FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name ar | SP/ | 2. Issuer Name and Ticker or Trading Symbol SPAR GROUP INC [SGRP] | | | | | | | | | | | p of Reportir blicable) tor | ng Pe | rson(s) to | | | | | | |
|---|--|---|--|----------|------------|---|---|---------|---|--|----------|--|---|-------|--|--|---|---|-------------|--|--|
| (Last) C/O SPA | R GRO | (Firs | , | /liddle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/28/2007 | | | | | | | | | | Officer (give title below) Chief Execution | | utive | Other (specify below) tive Officer | |
| 555 WHI | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | Individual or Joint/Group Filing (Check Applica Line) | | | | | | | | | |
| (Street) TARRYTOWN NY 10591 | | | | | | | | | | | | | | | | | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | | (Sta | te) (2 | Zip) | | | | | | | | | | | | | | | | | |
| | | | Tabl | e I - N | lon-Deriv | ative \$ | Secu | ırities | s Acq | uired, l | Disp | osed o | f, or | Bene | ficia | ally (| Owne | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | | Execution I | | | Transaction Dispose Code (Instr. and 5) | | Dispose | rities Acquired (ed Of (D) (Instr. : | | | | 5. Amount of Securities Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A (E | () or () | Price | | Reported Transaction(s) (Instr. 3 and 4) | | (1134: 4) | | (111541. 4) | | |
| Common Stock, \$.01 par value 11/28/2 | | | | | | | 007 | | | P | | 400 | | A | \$ <mark>0</mark> . | 67 | 400 | | | D | |
| Common Stock, \$.01 par value 11/28/2 | | | | | | | | | | P | | 9,600 | | A | \$0.7 | | 10,000 | | | D | |
| | 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. Convers or Exerc Price of Derivati Security | ve | 3. Transaction Date (Month/Day/Year) | if any | tion Date, | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | str. | 8. Pr of Deriv Secu (Instr | ivative urity tr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | , D | 0. ovmership form: Direct (D) or Indirect) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisat | | | | nber | | | | | | | | |

Explanation of Responses:

/s/ Gary S. Raymond <u>11/29/2007</u>

** Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $^{^{\}star}$ 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).