Edgar Filing: SELECTIVE INSURANCE GROUP INC - Form 4

SELECTIVE Form 4 April 05, 200	E INSURANCI	E GROUP I	NC									
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287				
Check thi if no long subject to Section 1	ser STATI	box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								Expires: January 31 2005 Estimated average burden hours per		
									0.5			
(Print or Type F	Responses)											
BROWN A DAVID Syn SE				2. Issuer Name and Ticker or Trading Symbol SELECTIVE INSURANCE GROUP INC [SIGI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(3. Date of Earliest Transaction(Month/Day/Year)04/03/2006					X_ Director 10% Owner Officer (give title Other (specify below) below)				
				. If Amendment, Date Original iiled(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	ILLE, $INJ U/0$	90						Person				
(City)	(State)	(Zip)	Table	I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	n Date, if Day/Year)	3. Transactio Code (Instr. 8) Code V	(Instr. 3,	spose	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)			
Common Stock	04/03/2006			А	237	A	\$ 52.84	16,067	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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
	Director	10% Owner	Officer Other					
BROWN A DAVID 40 WANTAGE AVENUE BRANCHVILLE, NJ 07890	X)							
Signatures								
A. David Brown	04/05/2006							
<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.