Edgar Filing: CONDRON P KEVIN - Form 4

CONDRON I Form 4	P KEVIN											
February 17,	2011											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COM								OMB APPROVAL				
	UNITED	Washington, D.C. 20549							N OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	er STATEN	ox STATEMENT OF CHAN				ICIA	L OV	VNERSHIP OF	Estimated burden ho	ours per		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Filed pura s Section 17(a	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										
(Print or Type R	esponses)											
CONDRON P KEVIN Symbol HAI			Symbol HANOV	• Name and VER INSU				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(T))		e. 1 11 \	INC. [T	-				V D'				
	(First) (N VER INSURAN C., 440 LINCOL		3. Date of (Month/D 02/15/20		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)					
WORCEST	ER, MA 01653							_X_ Form filed by Form filed by Person	One Reporting More than One			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Ac	cquired, Disposed	of, or Benefici	ially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ned 1 Date, if	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)			SecuritiesFeBeneficially(IOwnedInFollowing(IReportedTransaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of			
Common Stock	02/15/2011			Code V A	Amount	(D) A	Price (<u>1</u>)	(Instr. 3 and 4) 9,507 (2)	I	Deferral Agreement (3)		

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.

Edgar Filing: CONDRON P KEVIN - Form 4

 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					
1	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		02/17/2011				
<u>**</u> 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 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 a 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.