POTES KELLY Form 4 January 20, 2006

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or January 31, Expires: 2005

Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction 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 * POTES KELLY			2. Issuer Name and Ticker or Trading Symbol CHOICEONE FINANCIAL SERVICES INC [(None)]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)		(Middle) 3. Date o (Month/E 01/18/2			•			Director 10% Owner Start Officer (give title Other (specify below) VP - ChoiceOne Ins. (Subsid.)		
CDADTA N	(Street)			dment, Date h/Day/Year)	e Original		6. Individual or J Applicable Line) _X_ Form filed by Form filed by	•	erson	
SPARTA, N	VII 49343						Person			
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	ecurities Acc	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	3. Transactio Code (Instr. 8)	Disposed (Instr. 3,	(A) or 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 stock							1,150.7734 <u>(1)</u>	D		
Common stock							424.8816 <u>(2)</u>	I	401(k) Plan	

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.

SEC 1474

(9-02)

Edgar Filing: POTES KELLY - Form 4

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

8. P Der Sec (Ins

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)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 18.85	01/18/2006		A	125	01/18/2006	01/17/2016	Common	125	
Stock Option (Right to Buy)	\$ 18.85	01/18/2006		A	125	01/18/2007	01/17/2016	Common	125	
Stock Option (Right to Buy)	\$ 18.85	01/18/2006		A	125	01/18/2008	01/17/2016	Common	125	
Stock Option (Right to Buy)	\$ 18.85	01/18/2006		A	125	01/18/2009	01/17/2016	Common	125	

Reporting Owners

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

POTES KELLY
150 IDA RED
VP - ChoiceOne Ins. (Subsid.)
SPARTA, MI 49345

Signatures

/s/ Kelly J. Potes 01/19/2006

**Signature of Pate Person Date

Reporting Owners 2

Edgar Filing: POTES KELLY - Form 4

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) Column 5 reflects the acquisition of 38.9894 shares due to the declaration of a 5% stock dividend, 379.4642 shares under the ChoiceOne Financial Services, Inc. Employee Stock Purchase Plan, and 30.1497 shares from the reinvestment of cash dividends.
- (2) The number of shares in column 5 is the reporting person's best estimate based on a plan statement dated December 31, 2004.

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.