

CONSUMER PORTFOLIO SERVICES INC

Form 4

October 30, 2014

FORM 4

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

OMB APPROVAL

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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 *
TERRY CHRIS

2. Issuer Name and Ticker or Trading Symbol
CONSUMER PORTFOLIO SERVICES INC [CPSS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
19500 JAMBOREE ROAD
(Street)

3. Date of Earliest Transaction (Month/Day/Year)
10/28/2014

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
Sr. Vice President

IRVINE, CA 92612
(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)
				(A) or (D)	Price		
common stock, no par value	10/28/2014		S	600	D \$ 7.04	65,204	D
common stock, no par value	10/28/2014		S	500	D \$ 7.045	64,704	D
common stock, no par value	10/28/2014		S	4,306	D \$ 7.05	60,398	D
common stock, no par value	10/28/2014		S	300	D \$ 7.055	60,098	D

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par value							
common stock, no par value	10/28/2014	S	1,100	D	\$ 7.06	58,998	D
common stock, no par value	10/28/2014	S	200	D	\$ 7.065	58,798	D
common stock, no par value	10/28/2014	S	5,128	D	\$ 7.07	53,670	D
common stock, no par value	10/28/2014	S	1,000	D	\$ 1,000	52,670	D
common stock, no par value	10/28/2014	S	2,615	D	\$ 7.08	50,055	D
common stock, no par value	10/28/2014	S	1,900	D	\$ 7.085	48,155	D
common stock, no par value	10/28/2014	S	5,006	D	\$ 7.09	43,149	D
common stock, no par value	10/28/2014	S	2,112	D	\$ 7.095	41,037	D
common stock, no par value	10/28/2014	S	4,633	D	\$ 7.1	36,404	D
common stock, no par value	10/28/2014	S	300	D	\$ 7.105	36,104	D
common stock, no par value	10/28/2014	S	200	D	\$ 7.115	35,904	D
common stock, no par value	10/28/2014	S	100	D	\$ 7.12	35,804	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.

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities 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)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
						Date Exercisable	Expiration Date	Title	Amount or Number of Shares
						Code	V	(A)	(D)

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
TERRY CHRIS 19500 JAMBOREE ROAD IRVINE, CA 92612			Sr. Vice President	

Signatures

/s/ Chris Terry 10/30/2014
 __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.