Stuchbery Robert A Form 4 March 12, 2012

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

Expires: January 31, 2005

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and a Stuchbery 1	Address of Reporting F Robert A	Symbol	er Name and Ticker or Trading VER INSURANCE GROUP, ΓHG]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (M	fiddle) 3. Date of	of Earliest Transaction	Director 10% Owner			
440 LINCO	OLN STREET, E-1	,	Day/Year) 2012	X Officer (give title Other (specify below) President & CEO, Chaucer			
	(Street)	4. If Am	endment, Date Original	6. Individual or Joint/Group Filing(Check			
		Filed(Mo	onth/Day/Year)	Applicable Line)			
WORCESTER, MA 01653			_X_ Form filed by One Reporting F Form filed by More than One F Person				
(City)	(State)	(Zip) Tab	ole I - Non-Derivative Securities Ac	quired, Disposed of, or Beneficially Owned			
1.Title of	2. Transaction Date	2A. Deemed	3. 4. Securities Acquired	5. Amount of 6. 7. Nature of			
Security	(Month/Day/Year)	Execution Date, if	Transaction(A) or Disposed of (D)	Securities Ownership Indirect			
(Instr. 3)		any	Code (Instr. 3, 4 and 5)	Beneficially Form: Direct Beneficial			
		(Month/Day/Year)	(Instr. 8)	Owned (D) or Ownership			
				Following Indirect (I) (Instr. 4) Reported (Instr. 4)			
			(A)	Transaction(s)			
			or Code V Amount (D) Price	(Instr. 3 and 4)			
Common			code (/ miodift (B) / frice				

Common $A_{\underline{-}}^{(1)}$ 03/08/2012 3,000 (1) 20,500 Α D Stock By Trustee of the Common Chaucer 03/09/2012 $A^{(2)}$ 5 20 I Stock 39.96 Share Incentive Plan Common 03/09/2012 $A^{(3)}$ 10 \$0 30 Ι by Trustee A Stock of The Chaucer

Share

Incentive Plan

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

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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.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities	S		(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
				C 1 V	(A) (D)				of		
				Code V	(A) (D)				Shares		

Reporting Owners

December Occurs Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

Stuchbery Robert A 440 LINCOLN STREET E-10

President & CEO, Chaucer

WORCESTER, MA 01653

Signatures

Walter H. Stowell pursuant to Confirming
Statement

03/12/2012

**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) Grant of restricted stock units pursuant to Issuer's 2006 Long-Term Incentive Plan. Such RSUs vest on the second anniversary of the grant date.
- (2) Purchase of shares under the Chaucer Share Incentive Plan.

Reporting Owners 2

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(3) Matching shares under the Chaucer Share Incentive Plan. Subject to vesting restrictions.

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.