Employers Holdings, Inc. Form 3 June 02, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Newman Russel J			2. Date of Event Requiring Statement(Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Employers Holdings, Inc. [EIG]			
(Last)	(First)	(Middle)	05/22/2014	4. Relationship of Reporting Person(s) to Issuer		;	5. If Amendment, Date Original Filed(Month/Day/Year)
10375 PRO	FESSIONA	L					1
CIRCLE				(Check all applicable)			
RENO, N	(Street) VÂ 89521						Form filed by More than One
(City)	(State)	(Zip)	Table I - N	Non-Deriva	tive Securiti	es Be	neficially Owned
1.Title of Secu (Instr. 4)	rity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr	•
Common St	ock, par val	ue \$0.01	0		D	Â	
Reminder: Rep owned directly	•	ate line for e	ach class of securities benefic	ially S	SEC 1473 (7-02	2)	
	inform	ation cont	pond to the collection of ained in this form are not and unless the form displ				

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		(Instr. 4)	Price of	Derivative	
		Title	Derivative Security	Security: Direct (D)	

January 31,

2005

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Expires:

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships					
	Director	10% Owner	Officer	Other			
Newman Russel J 10375 PROFESSIONAL CIRCL RENO, NV 89521	E Â	Â	SVP, Chief Sales Officer	Â			
Signatures							
/s/ Russel J. 06/02 Newman	/2014						

<u>**</u> Signature of	Date
Reporting Person	

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.