FRIEDMAN HOWARD H

Form 4 March 03, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number:

OMB APPROVAL

3235-0287

Expires:

January 31, 2005

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response...

5. Relationship of Reporting Person(s) to

if no longer subject to Section 16. Form 4 or Form 5

Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations

may continue. See Instruction

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

FRIEDMAN HOWARD H		Symbol PROA	SSURANCE CORP [PRA]	Issuer (Check all applicable)			
CORPORA	SSURANCE		of Earliest Transaction Day/Year) 2006	Director 10% Owner X Officer (give titleX Other (specify below) below) Chief Financial Officer / Secretary & Senior VP			
BIRMING	(Street) HAM, AL 35209-	Filed(M	nendment, Date Original onth/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 Person			
(City)	(State)	(Zip) Tal	ole I - Non-Derivative Securities Ac	quired, Disposed o	of, or Beneficially Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year) 03/01/2006		Code (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) Indirect (I) (Instr. 4) Ownership (Instr. 4)		
Common			32.19	014	I IDA		
Stock				914	I IRA		
Common Stock				173	I Spouse's IRA		

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

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displays a currently valid OMB control number.

$\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (Right to Buy)	\$ 41.15					09/10/2005(2)	09/10/2015	Common Stock	25,000
Employee Stock Option (Right to Buy)	\$ 33.28					09/10/2004(3)	09/10/2014	Common Stock	25,000
Employee Stock Option (Right to Buy)	\$ 22					09/04/2003(4)	03/04/2013	Common Stock	25,000
Employee Stock Option (Right to Buy)	\$ 16.8					07/15/2002(5)	11/05/2012	Common Stock	50,000

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

TRIEDMAN HOWARD H Chief Financial Officer Secretary & Senior VP

FRIEDMAN HOWARD H C/O PROASSURANCE CORPORATION 100 BROOKWOOD PLACE

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Date

BIRMINGHAM, AL 35209-6811

Signatures

Frank B. O'Neil, Attorney-in-Fact for the Reporting
Person

03/03/2006

**Signature of Reporting Person

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 acquired in the amended and restated ProAssurance Stock Ownership Plan. Purchases under this plan are exempt under Rule 16b-3(c).
- (2) The options vest in five equal installments commencing on September 10, 2005
- (3) The options vest in five equal installments commencing on September 10, 2004
- (4) The options vest in five equal installments commencing on September 4, 2003
- (5) The options vest in five equal installments commencing on July 15, 2002

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.

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