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CHOICEONE FINANCIAL SERVICES INC

Form 4

January 22, 2007

FORM 4

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

OMB 3235-0287 Number:

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

Form 4 or Form 5 obligations may continue.

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

burden hours per response... 0.5

See Instruction

1(b).

(Print or Type Responses)

1. Name and Ad LAMPEN TH	•	orting Person *	Symbol CHOICI		Ticker or Tradir NANCIAL [(None)]	ng	Issuer	of Reporting Per	`,
(Last)	(First)	(Middle)	3. Date of (Month/D	Earliest Tra ay/Year)	ansaction		Director _X_ Officer (g below)	give title Oth below)	
103 ANDERSON			01/18/20	007			below)	Treasurer	
	(Street)			ndment, Dat th/Day/Year)	Ü		6. Individual of Applicable Line)	r Joint/Group Fili	ng(Check
SPARTA, M	I 49345							by One Reporting Po y More than One Ro	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative Securi	ities Acq	uired, Disposed	l of, or Beneficia	lly Owne
1.Title of	2. Transactio	on Date 2A. Dee		3.	4. Securities		5. Amount of	6. Ownership	7. Natur

()	(=)	(—·r)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.	little of	2. Transaction Date	2A. Deemed	3.	4. Securities	5. Amount of	6. Ownership	/. Nature of
Se	ecurity	(Month/Day/Year)	Execution Date, if	Transactio	onAcquired (A) or	Securities	Form: Direct	Indirect
(I	nstr. 3)		any	Code	Disposed of (D)	Beneficially	(D) or	Beneficial
			(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)	Owned	Indirect (I)	Ownership
						Following	(Instr. 4)	(Instr. 4)
					(4)	Reported		
					(A)	Transaction(s)		
				Code V	or Amount (D) Pr	rice (Instr. 3 and 4)		
\mathcal{C}	ommon			Couc v	Amount (D) 1	TICC		

Common $1,085.1126 \frac{(1)}{}$ D Stock

Common 401(k) $1,390.2078 \stackrel{(2)}{=} I$ Stock Plan

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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)

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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)		6. Date Exerci Expiration Dat (Month/Day/Y	e	7. Title and Lunderlying (Instr. 3 and	Securities
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Option (Right to Buy)	\$ 17.95	01/18/2007		A	250	01/18/2007	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	01/18/2007		A	250	01/18/2008	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	01/18/2007		A	250	01/18/2009	01/17/2017	Common	250
Stock Option (Right to Buy)	\$ 17.95	01/18/2007		A	250	01/18/2010	01/17/2017	Common	250

Reporting Owners

Reporting Owner Name / Address	Relationships					
.t	Director	10% Owner	Officer	Other		
LAMPEN THOMAS L 103 ANDERSON SPARTA, MI 49345			Treasurer			

Signatures

/s/ Thomas L.	
Lampen	01/22/2007
**Signature of Reporting Person	Date

Reporting Owners 2

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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 435.2981 shares under the ChoiceOne Financial Services, Inc. Employee Stock Plan and 30.9587 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, 2005.

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.