

SECURITIES AND EXCHANGE COMMISSION

FORM 4

Statement of changes in beneficial ownership of securities

Filing Date: **2003-02-10** | Period of Report: **2003-02-10**
SEC Accession No. **0000039311-03-000011**

([HTML Version](#) on secdatabase.com)

REPORTING OWNER

BUTLER RICHARD E/

CIK: **1198881**
Type: **4**

Mailing Address
*6731 BEECHWOOD ST
SARANAC MI 48881*

SUBJECT COMPANY

INDEPENDENT BANK CORP /MI/

CIK: **39311** | IRS No.: **382032782** | State of Incorporation: **MI** | Fiscal Year End: **1231**
Type: **4** | Act: **34** | File No.: **000-07818** | Film No.: **03547378**
SIC: **6022** State commercial banks

Mailing Address
*230 W MAIN ST
IONIA MI 48846*

Business Address
*230 W MAIN ST
PO BOX 491
IONIA MI 48846
6165279450*

<p>FORM 4</p> <p><input type="checkbox"/> Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).</p>	<p>UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549</p> <p>STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP</p> <p>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(f) of the Investment Company Act of 1940</p>	<p>OMB APPROVAL</p> <hr/> <p>OMB Number: 3235-0287 Expires: January 31, 2005 Estimated average burden hours per response. . . . 0.5</p>
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<p>1. Name and Address of Reporting Person*</p> <p>Butler, Richard E.</p> <p style="text-align: center;">(Last) (First) (Middle)</p> <p>6731 Beechwood St.</p> <p style="text-align: center;">(Street)</p> <p>Saranac, MI 48881</p> <p style="text-align: center;">(City) (State) (Zip)</p> <p>USA</p>	<p>2. Issuer Name and Ticker or Trading Symbol</p> <p>Independent Bank Corporation IBCP</p>	<p>4. Statement for (Month/Year)</p> <p>February 2003</p>	<p>6. Relationship of Reporting Person(s) to Issuer (Check all applicable)</p> <p>____ Director _____ 10% Owner</p> <p><input checked="" type="checkbox"/> Officer _____ Other</p> <p>Officer/Other Description Senior Vice President</p> <p>7. Individual or Joint/Group Filing (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Individual Filing</p> <p>____ Joint/Group Filing</p>
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Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. Transaction Code and Voluntary Code (Instr. 8)	4. Securities Acquired (A) or Disposed (D) Of (Instr. 3, 4, and 5)			5. Amount of Securities Beneficially Owned at End of Month (Instr. 3 and 4)	6. Ownership Form: Direct(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Amount	A/D	Price			
Common Stock	02/07/2003	S	3,531.00	D	\$19.930	1,453.00	D	
Common Stock						1,654.93	I	By ESOP

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

(over)
SEC 1474 (3-99)

Butler, Richard E. - February 2003
Form 4 (continued)

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)	4. Transaction Code and Voluntary Code (Instr.8)	5. Number of Derivative Securities Acquired (A) or Disposed (D) Of (Instr. 3,4 and 5)	6. Date Exercisable(DE) and Expiration Date(ED) (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr.5)	9. Number of Derivative Securities Beneficially Owned at End of Month (Instr.4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr.4)
					(DE)	(ED)					

Explanation of Responses :

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Richard E. Butler

02-10-2003

** Signature of Reporting Person

Date

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.