## Edgar Filing: GREATER BAY BANCORP - Form 4

GREATER F Form 4 February 09,	3AY BANCO 2007	RP									
FORM	ΙΔ								OMB AF	PPROVAL	
	UNITE	D STATES		ITIES A hington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31 2009 Estimated average burden hours per			
Form 5 obligation may conti See Instru 1(b).	Filed p <sup>1s</sup> Section 1	7(a) of the 1	Public Ut		ling Con	npany	y Act of	e Act of 1934, E 1935 or Section 40	response	0.5	
(Print or Type R	Responses)										
Anderson Colleen M Syn GR			Symbol	Name and ER BAY			ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 1900 UNIVI FLOOR	(First) ERSITY AVE	(Middle) NUE, 6TH	(Month/D	-	ansaction			Director X_Officer (give below) Executiv		Owner er (specify ent	
	(Street)	(Street) 4. If Amend Filed(Month			-	l		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
EAST PALO	O ALTO, CA 9	94303						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	ar) Execution any		3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	d of (D) 5) Price	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	01/23/2007			F	428	D	\$ 26.38	9,572	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Tran (Inst
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
Anderson Colleen M 1900 UNIVERSITY AVENUE, 6TH FLOOR EAST PALO ALTO, CA 94303 <b>Signatures</b>				Executive Vice President				
/s/ Colleen M.								
Anderson	02/09/2007							
<u>**</u> 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.