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SELECTIVE INSURANCE GROUP INC

Form 4 July 06, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

January 31, 2005

0.5

Estimated average burden hours per

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

obligations may continue. See Instruction

1. Name and Address of Reporting Person *

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

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

THEBAULT J BRIAN			Symbol SELECTIVE INSURANCE GROUP INC [SIGI]				C	Issuer (Check all applicable)					
			3. Date of Earliest Transaction (Month/Day/Year) 07/01/2005					_X_ Director 10% Owner Officer (give title below) Other (specify below)					
BRANCHV	(Street) VILLE, NJ 07890			ndment, Da nth/Day/Year		1		6. Individual or J Applicable Line) _X_ Form filed by Form filed by I Person	·	erson			
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secui	rities Acq	s Acquired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 07/01/2005	Execution any		Code (Instr. 8)	4. Securi on(A) or D (Instr. 3, Amount	spose	d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 19,024.439	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Stock	07/01/2003			А	210	А	49.78	<u>(1)</u>	D	G 1			
Common Stock								101.246 (2)	I	Custody for Son			
Common Stock								101.246 (2)	I	Custody for Daughter			

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form

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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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactic Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 8	Director	10% Owner	Officer	Other			
THEBAULT J BRIAN							
40 WANTAGE AVENUE	X						
BRANCHVILLE NI 07890							

Signatures

J. Brian
Thebault

**Signature of Reporting Person

O7/06/2005

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).
- (1) Includes 4.041 shares acquired through Selective Insurance Group Inc.'s Dividend Reinvestment Plan.
- (2) Includes .403 shares acquired through Selective Insurance Group Inc.'s Dividend Reinvestment Plan.

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.

Reporting Owners 2