Edgar Filing: SELECTIVE INSURANCE GROUP INC - Form 4

SELECTIVE Form 4 July 05, 2000	E INSURANC	E GROUP I	NC								
									PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check th if no long subject to Section 1 Form 4 o	NGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Expires: January 31 2009 Estimated average burden hours per					
Form 4 o Form 5 obligation may cont See Instru 1(b).	Filed j ^{ns} Section 1	7(a) of the	Public U		ling Con	npany	y Act of	e Act of 1934, E 1935 or Section 40	response	0.5	
(Print or Type I	Responses)										
LAMMTENNANT JOAN M Symbol SEL				2. Issuer Name and Ticker or Trading Symbol SELECTIVE INSURANCE GROUP INC [SIGI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Month			(Month/D	3. Date of Earliest Transaction Month/Day/Year))7/03/2006				X_ Director 10% Owner Officer (give title Other (specify below) below)			
				Amendment, Date Original d(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 			
DRANCIIV	ILLE, NJ 076	90						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executio any	n Date, if	3. Transactic 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)	Indirect Beneficial	
Common Stock	07/03/2006			A	224	A	\$ 56.04	16,670	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				
LAMMTENNANT JOAN M 40 WANTAGE AVENUE BRANCHVILLE, NJ 07890	Х							
Signatures								
Joan M Lamm-Tennant 07	7/05/2006							
<u>**</u> Signature of Reporting	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.

Person