17/2012		M/K		1,497	01/04/2011	01/04/2020	common stock	1,497
Stock option	\$ 14.3067	04/17/2012		M/K		703	01/04/2012	01/04/2020	common stock	703
Stock option	\$ 13.9267	04/17/2012		M/K		1,497	01/03/2009	01/03/2018	common stock	1,497
Stock option	\$ 13.9267	04/17/2012		M/K		1,497	01/03/2010	01/03/2018	common stock	1,497
Stock option	\$ 13.9267	04/17/2012		M/K		1,497	01/03/2011	01/03/2018	common stock	1,497
Stock option	\$ 13.9267	04/17/2012		M/K		1,497	01/03/2012	01/03/2018	common stock	1,497
Stock option	\$ 10.3867	04/17/2012		M/K		1,497	01/05/2010	01/05/2019	common stock	1,497
Stock option	\$ 10.3867	04/17/2012		M/K		1,497	01/05/2011	01/05/2019	common	1,497
Stock option	\$ 10.3867	04/17/2012		M/K		1,497	01/05/2012	01/05/2019	common	1,497

Reporting Owners

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

Reporting Owners 2

Signatures

/s/ John M. Briggs 04/18/2012

**Signature of Date
Reporting Person

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.

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