FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* KORN BILL				ME	2. Issuer Name and Ticker or Trading Symbol MEDICAL TRANSCRIPTION BILLING, CORP [MTBC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Chief Financial Officer						
(Last) (First) (Middle) 61 DARREN DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 07/28/2014								Chie	r Financial C	omicer			
(Street) BASKING RIDGE, NJ 07920				4. If	4. If Amendment, Date Original 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 Person						
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Exec any	2A. Deemed Execution Date, it any (Month/Day/Year		(Instr. 8)		(A) or Disposed o		Beneficia Reported		nt of Securities ally Owned Following I Transaction(s) and 4)		6. Ownership Form: Direct (D) or Indirect	of Be Ov	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							С	ode	V	Amou	(A) or (D)	Price				(I) (Instr. 4)		
Common value	Stock, \$0	.001 par	07/28/2014					P		1,000 (1)	A	\$ 5	1,000			D		
			Table II -					equire	the fo	orm dis	splays a of, or Ben	curre eficial	ntly valid	OMB con	spond unle trol numbe	SS		74 (9-02)
Security	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Deany	4. Transact Code Year) (Instr. 8)		tion	5.		and Expiration Date (Month/Day/Year) Solution (I			7. T Ame Und Seco	Title and ount of derlying urities str. 3 and Amount		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securi Direct or Indi	of tive ty: (D) rect	Beneficial Ownershi (Instr. 4)
					Code	V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	or Number of Shares					
Donor	ting O	WIN ORC																

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
KORN BILL 61 DARREN DRIVE BASKING RIDGE, NJ 07920			Chief Financial Officer					

Signatures

/s/ Bill Korn	07/29/2014
***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) Reporting Person purchased the securities through the Directed Share Program conducted in connection with the Issuer's initial public offering.

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.