#### CHIZEN BRUCE R Form 3 July 25, 2008 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

### 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 <u>*</u> CHIZEN BRUCE R	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol ORACLE CORP [ORCL]					
(Last) (First) (Middle)	07/24/2008	4. Relationship of Reporting Person(s) to Issuer					
C/O DELPHI ASSET MGMT CORPORATION, 6005 PLUMAS STREET, SUITE 100 (Street)		(Check all applicable) X_Director10% Own OfficerOther (give title below) (specify below)		Owner r 6. Individual or Joint/Group			
RENO, NV 89519				Form filed by More than One Reporting Person			
(City) (State) (Zip)	Table I - N	Non-Derivativ	ve Securiti	ies Beneficially Owned			
1.Title of Security (Instr. 4)	2. Amount of Beneficially (Instr. 4)	Owned ()	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	800		Ι	by Trust			
Reminder: Report on a separate line for ea owned directly or indirectly.	ch class of securities benefici	ially SE	С 1473 (7-02	2)			
Persons who resp information conta required to respo	oond to the collection of ined in this form are not nd unless the form displ //B control number.	:					

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

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

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
Acporting O whet Annue / Martess	Director	10% Owner	Officer	Other	
CHIZEN BRUCE R C/O DELPHI ASSET MGMT CORPORATION 6005 PLUMAS STREET, SUITE 100 RENO, NV 89519	ÂX	Â	Â	Â	
Signatures					
By: Barbara R. Wallace, Attorney in Fact For: Bruce R Chizen, POA filed 7/25/08					07/25/2008
<u>**</u> Signature of Reporting Perso	n				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).

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.