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

SELECTIVE Form 4 May 10, 2006	INSURANCE GR	OUP INC							
FORM	4					OMB AF	PROVAL		
Washington, D.C. 20549					OMMISSION	OMB Number:	3235-0287		
Check this if no longe		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							
subject to Section 16	STATEME								
Form 4 or Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,								
obligations may contin <i>See</i> Instruct 1(b).	s Section $17(a)$ of	of the Public Utility He 30(h) of the Investme	olding Company	y Act of 3	1935 or Sectior	1			
(Print or Type Re	esponses)								
1. Name and Ad BECKER W	ldress of Reporting Pers MARSTON	Symbol	SELECTIVE INSURANCE GROUP			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month/I			ate of Earliest Transaction nth/Day/Year) 08/2006			X_ Director10% Owner Officer (give titleOther (specify below)below)			
	(Street)		If Amendment, Date Original			6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year) Applicable Line) _X_Form filed by CForm filed by M Person					one Reporting Person fore than One Reporting				
(City)	(State) (Zip	) Table I - Non	-Derivative Secur	ities Acqu	ired, Disposed of	, or Beneficial	ly Owned		
	aı	A. Deemed 3. xecution Date, if Transac ny Code Aonth/Day/Year) (Instr. 8	4. Securities Ad ction(A) or Disposed (Instr. 3, 4 and	cquired d of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of		
Common Stock	05/08/2006	P	1,000 A	\$ 54.27	1,938	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**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
BECKER W MARSTON 40 WANTAGE AVENUE BRANCHVILLE, NJ 07890	Х						
Signatures							
W. Marston Becker 05/	/10/2006						
**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.