

UNITED SECURITY BANCSHARES
 Form 4
 April 09, 2003

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

FORM 4

OMB APPROVAL

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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(f) of the Investment Company Act of 1940

(Print or Type Responses)

| | | | | | | |
|--|---------------|----------|---|--|---|--|
| 1. Name and Address of Reporting Person* | | | 2. Issuer Name and Ticker or Trading Symbol | | 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) | |
| Miller | Ronnie | | United Security Bancshares UBFO | | <input checked="" type="checkbox"/> Director | <input type="checkbox"/> 10% Owner |
| (Last) | (First) | (Middle) | 3. I.R.S. Identification Number of Reporting Person (voluntary) | | <input type="checkbox"/> Officer (give title below) | <input type="checkbox"/> Other (specify below) |
| | | | 04/2003 | | | |
| (Street) | | | 5. If Amendment, Date of Original (Month/Year) | | 7. Individual or Joint/Group Filing (Check Applicable Line) | |
| | | | | | <input type="checkbox"/> Form filed by One Reporting Person | |
| | | | | | <input type="checkbox"/> Form filed by More than One Reporting Person | |
| (City) | (State) | (Zip) | | | | |

Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2a. Deemed Execution Date, if any | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned at End of Month (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|-----------------------------------|--------------------------------|---|---|--|---|
| | | | Code V | Amount (A) or Price (D) | | | |
| Common Stock | 03/26/2003 | 03/26/2003 | G | 840 | D \$17.90 | 84,001 | D |
| | | | | | | | |
| | | | | | | | |
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Over)
SEC 1474 (7-97)

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

FORM 4 (Continued)

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 (Month/Day/Year) | 4. Transaction 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) | |
|---|--|---|---|-----------------------------------|---|-----|--|------------------|---|--|
| | | | | Code | V | (A) | (D) | Date Exercisable | Expiration Date | |

| 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4) | 10. Ownership Form of Derivative Securities Beneficially Owned at End of Month (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|---|--|---|
|--|---|---|--|---|

| Title | Amount or Number of Shares |
|-------|----------------------------|
|-------|----------------------------|

Explanation of Responses: Transactions between filing of this report and previous report (07/2002) include quarterly dividend reinvestment for the purchase of 128 shares pursuant to plan exempt under Rule 16a-11.

**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

/s/ Ronnie Miller

04/09/2003

**Signature of Reporting Person

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 control number

