AUTHORIZATION FORM

Dividend Reinvestment and Common Stock Purchase Plan ChoiceOne Financial Services, Inc.

I hereby appoint Continental Stock Transfer & Trust Company ("Continental"), or its successor as appointed by The Company, as my Agent, subject to the terms and conditions of the Dividend Reinvestment and Common Stock Purchase Plan ("Plan") as set

forth in the accompanying Plan Description, receipt of which is hereby acknowledged. I authorize Conti Agent, to apply my dividends and distributions as selected below and such cash deposits as it may receive fr purchase of full and fractional shares of The Company's Common Stock.	
I wish to enroll in the Dividend Reinvestment & Common Stock Purchase Plan as indicated below. I ucash payments may be no less than \$25.00 and no more than \$1,000 per quarter.	understand that my
Dividend Reinvestment I wish to apply dividends on all shares of The Company's Common Stock registered in my name to purchase additional shares.	
Cash Payments Enclosed is a cash payment in the amount of \$(\$25.00 minimum or as much as \$1,000 per quarter)	
I authorize The Company to pay to Continental for my account all cash dividends on the shares indicated her cash payments for the purpose of purchasing additional shares of the Company's common stock for my benef appointment and authorization is given with the understanding that, subject to the procedures established under terminate my participation in the Plan by so notifying Continental in writing.	fit. This
Date:	
Print Name:	
Mailing Address:	
Daytime Phone :	
Signature:	
Account Number:	