

Dalrymple Elizabeth T  
 Form 3/A  
 February 01, 2005

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF 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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Dalrymple Elizabeth T</p> <p>(Last) (First) (Middle)</p> <p>ONE CHEMUNG CANAL              PLAZA,Â P.O. BOX 1522</p> <p>(Street)</p> <p>ELMIRA,Â NYÂ 14902-1522</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>02/01/2005</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>CHEMUNG FINANCIAL CORP [CHMG]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner  <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other                  (give title below) (specify below)                  Senior Vice President</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p> <p>08/03/2004</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person  <input type="checkbox"/> Form filed by More than One Reporting Person</p>
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**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	2,690	D	Â
Common Stock	2,449.123 <sup>(2)</sup>	I	By Qualified Plan
Common Stock	64,690	I	By Spouse
Common Stock	9,450 <sup>(1)</sup>	I	Dalrymple Trust
Common Stock	448,510 <sup>(1)</sup>	I	Dalrymple Family Limited Partnership
Common Stock	59,416 <sup>(1)</sup>	I	Dalrymple Holding Corporation
Common Stock	30,230 <sup>(1)</sup>	I	Susquehanna Supply

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

SEC 1473 (7-02)

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required to respond unless the form displays a currently valid OMB control number.

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date			
		Title	Amount or Number of Shares		

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Dalrymple Elizabeth T ONE CHEMUNG CANAL PLAZA P.O. BOX 1522 ELMIRA, NY 14902-1522	Â	Â	Â Senior Vice President	Â

## Signatures

Jane H. Adamy, Attorney-in-Fact,  
pursuant to Power of Attorney dated 02/01/2005  
August 2, 2004.

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is beneficial owner of such securities for the purpose of Section 16 or for any other purpose.
- (2) Includes shares allocated to the reporting person's account periodically under the terms of the Chemung Canal Trust Company Savings and Investment Plan.

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.