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Rose Crystal Form 4 March 03, 2008 FORM 4 Morch 03, 2008 FORM 4 Check this box if no longer subject to Section 16. Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer subject to Section 16. Form 5 obligations may continue. See Instruction 1(b). Check this box if no longer Section 16. Form 5 obligations may continue. Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 1(b). Check this box if no longer Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Section 17(a) of the Investment Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Investment Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) of the Public Utility Holding Company Act of 1940 Section 17(a) Section 16(a) Section 16(b) Sect										
(Print or Type Responses)										
1. Name and Address of Rep Rose Crystal	Symbol	NTRAL PACIFIC FINANCIAL				5. Relationship of Reporting Person(s) to Issuer(Check all applicable)				
(Last) (First) 47-460 WAIHEE PLAC	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/03/2008			X_ Director 10% Owner Officer (give title Other (specify below) below)					
(Street) KANEOHE, HI 96744		4. If Amendment, l Filed(Month/Day/Ye	-	nal		6. Individual o Applicable Line _X_ Form filed Form filed b Person) by One Repor	ting Person	I	
(City) (State)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
Security (Month/Day/Y (Instr. 3)	any	Date, if Transactio Code y/Year) (Instr. 8)	4. Securit on(A) or Di (Instr. 3, 4) Amount	sposed	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)	7. Natu: Indirect Owners (Instr. 4	Beneficial hip	
Common Stock						1,763	D			
Common 03/03/2008 Stock		Р	150	A	\$ 18.51	2,327	I	Defen	Directors red ensation	
Common Stock						2,000	I	Crysta Rose, Crysta AAL MPPP	Ttee Il K Rose ALC	

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

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

1. Title o Derivativ Security (Instr. 3)	ve Conversion or Exercise	3. Transaction Date (Month/Day/Year)	4. Transac Code (Instr. 8	5. tionNumber of) Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	(Month/Day. ive es d d	Date	Secur	int 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 / Address	Relationships						
	Director	10% Owner	Officer	Other			
Rose Crystal 47-460 WAIHEE PLACE KANEOHE, HI 96744	Х						
Signatures							
Dean K. Hirata, Atty-in-fact	03/03/2	2008					
**Signature of Reporting	Date						

Person

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.