Edgar Filing: PLUMAS BANCORP - Form 4

| Form 4 | ANCORP | | | | | | | | | | |
|---|--|---|---|--|---|-----------------------------|-------------|--|---|-----------|--|
| March 08, 20 | | | | | | | | | OMB AF | PROVAL | |
| | ORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | COMMISSION | OMB Number: | 3235-0287 | |
| Check thi if no long subject to Section 14 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b). | 6. Filed pur Section 17(5 | STATEMENT OF CHANGES IN 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 | | | | | | | Expires: January 31 Expires: 2005 Estimated average burden hours per response 0.5 | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> HERR ROBERT T | | | 2. Issuer Name and Ticker or Trading Symbol PLUMAS BANCORP [PLBC] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) PLUMAS BANK, 35 S LINDAN AVE | | | 3. Date of Earliest Transaction(Month/Day/Year)03/08/2005 | | | | | (Check all applicable) <u>X</u> Officer (give title 10% Owner (Check all applicable) 10% Owner Other (specify below) EVP & Loan Administrator | | | |
| (Street) | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| QUINCY, C | CA 95971 | | | | | | | Person | lore than One Re | porung | |
| (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 Date (Month/Day/Year) | 2A. Deeme Execution I any (Month/Day | Date, if | 3. Transactio Code (Instr. 8) Code V | 4. Securit on(A) or Di (Instr. 3, Amount | spose 4 and (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 | 03/08/2005 | 03/08/200 | 05 | S | 3,000 | D | \$ 23.02 | 0 | 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. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Unde Secur | ınt 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 / Addre | ess | Relationships | | | | | | |
|---|------------|---------------|--------------------------|-------|--|--|--|--|
| 1 0 | Director | 10% Owner | Officer | Other | | | | |
| HERR ROBERT T PLUMAS BANK 35 S LINDAN AVE QUINCY, CA 95971 | | | EVP & Loan Administrator | | | | | |
| Signatures | | | | | | | | |
| Robert T. Herr | 03/08/2005 | | | | | | | |
| <u>**Signature of</u> 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.