Edgar Filing: Frawley Kevin B - Form 4

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| Frawley Kev Form 4 | | | | | | | | | | | |
|---|--|--|--|--|---|---------------------------------|---|--|--|-----------|--|
| February 23, | _ | | | | | | | | OMB A | PPROVAL | |
| FORM | UNITED | STATES | | ITIES Al hington, | | | IGE (| COMMISSION | OMB Number: | 3235-0287 | |
| Check thi if no long | | ······································ | | | | | Expires: | January 31 | | | |
| subject to Section 1 Form 4 or Form 5 | | SECUR | ITIES | | NERSHIP OF e Act of 1934, | Estimated a burden hou response | irs per | | | | |
| obligation may cont <i>See</i> Instru 1(b). | inue. Section 170 | | Public Ut of the Inv | • | | | | f 1935 or Section 10 | n | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Frawley Kevin B | | | 2. Issuer Name and Ticker or Trading Symbol CRAWFORD & CO [CRDA CRDB] | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | | 3. Date of Earliest Transaction | | | | | k all applicable) | | |
| | | | (Month/Day/Year) 02/19/2010 | | | | Director 10% Owner X Officer (give title Other (specify below) below) Executive Vice President | | | | |
| | | | | f Amendment, Date Original ed(Month/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 | | | |
| ATLANTA, | , GA 30319 | | | | | | | Person | lore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | ecurit | ies Acq | uired, Disposed of | , or Beneficial | lly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | Execution any | med on Date, if Day/Year) | 3. Transactic Code (Instr. 8) Code V | 4. Securiti on(A) or Dis (D) (Instr. 3, 4) | sposed | of | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Class A Common Stock | 02/19/2010 | | | A | 20,000 | A | \$ 0 | 85,031 | D | | |
| Class A Common Stock | 02/19/2010 | | | F | 11,442 | D | \$ 2.8 | 73,589 | 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. Transact Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Unde Secur | int 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 | | | | |
| Frawley Kevin B 1001 SUMMIT BLVD, NE ATLANTA, GA 30319 | | | Executive Vice President | | | | | |
| Signatures | | | | | | | | |
| /s/ Kevin B. | | | | | | | | |

Frawley 02/23/2010 **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).

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.