Edgar Filing: ASSURANT INC - Form 4

ASSURANT Form 4	T INC										
April 03, 200											
FORM	14		GEGUI				NCEC			PROVAL	
UNITED STATES SEC				shington,			NGE C	DMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to STATEMENT (DENIER		LOW		Expires:	January 31, 2005	
subject to Section 1	r CHAN	SECUR		ICIA		NEKSHIP OF	Estimated a burden hour	verage rs per			
Form 4 o Form 5	Form 5 Filed pursuant to Section				e Securit	ies F	xchang	e Act of 1934	response 0		
obligation may cont	ns Section 170						•	1935 or Section	1		
See Instru 1(b).		30(h)	of the In	vestment	Compan	iy Ac	t of 194	0			
(Print or Type I	Responses)										
Lemasters S Craig Symbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
			•	ANT INC	C[AIZ]			(Check all applicable)			
(Last)	(First) (Middle)		f Earliest Tr	ansaction						
	RANT, INC., ON ANHATTAN PL		(Month/D 04/01/2	-				Director X Officer (give below) Exec. VP / Pres.	title \underline{X} Other below)		
12.	(Street)		4. If Ame	endment, Da	te Origina	1		6. Individual or Joi	int/Group Filin	g(Check	
Filed(Mon			th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
NEW YOR	K, NY 10005							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution		Date, if Transactio Code		4. Securities Acquired r(A) or Disposed of (D) (Instr. 3, 4 and 5) (A)			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)	
				Code V	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	04/01/2008			F	214	D	\$ 63.92	18,829.4941	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.

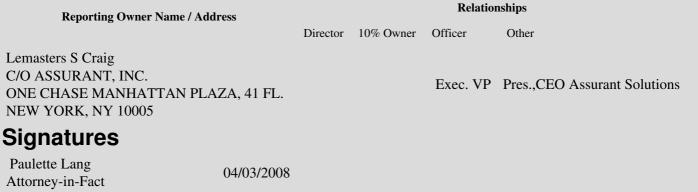
 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners



**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).

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.