CHEMUNG FINANCIAL CORP

Form 4

August 18, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

Expires:

January 31, 2005

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if no longer subject to Section 16. Form 4 or

Check this box

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * UPDEGRAFF JAN P			2. Issuer Name and Ticker or Trading Symbol CHEMUNG FINANCIAL CORP [CHMG]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mont				3. Date of Earliest Transaction Month/Day/Year) 08/18/2014					X Director 10% Owner Other (specify below)			
				endment, Date Original nth/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)	Table	I - Non-I) oriv	zativa S	ocuri	tios Ac	quired, Disposed	of or Repeticie	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year) Executi any		3. Transacti Code (Instr. 8)	4. IonAd Di (In	Securit	ies (A) o of (D	r)	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 Stock	08/18/2014			P	32	27	A	\$ 29	2,918	D		
Common Stock									4,038	I	By Spouse	

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

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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	2.	3. Transaction Date		4.	5.	6. Date Exer		7. Title a		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if		onNumber	Expiration D		Amount		Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	_	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	,				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(IIISti
					4, and 5)						
					4, and 3)						
								A	mount		
						D.	E	OI	r		
						Date Exercisable	Expiration Date	Title N	umber		
								01			
				Code V	(A) (D)				hares		

Reporting Owners

Reporting Owner Name / Address	Keiauonsiips					
	Director	10% Owner	Officer	Other		

UPDEGRAFF JAN P 158 COLEMAN AVENUE X ELMIRA, NY 14903

Signatures

Kathleen S. McKillip, Attorney-in-Fact, pursuant to Power of Attorney dated June 20, 2012.

08/18/2014

**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).

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.

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