

ORIGIN FINANCIAL INC
Form 3
May 12, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB
Number: 3235-0104
Expires: January 31,
2005
Estimated average
burden hours per
response... 0.5

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 GTH LLC

(Last) (First) (Middle)

1100 LANDMARK
TOWERS,Â 345 SAINT PETER
STREET

(Street)

SAINT PAUL,Â MNÂ 55102

(City) (State) (Zip)

2. Date of Event Requiring
Statement

(Month/Day/Year)

04/30/2008

3. Issuer Name **and** Ticker or Trading Symbol
ORIGIN FINANCIAL INC [ORGN]

4. Relationship of Reporting
Person(s) to Issuer

5. If Amendment, Date Original
Filed(Month/Day/Year)

(Check all applicable)

___ Director ___X___ 10% Owner

___ Officer ___X___ Other

(give title below) (specify below)

Please see Exhibit 99.1

6. Individual or Joint/Group

Filing(Check Applicable Line)

___ Form filed by One Reporting
Person

___X___ Form filed by More than One
Reporting Person

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)

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

SEC 1473 (7-02)

**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 control number.**

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
(Instr. 4)

4. Conversion
or Exercise
Price of
Derivative
Security

5. Ownership
Form of
Derivative
Security:
Direct (D)

6. Nature of Indirect
Beneficial Ownership
(Instr. 5)

Date Expiration Title Amount or
Exercisable Date Date Number of

Shares or Indirect
(I)
(Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|--|---------------|-----------|---------|-------------------------|
| | Director | 10% Owner | Officer | Other |
| GTH LLC 1100 LANDMARK TOWERS 345 SAINT PETER STREET SAINT PAUL, MN 55102 | Â | Â X | Â | Please see Exhibit 99.1 |
| CENTERBRIDGE CAPITAL PARTNERS L P 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| CENTERBRIDGE CAPITAL PARTNERS STRATEGIC L P 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| Centerbridge Capital Partners SBS, L.P. 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| Centerbridge Capital Partners AIV II, L.P. 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| Centerbridge Capital Partners Strategic AIV II, L.P. 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| Centerbridge Capital Partners AIV III, L.P. 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |
| Centerbridge Capital Partners Strategic AIV III, L.P. 375 PARK AVENUE, 12TH FLOOR NEW YORK, NY 10152 | Â | Â X | Â | Please see Exhibit 99.1 |

Signatures

GTH LLC, By: /s/ Brian F. Corey, Senior Vice President, General Counsel and Secretary

05/12/2008

__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).

Â

Remarks:

No securities are beneficially owned.

Please see Exhibit 99.1

Exhibit List

Exhibit 99.1 - Explanation of Responses

Exhibit 99.2 - Joint Filer Information

Exhibit 99.3 - Joint Filer's Signatures

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.