FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APP	ROVAL						
OMB Number: 3235-010							
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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 and Address of Reporting Person*  Knight Sheri A  2. Date of Event Requiring Statement (Month/Day/Year) 05/01/2007			nent	3. Issuer Name and Ticker or Trading Symbol  CASUAL MALE RETAIL GROUP INC [ CMRG ]							
(Last) C/O CASUAL INC.	(First)  MALE RETA	(Middle) RETAIL GROUP,			Relationship of Reporting Person(s) t (Check all applicable)     Director 109			er (N	5. If Amendment, Date of Original Filed (Month/Day/Year)		
555 TURNPIKE STREET					X	Officer (give title below) Sr.VP Finance, Corp.	Other (specify below)  p.Controller		Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person		
(Street) CANTON	MA	02021							Form filed b Reporting P	y More than One erson	
(City)	(State)	(Zip)									
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)		ct (D)   (In:	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						1,000	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable at Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Conve		4. Conversion or Exercise Price of	rcise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	on Titl	• • • • • • • • • • • • • • • • • • •	Amount or Number of Shares	Derivative Security			

Explanation of Responses:

Sheri A. Knight

05/10/2007

\*\* 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 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.

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.