Edgar Filing: HAMMITT HEATHER M - Form 4

HAMMITT HEATHER M

Form 4

February 02, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

response...

burden hours per

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue.

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

1(b).

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person * HAMMITT HEATHER M		Syı CI	2. Issuer Name and Ticker or Trading Symbol CENTRUE FINANCIAL CORP [TRUE]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) 122 W MADI	(First) (Middle) 3. Date of Ea (Month/Day/ ADISON STREET 01/31/200'			Year)	saction		Director 10% Owner _X Officer (give title Other (specify below) EXECUTIVE VICE PRESIDENT		
OTTAWA, IL	(Street)		If Amendn ed(Month/D	nent, Date Day/Year)	Original		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State) (Z	Cip)	Table I -	- Non-Der	ivative Se	curities Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)		Date, if ay/Year)	3. Transactic Code (Instr. 8)	4. Security onAcquired Disposed (Instr. 3,	(A) or 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							388.45 (1)	I	401(K) PLAN
COMMON STOCK							852.6615 (2)	I	ESOP

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nur of Sha
EMPLOYEE STOCK OPTION (RIGHT TO BUY)	\$ 16.0625					11/18/2002	11/18/2009	COMMON STOCK	10
EMPLOYEE STOCK OPTION (RIGHT TO BUY)	\$ 19.03	01/31/2007		A	1,000	01/31/2008	01/31/2014	COMMON STOCK	1,

Reporting Owners

Reporting Owner Name / Address	Relationships
Tre porting o wher realist range of	

Director 10% Owner Officer Other

HAMMITT HEATHER M 122 W MADISON STREET OTTAWA, IL 61350

EXECUTIVE VICE PRESIDENT

Signatures

HEATHER M. 02/02/2007 HAMMITT

**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).
- (1) ALL SHARES WERE ACCUMULATED THROUGH AUTOMATIC PAYCHECK DEDUCTIONS TO 401(K) PLAN.
- (2) ALL SHARES ACCUMULATED THROUGH THE EMPLOYEE STOCK OWNERSHIP PLAN.
- (3) THIS OPTION WILL VEST IN EQUAL INSTALLMENTS OF 200 SHARES PER YEAR OVER 5 YEARS BEGINNING 01/31/08.

(4) THIS OPTION IS FULLY VESTED.

Reporting Owners 2

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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.