FORM 4	4
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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).

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

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#### 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 Type Response	es)											
			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 10% Owner Officer (give title below) Other (specify below)			
7 CLYDE ROAD	(First)	(Middle)	3. Date of Earliest 7 11/09/2016	Transactior	n (Mc	onth/Day/Y	ear)					
(Street) SOMERSET, NJ 08873			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 2. Transaction   (Instr. 3) Date   (Month/Day/Year			ution Date, if Code (A) or Dispose (Instr. 8) (Instr. 3, 4 and				of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature Ownership of Indirect Form: Beneficial Direct (D) Ownership			
			(Wohth/Day/Tear)	Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	1	
Common Stock		11/09/2016		А		30,000 (1)	А	\$ 0	85,000	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 SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

		( <i>e.g.</i> , ]	puts, cans,	, wa	arran	is, op	tions, conver	tible securi	ties)					
Security	Conversion	 3A. Deemed Execution Date, if any (Month/Day/Year)	Code		5. Numb of Deriv Secur Acqui (A) or Dispo of (D) (Instr. 4, and	ber ative ities ired sed ) . 3,	6. Date Exer and Expirati (Month/Day	on Date /Year)	Amor Unde Secur	unt of rlying	Derivative Security (Instr. 5)	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
			Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## **Reporting Owners**

Demonstran Orman Name (	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DALY JOHN N 7 CLYDE ROAD SOMERSET, NJ 08873	Х						

## Signatures

/s/ Norman Roth, Attorney-in-Fact for John N. Daly

\*\*Signature of Reporting Person

11/10/2016 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) Restricted Stock Award awarded under the Company's 2014 Equity Incentive Plan, which vests fully on December 31, 2016.

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.