SKILLERN FRANK

Form 4

December 14, 2004

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287

OMB APPROVAL

Number:

Expires:

January 31, 2005

0.5

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Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SKILLERN FRANK

2. Issuer Name and Ticker or Trading Symbol

Issuer

AMERICAN MEDICAL SECURITY GROUP INC [AMZ]

(Check all applicable)

5. Relationship of Reporting Person(s) to

(Last)

(First) (Middle) 3. Date of Earliest Transaction

X Director Officer (give title

10% Owner Other (specify

C/O AMERICAN MECICAL SECURITY GROUP INC, 3100 **AMS BLVD**

(Street)

4. If Amendment, Date Original

6. Individual or Joint/Group Filing(Check

Applicable Line)

Filed(Month/Day/Year)

(Month/Day/Year)

12/13/2004

X Form filed by One Reporting Person Form filed by More than One Reporting

GREEN BAY, WI 54313

(City) (State) (Zip)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year)

Execution Date, if (Month/Day/Year) 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)

(A) (D)

Transaction(s) (Instr. 3 and 4) Price

Common 12/13/2004 Stock

Code V Amount D 12,300

0

D

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

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

(9-02)

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-employee director stock option (right to buy)	\$ 5.1875	12/13/2004		D	10,000	<u>(1)</u>	11/16/2012	Common Stock	10,
Non-employee director stock option (right to buy)	\$ 10.2	12/13/2004		D	8,000	(2)	11/28/2013	Common Stock	8,0
Non-employee director stock option (right to buy)	\$ 14.41	12/13/2004		D	6,700	(3)	01/19/2015	Common Stock	6,7
Non-employee director stock option (right to buy)	\$ 10.25	12/13/2004		D	5,000	<u>(4)</u>	09/27/2010	Common Stock	5,0

Reporting Owners

Attorney-in-Fact

Reporting Owner Name / Address	Relationships					
reporting 6 mer runner riduress	Director	10% Owner	Officer	Other		
SKILLERN FRANK C/O AMERICAN MECICAL SECURITY GROUP INC 3100 AMS BLVD GREEN BAY, WI 54313	X					
Signatures						
/s/Cheryl A. Thomson						

Explanation of Responses:

**Signature of Reporting Person

- * 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).

Date

(1) This option vested in three equal annual installments beginning November 17, 2001.

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- (2) This option vested in three equal annual installments beginning November 29, 2002.
- (3) This option vested in three equal annual installments beginning January 20, 2004.
- (4) This option vested in three equal annual installments beginning September 28, 1999.

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.