

First Business Financial Services, Inc.
 Form 3
 June 29, 2005

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 Person * Â CHAMBAS COREY A (Last) (First) (Middle) FIRST BUSINESS FINANCIAL SERVICES, INC., Â 401 CHARMANY DRIVE (Street) MADISON, Â WI Â 53719 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 06/27/2005	3. Issuer Name and Ticker or Trading Symbol First Business Financial Services, Inc. [FBIZ]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) President and COO	5. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
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Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	22,997	D	Â
Common Stock	2,308	I	By IRA

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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	Date Exercisable	Expiration Date	(Instr. 4) Title	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option (Right to Buy)	Â (1)	10/24/2005	Common Stock	11,552	\$ 8.66	D	Â
Employee Stock Option (Right to Buy)	Â (2)	10/15/2011	Common Stock	7,432	\$ 19	D	Â
Employee Stock Option (Right to Buy)	Â (3)	01/27/2013	Common Stock	10,000	\$ 22	D	Â
Employee Stock Option (Right to Buy)	Â (4)	10/18/2014	Common Stock	10,000	\$ 24	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
CHAMBAS COREY A FIRST BUSINESS FINANCIAL SERVICES, INC. 401 CHARMANY DRIVE MADISON, WI 53719	Â X	Â	Â President and COO	Â

Signatures

By: Mark T. Plichta, Attorney-in-Fact
Date: 06/29/2005

__Signature of Reporting Person 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).
- (1) The option vested and became exercisable as follows: 50% on October 24, 1998, 60% on October 24, 1999, 70% on October 24, 2000, 80% on October 24, 2001, 90% on October 24, 2002 and 100% on October 24, 2003.
- (2) The option vests and becomes exercisable in four equal annual installments on October 15, 2002, 2003, 2004 and 2005.
- (3) The option vests and becomes exercisable in four equal annual installments on January 27, 2004, 2005, 2006 and 2007.
- (4) The option vests and becomes exercisable in four equal annual installments on October 18, 2005, 2006, 2007 and 2008.

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.