Edgar Filing: OHIO VALLEY BANC CORP - Form 4

OHIO VALL Form 4 June 11, 2007	LEY BANC COR 7	Р										
FORM	1										PPROVAL	
Washington, D.C. 20549							OMB Number:	3235-0287				
Check this box if no longer subject to Section 16. Section 16.						BENEFI TIES	CIA	LOW	NERSHIP OF	Expires: January 3 200 Estimated average burden hours per		
Form 4 or Form 5 obligatior may conti <i>See</i> Instru 1(b).	Filed purs ns Section 17(a	a) of the I		ility H	oldi	ing Com	pany	Act o	ge Act of 1934, f 1935 or Section 40	response	0.5	
(Print or Type R	Responses)											
EASTMAN ROBERT H Syn OH				2. Issuer Name and Ticker or Trading Symbol OHIO VALLEY BANC CORP [OVBC]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Mor			(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 06/11/2007					_X_ Director 10% Owner Officer (give title Other (specify below) below)			
				If Amendment, Date Original led(Month/Day/Year)					 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
GALLIPOL	IS, OH 45631-02	40							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Noi	n-De	erivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ned	3. Transa Code (Instr.	action 8)	4. Securi nAcquired Disposed	ties l (A) of l of (D 4 and (A) or	or))	5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial	
Common Shares	06/11/2007			G	V	8,344	D	\$0	62,212.3214	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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	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		
EASTMAN ROBERT H 420 3RD AVE. P.O. BOX 240 GALLIPOLIS, OH 45631-0240	Х					
Signatures						
Deborah A. Carhart - Power of Attorney	06/11/2007					
**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).

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.