### Edgar Filing: MFS CALIFORNIA INSURED MUNICIPAL FUND - Form 3

#### MFS CALIFORNIA INSURED MUNICIPAL FUND

Form 3 July 02, 2007

## FORM 3

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

OMB APPROVAL

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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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement MFS CALIFORNIA INSURED MUNICIPAL FUND À STEWART DONALD A (Month/Day/Year) [CCA] 06/29/2007 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) SUN LIFE CENTRE, Â 150 (Check all applicable) KING STREET WEST 6TH **FLOOR** Director 10% Owner Officer \_X\_\_ Other (Street) 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) Advisor Officer \_X\_ Form filed by One Reporting Person TORONTO., A6Â M5H 1J9 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities 3. (Instr. 4) Beneficially Owned Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) 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

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

currently valid OMB control number.

1. Title of Derivative Security 3. Title and Amount of 6. Nature of Indirect 2. Date Exercisable and 5. Securities Underlying Beneficial Ownership (Instr. 4) **Expiration Date** Conversion Ownership (Month/Day/Year) **Derivative Security** or Exercise Form of (Instr. 5) (Instr. 4) Price of Derivative Derivative Security: Title Direct (D) Security

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Date Expiration Amount or or Indirect
Exercisable Date Number of (I)
Shares (Instr. 5)

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

STEWART DONALD A SUN LIFE CENTRE 150 KING STREET WEST 6TH FLOOR TORONTO,, A6Â M5H 1J9

 $\hat{A}$   $\hat{A}$   $\hat{A}$  Advisor Officer

# **Signatures**

Susan S. Newton, By Power of Attorney

07/02/2007

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* 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).

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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