| HOLDREN Form 5/A February 21 | | | | | | | | | | |
|---|---|--|--|---|--|---|--|---|-------------|--|
| FORM | _ | | | | | | | OMB A | PPROVAL | |
| | - | STATES SE | CURITIES AN | ND EXC | HAN | GE CON | MMISSION | OMB Number: | 3235-0362 | |
| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction | | | Washington, D.C. 20549 CATEMENT OF CHANGES IN BENEFI OWNERSHIP OF SECURITIES | | | | | Expires: | January 31, | |
| | | | | | | | ICIAL | Estimated a burden hou response | | |
| 1(b). | Filed pur ^{Holdings} Section 17(i | (a) of the Pub | ion 16(a) of the lic Utility Hold the Investment C | ing Comp | any . | Act of 19 | | I | | |
| 1. Name and Address of Reporting Person <u>*</u> HOLDREN LARRY E | | | issuer Name and Ti mbol EOPLES BANC | - | Relationship of Reporting Person(s) to ssuer | | | | | |
| (Last) | (First) (| Middle) 3. S | 3. Statement for Issuer's Fiscal Year Ended | | | | (Check all applicable) | | | |
| | | | (Month/Day/Year) 12/31/2005 | | | | Director 10% Owner X Officer (give title Other (specify | | | |
| 138 PUTNAM STREET, P.O. BOX 738 | | | 12/01/2000 | | | | elow) below) Executive Vice President | | | |
| | (Street) | File | 4. If Amendment, Date Original6. IFiled(Month/Day/Year)02/14/2006 | | | | Individual or Joint/Group Reporting (check applicable line) | | | |
| MARIETT | A, OH 45750 | | | | | | _ Form Filed by O _ Form Filed by M sson | | | |
| (City) | (State) | (Zip) | Table I - Non-De | erivative Se | ecuriti | ies Acquire | ed, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Dat any (Month/Day/Y | Code | (A) or Disposed of (D) (Instr. 3, 4 and 5) Ow of I Fisc | | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) | Ownership Form: | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| Common Stock | 01/01/2005 | Â | J | 42 | А | \$ 27.58 | 6,434 | D | Â | |
| Common Stock | 04/01/2005 | Â | J | 46 | A | \$ 26.46 | 6,480 | D | Â | |
| Common Stock | 07/01/2005 | Â | J | 47 | А | \$ 26.412 | 6,527 | D | Â | |

Common

Stock

Â

J

60

\$0

А

15,554

I

03/31/2005

401(k)

Plan

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| Common Stock | 06/30/2005 | Â | J | 207 | А | \$0 | 15,761 | Ι | 401(k) Plan |
|-----------------|------------|---|---|-----|---|------|--------|---|----------------|
| Common Stock | 09/30/2005 | Â | J | 109 | А | \$ 0 | 15,870 | Ι | 401(k) Plan |
| Common Stock | 12/31/2005 | Â | J | 165 | А | \$0 | 16,035 | Ι | 401(k) Plan |

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

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(9-02)

 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. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | rlying | 8. Price of Derivative Security (Instr. 5) | 9. of D So B O E I S Fi (I |
|---|---|---|---|---|---|---------------------|--------------------|-----------------------|--|---|--|
| | | | | | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|--|---------------|------------|--------------------------------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| HOLDREN LARRY E 138 PUTNAM STREET P.O. BOX 738 MARIETTA, OH 45750 | Â | Â | Executive Vice President | Â | | | | |
| Signatures | | | | | | | | |
| By: Donald J. Landers For: Larry Holdren | E. | 02/20/2006 | | | | | | |
| **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 provided 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.