LEACH CRAIG P Form 4 July 20, 2010

## FORM 4

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

**OMB** 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Number: January 31, Expires: 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

See Instruction

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

burden hours per response... 0.5

1(b).

value \$.01

(Print or Type Responses)

1. Name and Address of Reporting Person ** LEACH CRAIG P			2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
•			MERISAFE INC [AMSF]				(Check all applicable)			
(Last)	(First) (N	Middle) 3. Date	3. Date of Earliest Transaction				(Check all applicable)			
AMEDICAI	TE INC. 2201		(Month/Day/Year)				DirectorX_ Officer (giv		Owner or (specify	
AMERISAFE, INC., 2301 07/2 HIGHWAY 190 WEST			7/20/2010				below)	below)		
IIIOIIWAI						EVP, Sales and Marketing				
	(Street) 4. If Amer			Č	ıl		6. Individual or Joint/Group Filing(Check			
		Filed(M	onth/Day/Year	)			Applicable Line) _X_ Form filed by	One Reporting Pe	erson	
DERIDDER, LA 70634							Form filed by More than One Reporting Person			
(City)	(State)	(Zip) Tal	ole I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common Stock, par value \$.01	07/20/2010		M	163 (1)	A	\$ 9	6,161	D		
Common Stock, par	07/20/2010		S	163	D	\$ 17.75	5,998	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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. 5. Number Transactionof Code Derivative (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy)	\$9	07/20/2010		M	163 (1)	(2)	11/17/2015	Common Stock, \$.01 par value	163	9

# **Reporting Owners**

Penerting Owner Name / Address	Relationships
Donouting Owner Name / Address	

Director 10% Owner Officer Other

LEACH CRAIG P AMERISAFE, INC. 2301 HIGHWAY 190 WEST DERIDDER, LA 70634

EVP, Sales and Marketing

## **Signatures**

/s/Todd Walker, attorney in fact for Craig P. Leach

07/20/2010

\*\*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) Transaction completed pursuant to 10b5-1 Plan executed while officer was not in possession of material non-public information
- Of the 133,928 options to purchase common stock, par value \$.01, 86,428 have vested. The remaining 47,500 options vest November 17, 2010.

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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