Edgar Filing: CONDRON P KEVIN - Form 4

CONDRON Form 4	P KEVIN											
February 18,									0145			
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								APPROVAL 3235-0287				
Check thi if no long subject to Section 10 Form 4 or	er STATEN 6.	box					L OV	VNERSHIP OF	Expires:	ours per		
Form 5 obligatior may conti <i>See</i> Instru 1(b).	inue. Section 17(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										
(Print or Type R	Responses)											
CONDRON P KEVIN Symbol HANC			Symbol	OVER INSURANCE GROUP,				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(First) (1 OVER INSURAN C., 440 LINCOL		3. Date of (Month/D 02/17/20		ansaction			X Director Officer (giv below)		0% Owner ther (specify		
				endment, Date Original nth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 				
WORCEST	ER, MA 01653								More than One			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities A	cquired, Disposed	of, or Benefici	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ion Date, if Trans Code		TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)		SecuritiesFBeneficially(JOwnedInFollowing(JReportedTransaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
Common Stock	02/17/2009			Code V A	Amount	(D) A	Price (<u>1</u>)	(Instr. 3 and 4) 4,435 (2)	I <u>(2)</u>	Deferral Agreement (3)		

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

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Unde Secur	le and unt of rlying rities : 3 and 4)	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		

Reporting Owners

Reporting Owner Name / Address	Relationships					
I State and the state	Director	10% Owner	Officer	Other		
CONDRON P KEVIN THE HANOVER INSURANCE GROUP, INC. 440 LINCOLN STREET WORCESTER, MA 01653	Х					
Signatures						
Walter H Stowell pursuant to Confirming Statement	02/18/2009					
**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).

(1) Shares granted pursuant to the Issuer's 2006 Long-Term Incentive Plan; receipt deferred at the election of Reporting Person

(2) Does not include 1,000 shares held directly by Reporting Person

(3) Shares held indirectly in a Rabbi Trust pursuant to Deferral Agreement.

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.