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 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)												
1. Name and Address of Reporting Person* HAQ MAHMUD UL			2. Issuer Name and Ticker or Trading Symbol MEDICAL TRANSCRIPTION BILLING, CORP [MTBC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director					
(Last) (First) (Middle) 7 CLYDE ROAD			3. Date of Earliest Transaction (Month/Day/Year) 11/13/2014							Cn	airman and	CEO		
SOMER	SET, NJ 0	(Street)		4. If Amendment,	Date Ori	ginal F	iled(Month	n/Day/Year))	_X_ Form file	ed by One Repo		(Check Applica	ole Line)
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed				osed of, or l	ed 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)	Code (Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	lly Owned l Transaction	of Securities y Owned Following ransaction(s) d 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V	Amount	or (D)	Price				(I) (Instr. 4)	
Commor value	n Stock, \$0	.001 par	11/13/2014		P		2,050	A S	\$ 3.338 (1)	4,801,0	70		D	
				Derivative Securit		con the ired, D	tained in form dis Disposed o	n this fo splays a of, or Be	orm are currei	not requ ntly valid		ormation spond unle trol numbe	ess	1474 (9-02)
1. Title of Derivative Security	2. Conversion	3. Transaction			5.	6. I	oate Exerc Expiration	cisable	7. Ti	tle and		9. Number Derivative	of 10.	11. Nature

Reporting Owners

D. C. O. N.	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
HAQ MAHMUD UL							
7 CLYDE ROAD	X	X	Chairman and CEO				
SOMERSET, NJ 08873							

Signatures

/s/ Mahmud Haq	11/14/2014
**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) This price represents the weighted average of purchases ranging from \$3.33 to \$3.339. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares purchased at each separate price.

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.