

FIRST AMERICAN CORP
 Form 3
 October 11, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *

ARGYROS GEORGE L
 (Last) (First) (Middle)

949 SOUTH COAST DRIVE,
 SUITE 600

(Street)

COSTA MESA, CA 92626

(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)
 10/01/2005

3. Issuer Name and Ticker or Trading Symbol
 FIRST AMERICAN CORP [(FAF)]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer Other
 (give title below) (specify below)

5. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	235,820	D	À
Common Stock	7,900	I	By GLA Financial Corp. (corp.)
Common Stock	106,800	I	By HBI (corp.)
Common Stock	3,400	I	By Trust ⁽¹⁾
Common Stock	25,200	I	By Trust ⁽²⁾
Common Stock	15,000	I	By Trust ⁽³⁾
Common Stock	3,900	I	By Trust ⁽⁴⁾
Common Stock	125	I	UGMA Custodial Account ⁽⁵⁾

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date			
		Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ARGYROS GEORGE L 949 SOUTH COAST DRIVE, SUITE 600 COSTA MESA, CA 92626	X			

Signatures

By: Jeffrey S. Robinson, Attorney In Fact for
 10/10/2005
 **Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) The shares are held by the reporting person as trustee of an irrevocable trust for the benefit of his parents.
- (2) The shares are held by the reporting person as trustee of an irrevocable trust for the benefit of his son.
- (3) The shares are held by the reporting person as trustee of an irrevocable trust for the benefit of his daughter.
- (4) The shares are held by a revocable trust for which the reporting person's daughter serves as the trustee and for which the reporting person may be deemed to have investment control.
- (5) The shares are held by the reporting person as custodian of a custodial account established under the Uniform Gifts to Minors Act, for the benefit of the reporting person's grandson.

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.