Lyons Dianne M Form 4 September 04, 2009

September 04, 200

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

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue.

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

See Instruction 1(b).

Stock

(Print or Type Responses)

1. Name and A Lyons Diar	Address of Reporting I nne M	Symbol UNITE	2. Issuer Name and Ticker or Trading Symbol UNITED FIRE & CASUALTY CO [UFCS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 118 SECOI BOX 73909	ND AVENUE SE,	(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 09/01/2009				Director 10% Owner Officer (give title Other (specify below) VP/Chief Financial Officer				
CEDAR RA	(Street) APIDS, IA 52407-	Filed(Mor	ndment, Da nth/Day/Year)	_	1		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by N Person	-	rson		
(City)	(State)	(Zip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	rity (Month/Day/Year) Execution any (Month/		ned 3. n Date, if Transaction Code Day/Year) (Instr. 8) Code V			5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	(D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common	09/01/2009	09/04/2009	P	10 (1)	A	\$	3,621 (2)	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.

SEC 1474

(9-02)

19.94

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

Edgar Filing: Lyons Dianne M - Form 4

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ration Date		of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 and 4)	and 4)		Owne
	Security				Acquired	equired					Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								Δ	mount		
								0			
						Date	Expiration ble Date	Title Number			
						Exercisable					
				Code V	(A) (D)				hares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

Lyons Dianne M 118 SECOND AVENUE SE P.O. BOX 73909 **CEDAR RAPIDS, IA 52407-3909**

VP/Chief Financial Officer

Signatures

/s/ Dianne M. 09/04/2009 Lyons

**Signature of Date Reporting Person

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) Shares acquired through participation in Employee Stock Purchase Plan.

Total number of shares held following the reported transaction includes: 2,151 shares of restricted stock issued under Company's 2008 (2) Stock Plan, which vest, subject to certain conditions, on 05/21/2013; 1,110 shares held in the Company's Employee Stock Ownership Plan for Ms. Lyon's benefit; and 360 shares held of record by Ms. Lyons in a direct registration account.

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.

Reporting Owners 2