Edgar Filing: PRAGER MICHAEL J - Form 4

| PRAGER M Form 4 | IICHAEL J | | | | | | | | | | |
|---|---|-------------|---|--|----------------------|------------------|---|--|---|---|--|
| November 2 | 22, 2005 | | | | | | | | | | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION | | | | | | | | OMB AF | OMB APPROVAL | | |
| | UNITE | D STATES | | | AND EX(, D.C. 20 | | NGE C | OMMISSION | OMB Number: | 3235-0287 | |
| Check this box | | | | | | | | | Expires: | January 31, | |
| | | | | NGES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | Extimated average burden hours per response 0.5 | | | |
| Form 5 obligation may con See Instr 1(b). | Filed p ons Section 1 | 7(a) of the | Public U | tility Hol | | ipany | Act of | e Act of 1934, 1935 or Section 0 | response | 0.5 | |
| (Print or Type | Responses) | | | | | | | | | | |
| PRAGER MICHAEL J Symbol GREAT | | | | er Name and Ticker or Trading | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | | | | T AMERICAN FINANCIAL URCES INC [GFR] | | | | | | | |
| (Month/I | | | | e of Earliest Transaction n/Day/Year) (2005 | | | | Director 10% Owner X Officer (give title Other (specify below) below) | | | |
| 250 EAST FIFTH STREET 11/22 | | | | Amendment, Date Original Month/Day/Year) | | | | Senior Vice President | | | |
| | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | | | | |
| CINCINNA | ATI, OH 45202 | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-I | Derivative | Securi | ties Acqu | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | Security (Month/Day/Year) Execution Date, | | n Date, if | 3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8) | | | of (D) | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | (1150. 1) | | |
| Stock, \$1.00 par | 11/22/2005 | | | А | 97.982 | А | \$ 20.05 | 1,632.3135 | D | | |

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.

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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. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 5 | Date | 7. Titl Amou Under Secur (Instr. | unt of rlying | 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 | | | | | | |
|---|---------------|-----------|-----------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| PRAGER MICHAEL J 250 EAST FIFTH STREET CINCINNATI, OH 45202 | | | Senior Vice President | | | | |
| Signatures | | | | | | | |
| Mark F. Muething, Attorney-ir Prager | 11/22/2005 | | | | | | |
| <u>**</u> Signature of Reporting | Date | | | | | | |
| Evaluation of Poenoneoe: | | | | | | | |

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).

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.