Edgar Filing: CHICOS FAS INC - Form 4

CHICOS FA	S INC										
Form 4											
October 03, 2	2006										
FORM	4		~~~~~			~~~ .			OMB AF	PROVAL	
	UNITE) STATES			AND EX(, D.C. 20		NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				IGES IN BENEFICIAL OWNERSHIP OF SECURITIES					burden hou	Estimated average burden hours per	
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed po nue. Section 17	7(a) of the I	Public Ut	tility Hol		npany	y Act of	e Act of 1934, 1935 or Section 0	response	0.5	
(Print or Type R	esponses)										
SHAPIRO BARRY I Symbo			Symbol	suer Name and Ticker or Trading ol COS FAS INC [CHS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			of Earliest Transaction /Day/Year) /2006				Director 10% Owner X Officer (give title Other (specify below) SVP- Operations				
				nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
FT. MYERS	, FL 33966							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-	Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any		Code (Instr. 8)	4. Securi on(A) or Di (Instr. 3,	(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)		
Common Stock	10/02/2006			А	335	А	\$ 15.68	17,454	D		

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)

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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. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
1	Director	10% Owner	Officer	Other				
SHAPIRO BARRY I 11215 METRO PARKWAY FT. MYERS, FL 33966			SVP- Operations					
Signatures								
Michael J. Kincaid, Attorney in Fact		10/03/2000	6					
**Signature of Reporting Person		Date						

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).

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.