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CINCINNAT Form 4 June 26, 2007	I FINANCIAL C	ORP									
FORM 4 OMB > PROVAL Image: Non-Section 16. Image: Non-Section 16. Image: Non-Section 16. Image: Non-Section 16.									3235-0287 January 31, 2005 average rs per		
 (Print or Type Responses) 1. Name and Address of Reporting Person [*] MCMULLEN W RODNEY 2. Issuer Name and Ticker of Symbol CINCINNATI FINANCE 					Issuer			Reporting Person(s) to			
(Last) 6200 SOUTH	(First) (M H GILMORE RD	iddle) 3. D (Mo	[CINF] 3. Date of Earliest Transaction (Month/Day/Year) 06/22/2007				(Chec X Director Officer (give below)	eck all applicable) re title 10% Owner Other (specify below)			
Filed(Month/Day/Year) Appli _X_F FAIRFIELD OH 45014-5141F					Applicable Line) _X_ Form filed by (y One Reporting Person y More than One Reporting					
(City)	(State) (A	Zip)	Table I - Non-D	erivative S	Securit	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Dat any	Code Year) (Instr. 8)	(A) or)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	06/22/2007	06/22/2007	P	1,000	A		19,258	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.

 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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address		Relationships							
		Director	10% Owner	Officer	Other				
MCMULLEN W RODNE 6200 SOUTH GILMORE FAIRFIELD, OH 45014-5	RD	X							
Signatures									
W. Rodney McMullen	06/	26/2007							
<u>**</u> Signature of		Date							

**Signature of 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).

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.