

CHICOS FAS INC  
Form 3  
December 28, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â JESSUP MANUEL O		(Month/Day/Year)	CHICOS FAS INC [CHS]	
(Last)	(First)	(Middle)	12/18/2007	
11215 METRO PARKWAY		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)		(Check all applicable)		6. Individual or Joint/Group Filing(Check Applicable Line)
FORT MYERS,Â FLÂ 33966		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner		<input checked="" type="checkbox"/> Form filed by One Reporting Person
(City)	(State)	(Zip)	<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	
		(give title below) (specify below)		<input type="checkbox"/> Form filed by More than One Reporting Person
		EVP - Human Resources		

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	12,534 <sup>(1)</sup>	D	Â

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Employee Stock Option (Right to buy)	Â (3)	09/11/2016	Common Stock	30,000 (3)	\$ 19	D	Â
Employee Stock Option (Right to buy)	Â (2)	03/09/2017	Common Stock	12,500 (2)	\$ 22.47	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
JESSUP MANUEL O 11215 METRO PARKWAY FORT MYERS, FL 33966	Â	Â	Â EVP - Human Resources	Â

## Signatures

Michael J. Kincaid, Attorney  
in Fact 12/28/2007

\_\_Signature of Reporting Person Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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) Includes 9,167 shares of restricted stock, of which 5,000 of the restricted shares vest on September 11, 2008 and the remaining 4,167 of the restricted shares vest 1/3 annually on March 9, 2008, 2009 and 2010.
- (2) This option was granted on March 9, 2007 under the company's 2002 Omnibus Stock and Incentive Plan and vests 1/3 annually on March 9, 2008, 2009 and 2010.
- (3) This option was granted on September 11, 2006 under the company's 2002 Omnibus Stock and Incentive Plan and vests 1/3 annually. 10,000 shares vested on September 11, 2007, 10,000 will vest on September 11, 2008 and 10,000 will vest on September 11, 2009.

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.