## Edgar Filing: SELECTIVE INSURANCE GROUP INC - Form 4

SELECTIVE Form 4 July 06, 2005	E INSURANC	E GROUP I	NC									
FORM										PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box								Expires:	January 31, 2005			
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								NERSHIP OF	Estimated average			
Section 1 Form 4 or	Section 16. SECURITIES								burden hou	burden hours per		
Form 5		pursuant to S	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,	response	0.5		
obligation	<sup>18</sup> Section	-					-		n			
See Instruction 16. See Instruction 16. See Instruction 16. See Instruction 17(a) of the Public Utility Holding Company Act of 1935 or Section 17(a) of the Investment Company Act of 1940												
(Print or Type F	Responses)											
O KELLEY RONALD L Sy				Name and				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	INC [SIGI]					(check an appreador)						
				f Earliest Tra Day/Year) 005	ansaction			X_ Director 10% Owner Officer (give title Other (specify below) below)				
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				nth/Day/Year)	-			Applicable Line)				
BRANCHV	ILLE, NJ 078	90						_X_ Form filed by C Form filed by M Person	One Reporting Pe fore than One Re			
(City)	(State)	(Zip)	Tabl	o I Non D	onivotivo	Soone	itios A og	uired, Disposed of	on Ponoficial	ly Owned		
1 77 4 6	от с т						-	· · -		•		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	n Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
Common Stock	07/01/2005			A	216	A	\$ 49.78	1,051	D			

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

<b>Reporting Owner Name / A</b>	ddress	Relationships							
		Director	10% Owner	Officer	Other				
O KELLEY RONALD I 40 WANTAGE AVENU BRANCHVILLE, NJ 07	Έ	Х							
Signatures									
Ronald L O'Kelley	07	//06/2005							
<u>**</u> Signature of Reporting Person		Date							

## **Explanation of Responses:**

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).

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.