Edgar Filing: CHEMUNG FINANCIAL CORP - Form 4

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CHEMUNG	FINANCIAL	CORP									
Form 4	2014										
January 17, 2									OMB AF	PROVAL	
FORM	4 UNITE	D STATES	S SECUR	RITIES A	ND EX	СНА	NGE C	COMMISSION	OMB		
Check th	is hox		Was	shington,	D.C. 20	549			Number:	3235-0287	
if no lon	F CHANGES IN BENEFICIAL OW SECURITIES					NERSHIP OF	Expires:	January 31, 2005			
subject to Section 1							Estimated average burden hours per				
Form 4 c							response	0.5			
Form 5 obligatio	n o *						•	e Act of 1934, 1935 or Section	n		
may con See Instr	linue.		of the In	•	•	· ·	•		1		
1(b).	uetion				•	•					
(Print or Type]	Responses)										
(This of Type)	(tesponses)										
	Address of Reportin	ng Person [*]		Name and	Ticker or	Tradi	ng	5. Relationship of Reporting Person(s) to Issuer			
POTTER JO	Symbol CHEMUNG FINANCIAL CORP					155401					
			[CHMG]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest Tr	ansaction			_X_ Director		Owner	
			(Month/Day/Year) 01/16/2014					Officer (give titleOther (specify below)			
AVENUE	UNDERWOO	JD	01/16/20	014							
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or Jo	int/Group Filin	g(Check	
Filed(M				nth/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person			
ELMIRA, NY 14905								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D			3.	4. Securi		-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Yea	ar) Execution any	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities Beneficially	Indirect Beneficial		
(Day/Year) (Instr. 8)			- /	Owned	(D) or Indirect (I)	Ownership		
						()		Following Reported	(Instr. 4)	(Instr. 4)	
						(A) or		Transaction(s) (Instr. 3 and 4)			
Common				Code V		(D)	Price \$	38,673.735			
Stock	01/16/2014			А	692	А	ф 32.56	<u>(1)</u>	D		
Common								7,618.187 <u>(1)</u>	т	Der Corre	
Stock								(2)	Ι	By Spouse	

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.

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 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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationsh	nips	
	Director	10% Owner	Officer	Other
POTTER JOHN F 822 UPPER UNDERWOOD AVENUE ELMIRA, NY 14905	Х			
Signatures				

Kathleen S. McKillip, Attorney-in-Fact, pursuant to Power of Attorney dated June 2012.					
<u>**</u> Signature of Reporting Person	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) Includes dividends reinvested periodically under the Issuer's Dividend Reinvestment Plan.
- (2) The reporting person disclaims beneficial ownership of these securities, and the report shall not be deemed an admission that the reporting person is beneficial owner of such securities for the purpose of Section 16 or any other purpose.

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.