General Finance CORP Form 4 May 23, 2008

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or

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

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Stock

Form 5

obligations

(Print or Type Responses)

1. Name and Address of Reporting Person * SILVER JACK		Person * 2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol			5. Relationship of Reporting Person(s) to Issuer		
		General	Finance (_	FN]	(Cho	eck all applicable	e)
(Last)	(First) (M	fiddle) 3. Date of	Earliest Tr	ansaction				
		(Month/D	ay/Year)			Director	_X_ 109	
C/O SIAR C	60 05/20/2	05/20/2008			Officer (giv		er (specify	
MADISON .	AVENUE					below)	below)	
	4. If Ame	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
		Filed(Month/Day/Year)			Applicable Line)			
		T Hed(Mor	itii/Day/Tear,	<i>(</i>		_X_ Form filed by	One Reporting Po	erson
NEW YORK	X NY 10021					Form filed by	More than One R	
NEW TORK	X, 1V1 10021					Person		
(City)	(State)	(Zip) Tabl	e I - Non-D	erivative S	Securities Ac	quired, Disposed	of, or Beneficia	lly Owned
1.Title of	2. Transaction Date	e 2A. Deemed	3.	4. Securi	ties	5. Amount of	6. Ownership	7. Nature of
Security	ecurity (Month/Day/Year) Execution		on Date, if TransactionAcquired (A) or			Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	Disposed		Beneficially	(D) or	Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and 5)	Owned	Indirect (I)	Ownership
						Following	(Instr. 4)	(Instr. 4)
					(A)	Reported		
					or	Transaction(s)		
			Code V	Amount	(D) Price	(Instr. 3 and 4)		
Common Stock						16,500	I	By Trust

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.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(2)

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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. Transaction Code (Instr. 8)	5. Number of or 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 of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Warrant	\$ 6	05/20/2008		P	23,300	<u>(1)</u>	04/05/2010	Common Stock	23,300
Warrant	\$ 6	05/21/2008		P	33,100	<u>(1)</u>	04/05/2010	Common Stock	33,100
Warrant	\$ 6					<u>(1)</u>	04/05/2010	Common Stock	345,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
SILVER JACK						
C/O SIAR CAPITAL LLC		X				
660 MADISON AVENUE		Λ				
NEW YORK, NY 10021						

Signatures

/s/ Jack Silver 05/22/2008

**Signature of Date
Reporting 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) Immediately.
- (2) Held by Sherleigh Associates Inc. Profit Sharing Plan, a trust of which Mr. Silver is the trustee.
- (3) Held by Sherleigh Associates Inc. Defined Benefit Pension Plan, a trust of which Mr. Silver is the trustee.

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.

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