Edgar Filing: FINANCIAL INSTITUTIONS INC - Form 3

FINANCIAL INSTITUTIONS INC Form 3 May 09, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF 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 A Person <u>*</u> DORN A			2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol FINANCIAL INSTITUTIONS INC [FISI]							
(Last)	(First)	(Middle)	05/07/2014	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)				
220 LIBER WARSAW,	(Street)			X Director Officer			6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned								
1.Title of Secu (Instr. 4)	rity		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr					
Common St	ock		5,000		D	Â					
Reminder: Rep owned directly	or indirectly.		ach class of securities beneficits	SEC 1473 (7-02)							
1	requi curre	red to respo ntly valid O	ained in this form are not ond unless the form displ MB control number. urities Beneficially Owned (e.	ays a	warrants, op	tions, c	convertible securities)				

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
					Price of		
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

OMB APPROVAL

3235-0104

January 31,

2005

0.5

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Number:

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other DORN ANDREW W JR ÂX Â Â Â 220 LIBERTY STREET WARSAW, NYÂ 14569 Signatures /s/ Michael D. Grover, by power of 05/09/2014 attorney **Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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.