### Edgar Filing: Raup George - Form 4

Raup George Form 4	2											
August 18, 2	010											
<b>FORM</b>	14	остатро	SECUE	TTIE	<b>C A</b>			NCEC	OMMESION		PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
if no long subject to Section 1 Form 4 o Form 5 obligation may cont	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction Section 16. Form 5 Section 16. Form 5 Section 16. Form 5 Section 16. Form 5 Section 16. Section 16. 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						e Act of 1934, 1935 or Sectior	Expires: January 31 2005 Estimated average burden hours per response 0.5 n				
(Print or Type F	Responses)											
1. Name and Address of Reporting Person <u>*</u> Raup George			2. Issuer Name <b>and</b> Ticker or Trading Symbol CITIZENS & NORTHERN CORP [CZNC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) P.O. BOX 4	3. Date of Earliest Transaction (Month/Day/Year) 08/13/2010						Director 10% Owner X Officer (give title Other (specify below) below) EVP & CIO					
(Street) COUDERSPORT, PA 16915			4. If Amendment, Date Original Filed(Month/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)	Tabl	e I - No	on-D	erivative	Securi	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	:) Executio any	med n Date, if Day/Year)	Code (Instr.	8)	4. Securi n(A) or D (Instr. 3,	isposed 4 and (A) or	d 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	08/13/2010			J <u>(1)</u>		16	(D) A	\$ 10.69	1,935	D		
Common Stock									584	Ι	By ESOP	
Common Stock									4,182	Ι	By Trust	

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

### Edgar Filing: Raup George - Form 4

#### number.

#### 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. Transacti (Month/Day	y/Year)	3A. Deemed Execution Date, any (Month/Day/Ye	Code		5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and unt of rlying rities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
Repor	rting O	wners	3		Code	v	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting	Owner Name	/ Address	Director		<b>ionships</b> Officer		Othe	T					

Raup George
P.O. BOX 492
COUDERSPORT, PA 16915

# **Signatures**

Teri L. Mitchell for George Raup under Power of Attorney dated
07/23/09.

\*\*Signature of Reporting Person

# **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) Dividend of 08/13/10 posted to D/R Account

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.

08/18/2010

Date

EVP & CIO