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Community B	ancorp										
Form 4											
August 27, 20	07										
FORM	1									OMB AF	PPROVAL
					TIES AND EXCHANGE COMMISSION nington, D.C. 20549						3235-0287
Check this				8 /						Expires:	January 31,
if no longe	r STAT	EMENT (OF CHANG	GES IN	BI	ENEFI	CIAI	OWN	ERSHIP OF		2005
subject to Section 16		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.5		
Form 4 or	•										
Form 5	Filed	pursuant to	Section 16	(a) of th	e S	Securitie	es Ex	change	Act of 1934,		0.0
obligations	Section								1935 or Section	l	
may contin See Instruc	lue.) of the Inv								
1(b).	1011	,				1 2					
(Print or Type Re	esponses)										
1. Name and Ad	2. Issuer M	Traine una Trener of Trading					5. Relationship of Reporting Person(s) to				
SMITH JOYCE Syr]	Issuer		
			Commun	ity Band	201	rp [CBC	DN]		(Check	all applicable	.)
(Last)	(First)	(Middle)	3. Date of I	Earliest Ti	an	saction			(Cheek	an application	·)
			(Month/Da	y/Year)				-	Director	10%	Owner
400 S. 4TH S	TREET, SU	ITE 215	08/23/20	07					$X_ Officer (give)$		er (specify
								t	elow) EVP/Chief	below) Retail Officer	CBN
	(Chur at)		4 10 4	1 (D		0					
	(Street)		4. If Ameno			Original			6. Individual or Joi	nt/Group Filin	ig(Check
			Filed(Month	1/Day/rear	.)				Applicable Line) _X_ Form filed by O	ne Reporting Pe	rson
LAS VEGAS	NV 89101							-	Form filed by M		
LIID VLOIID	,, 100 00101							1	Person		
(City)	(State)	(Zip)	Table	I - Non-E)er	ivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficial	ly Owned
1.Title of	2. Transaction	n Date 2A. D	Deemed	3.		4. Securi	ties A	cquired	5. Amount of	6.	7. Nature of
Security	(Month/Day/		ution Date, if		tio	n(A) or D	•		Securities	Ownership	Indirect
(Instr. 3)		any (Man	th/Dov/Woor)	Code	`	(Instr. 3,	4 and	5)	Beneficially Owned	Form:	Beneficial
		(IVIOII	th/Day/Year)	(Instr. 8)				Following	Direct (D) or Indirect	Ownership (Instr. 4)
							<i>(</i>))		Reported	(I)	(1115411-1)
							(A) or		Transaction(s)	(Instr. 4)	
				Code	v	Amount	(D)	Price	(Instr. 3 and 4)		
COMMON	00/00/0000-					4,025	. ,	\$	4.050	D	
STOCK	08/23/2007			А		(1)	А	25.35	4,370	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. 5. TransactionNumber Code of (Instr. 8) Derivativ Securitie Acquired (A) or Disposed of (D)		Imber Expiration Date (Month/Day/Year) erivative curities equired) or sposed		Amou Unde Secur	le and unt of rlying tities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code 7	(Instr. 3, 4, and 5)	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				
SMITH JOYCE 400 S. 4TH STREET, SUITE 215 LAS VEGAS,, NV 89101			EVP/Chief Retail Officer CBN					
Signatures								

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/s/ Joyce Smith	08/27/2007

<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).
- (1) Reflects restricted stock grant from company's 2005 equity based compensation plan, which becomes 100% vested after 3 years from grant date.

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.