## Edgar Filing: Chappell Robert W - Form 4

Chappell Rober Form 4	rt W										
June 15, 2010											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington D.C. 20549								OMB AF OMB Number:	PROVAL 3235-0287		
Check this b if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instructi 1(b).	Filed p Filed p Section 1	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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(h) of the Investment Company Act of 1940								Lanuary 31Expires:200Estimated averageburden hours perresponse0.3	
1. Name and Add Chappell Robe	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) ENTERPRISE ROAD, POST OFFICE BOX 156			<ul><li>3. Date of Earliest Transaction</li><li>(Month/Day/Year)</li><li>06/14/2010</li></ul>					X_ Director10% Owner Officer (give titleOther (specify below)below)			
	(Street)	nent, Date Original Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
ROME, PA 18	8837							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table I	- Non-Deri	ivative Se	curiti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	(ear) Execu any		3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) c 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)		
COMMON CLASS	06/14/2010			S	656	А	\$ 27	3,076.1891	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)

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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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate Am Year) Uno Sec		le and int of rlying ities . 3 and 4)	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**

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 06/15/2010 DATED 03/30/2006

\*\*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).

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.

Date