FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPRO	DVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or S	Secti	on 30(h)	of the I	nvestmer	nt Con	npany Act o	of 19	40						
1. Name and Address of Reporting Person* MCGRATH ROBERT P					2. Issuer Name and Ticker or Trading Symbol MCGRATH RENTCORP [MGRC]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 5700 LA	(Fi S POSITAS	,	Middle)					. Date of Earliest Transaction (Month/Day/Year) 1/08/2006								Officer (give title below)		Other (below)	(specify
(Street) LIVERM			94551 Zip)		4. If Amendment, Date of C				e of Original Filed (Month/Day/Year)						.ine) F _X F	fual or Joint/Group Fil Form filed by One Re Form filed by More th Person		eporting Pers	son
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	osed o	f, o	r Bene	efici	ally Ow	ned			
Date			2. Transa Date (Month/D	Day/Year) Exe		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			nd Sed Bei Ow	5. Amount of Securities Beneficially Owned Following Reported		Ownership orm: Direct O) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount (A) or (D)		Pric	Tra	Transaction(s) (Instr. 3 and 4)			(111511.4)		
Common	Stock			11/08	3/2006						280,000 D		\$	30	1,739,983		D ⁽¹⁾		
		Та	able II - I								sed of, o					ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.		n of E		6. Date Exercis Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)		str. 3	8. Price Derivative Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisal		Expiration Date	Title	Amo or Num of Sha	nber					
	d Address of	Reporting Person*																	
(Last) 5700 LA	S POSITAS	(First)	(Mido	lle)															
(Stroot)						-													

LIVERMORE CA 94551 (City) (State) (Zip) 1. Name and Address of Reporting Person* **MCGRATH JOAN M** (Middle) (Last) (First) 5700 LAS POSITAS ROAD (Street) LIVERMORE CA 94551 (City) (State) (Zip)

Explanation of Responses:

1. Held in Trust by Robert and Joan McGrath

/s/ Randle F. Rose for Robert and Joan McGrath

11/09/2006

** Signature of Reporting Person

Date

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

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

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.	