

WESTAMERICA BANCORPORATION  
 Form 3  
 November 14, 2007

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Robinson David L		(Month/Day/Year)	WESTAMERICA BANCORPORATION [WABC]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
4550 MANGELS BLVD			(Check all applicable)	
(Street)			<input type="checkbox"/> Director	<input type="checkbox"/> 10% Owner
FAIRFIELD,Â CAÂ 94534			<input checked="" type="checkbox"/> Officer	<input type="checkbox"/> Other
(City)	(State)	(Zip)	(give title below)	(specify below)
			SVP/Banking Division Manager	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input checked="" type="checkbox"/> Form filed by One Reporting Person
				<input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	98.1271	D	Â
Common Stock	13,430	I	Deferred
Common Stock	56.45	I	ESOP
Common Stock	0.8419	I	by Daughter

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date	3. Title and Amount of Securities Underlying	4. Conversion	5. Ownership	6. Nature of Indirect Beneficial
--	---	--	---------------	--------------	----------------------------------

Edgar Filing: WESTAMERICA BANCORPORATION - Form 3

(Month/Day/Year)	Derivative Security (Instr. 4)	or Exercise Price of Derivative Security	Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)		
Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
01/25/2001 <sup>(1)</sup>	01/25/2010	Common Stock	18,300	\$ 24	D	Â
01/28/2000 <sup>(1)</sup>	01/28/2009	Common Stock	2,700	\$ 34.5625	D	Â
01/23/2003 <sup>(1)</sup>	01/23/2012	Common Stock	11,090	\$ 38.74	D	Â
01/25/2002 <sup>(1)</sup>	01/25/2011	Common Stock	11,510	\$ 39.4062	D	Â
01/23/2004 <sup>(1)</sup>	01/23/2013	Common Stock	10,820	\$ 40.75	D	Â
01/25/2008 <sup>(1)</sup>	01/25/2017	Common Stock	11,175	\$ 48.39	D	Â
01/22/2005 <sup>(1)</sup>	01/22/2014	Common Stock	8,790	\$ 49.61	D	Â
01/26/2006 <sup>(1)</sup>	01/26/2015	Common Stock	9,000	\$ 52.539	D	Â
01/26/2007 <sup>(1)</sup>	01/26/2016	Common Stock	11,449	\$ 52.56	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Robinson David L 4550 MANGELS BLVD FAIRFIELD, CA 94534	Â	Â	Â SVP/Banking Division Manager	Â

## Signatures

by: Shirley Kolin, Attorney in Fact, for: David L. Robinson 11/14/2007

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Options vest ratably over three years beginning one year from date of grant.

Â

### Remarks:

Exhibit List

Exhibit 24 Power of Attorney

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.