Edgar Filing: CITIZENS FINANCIAL SERVICES INC - Form 4

CITIZENS FII Form 4 May 14, 2007	NANCIAL SE	RVICES I	INC								
FORM	Л								OMB AF	PROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287			
if no longer subject to	Section 16. SECURITIES Form 4 or Form 5 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							Act of 1934, 1935 or Section	Expires: January 31, 2005 Estimated average burden hours per response 0.5 n		
See Instruct 1(b).		30(h)	of the Inve	estment C	ompany	Act	of 194()			
(Print or Type Re	sponses)										
			2. Issuer Name and Ticker or Trading Symbol CITIZENS FINANCIAL SERVICES INC [CZFS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of 1 (Month/Da ENTERPRISE ROAD, POST 05/11/20 OFFICE BOX 156				-				_X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street) 4. If Amendment, Date Origin Filed(Month/Day/Year)				Original			Applicable Line)	pint/Group Filing(Check One Reporting Person		
ROME, PA 1	8837							Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Table	I - Non-Dei	rivative So	ecurit	ies Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)		Transaction Date 2A. Deemed Aonth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securi n(A) or Di (Instr. 3, Amount	spose	d of (D)	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)	
COMMON CLASS	05/11/2007			A	50	A	\$ 22.75	2,263.5349	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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Secur	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		

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Reporting Owners

Relationships **Reporting Owner Name / Address** Director 10% Owner Officer Other Chappell Robert W **ENTERPRISE ROAD** Х POST OFFICE BOX 156 ROME, PA 18837 Signatures

GINA MARIE BOOR FOR ROBERT W. CHAPPELL UNDER POWER OF ATTORNEY DATED 3/30/06

**Signature of Reporting Person

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).

Remarks: STOCK AWARD

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.

05/14/2007

Date