### Edgar Filing: PROGRESSIVE CORP/OH/ - Form 4

PROGRES Form 4 July 05, 200	SIVE CORP/OH/ 06										
FOR									OMB A	PPROVAL	<u> </u>
-	UNITED	STATES S		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-0	-
Check t if no lo subject Section Form 4	nger to <b>STATEN</b> 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNE SECURITIES							Expires: Estimated burden hou response	irs per	
Form 5 obligati may co <i>See</i> Inst 1(b).	ons ntinue. Section 17(	(a) of the P	ublic U		ding C	ompan	y Act	nge Act of 1934, of 1935 or Secti 940			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> FORRESTER W THOMAS			2. Issuer Name <b>and</b> Ticker or Trading Symbol PROGRESSIVE CORP/OH/ [PGR]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (	Middle)	3. Date of Earliest Transaction					(Check all applicable)			
6300 WILSON MILLS ROAD			(Month/Day/Year) 06/30/2006				Director 10% Owner X Officer (give title Other (specify below) below) Vice Pres. & Chief / Financial Officer				
			4. If Amendment, Date Original Filed(Month/Day/Year)			<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>					
MAYFIEL	D VILLAGE, OF	I 44143						Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivati	ve Secur	ities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8) Code V	Dispos (Instr. 2	ed (A) or ed of (D) 3, 4 and 5 (A) or	)	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 Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	eport on a separate line	e for each clas	ss of seci	urities bene	ficially c	wned di	rectly o	or indirectly			
Kenniuer. Ke	port on a separate link		33 01 500		Per info req disp	sons wi rmatior uired to	ho res n cont respo	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	

 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	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security	(Month/Day	7/Year) (Ins	str. 8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
			Coo	de V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Comp Unit (1)	\$ 0 <u>(2)</u>	06/30/2006	А		12.081		(3)	(4)	Common	12.081	9

# **Reporting Owners**

Reporting Owner Name / Address				
	Director	10% Owner	Officer	Other
FORRESTER W THOMAS 6300 WILSON MILLS ROAD MAYFIELD VILLAGE, OH 44143			Vice Pres. & Chief	Financial Officer
Signatures				

David M. Coffey, By Power of Attorney

\*\*Signature of Reporting Person

Date

07/05/2006

## 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).

All Derivative Security balances reported herein by the Reporting Person have been adjusted to reflect a 4-for-1 stock split, which was (1) effected in the form of a stock dividend paid on May 18, 2006 to shareholders of record as of May 8, 2006. All Common Share and Derivative Security balances reported by the Reporting Person in the future will likewise be adjusted to reflect the stock split.

- (2) 1 for 1
- (3) Immediately
- (4) These units will be paid out in cash at the time elected by the reporting person, subject to the vesting provisions of the 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.