## Edgar Filing: DECAMP R ROBERT - Form 4

ROVAL 3235-0287 anuary 31, 2005 age ber 0.5				
3235-0287 anuary 31, 2005 rage per				
3235-0287 anuary 31, 2005 rage per				
anuary 31, 2005 age oer				
2005 age ber				
age ber				
ber				
0.5				
s) to				
ner pecify				
Jeeny				
6. Individual or Joint/Group Filing(Check Applicable Line)				
ing				
Owned				
Nature of				
Indirect Beneficial Ownership				
	str. 4)			

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

## Edgar Filing: DECAMP R ROBERT - Form 4

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. Transacti Code (Instr. 8)	5. 6. Date Exercisable an orNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsh	nips	
I State and a state	Director	10% Owner	Officer	Other
DECAMP R ROBERT PO BOX 57 WELLSBORO, PA 16901	Х			
Signatures				

Kathleen M. Osgood for R. Robert DeCamp under Power of Attorney dated 9/20/01	01/24/2005
---	------------

\*\*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) 1% Stock Dividend payable 1/20/05

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.

Date