### Edgar Filing: CANNABIS SCIENCE, INC. - Form 4

CANNABIS SCIENCE, INC.       Form 4       Image: Science of the product of th											
(Print or Type	(Kesponses)										
Kane Robert James Symbol				ABIS SC	nd Ticker or CIENCE, I		0	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				/Day/Year)				_X Director _X Officer (give t elow)	Officer (give title Other (specify		
				Aonth/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)	Tab	ole I - Non-	-Derivative	Securi		red, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	ty (Month/Day/Year) Execution Date, if			(A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Cannabis Science Common Stock	07/02/2014			Code V S	Amount 150,000	(D) D	Price \$ 0.09	5,752,000	D		
Cannabis Science Common Stock	07/02/2014			S	400,000	D	\$ 0.0895	5,752,000	D		
Cannabis Science Common Stock	07/02/2014			S	99,000	D	\$ 0.091	5,752,000	D		

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Cannabis							
Science	07/02/2014	c	00.000	D	\$	5 752 000	D
Common	07/02/2014	3	99,000	D	0.0915	5,752,000	D
Stock							

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

Persons who respond to the collection of information 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 (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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	Date	7. Titl Amou Under Securi (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
Kane Robert James 11525 TEXARKANNA ROA PETYON, CO 80831	١D	Х		CFO					
Signatures									
Robert J Kane 1	10/27	/2014							
<u>**</u> Signature of Reporting Person	Dat	te							

## **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).

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.