

DOLLAR GENERAL CORP

Reported by **BULEY BERYL J**

FORM 4/A

(Amended Statement of Changes in Beneficial Ownership)

Filed 04/20/07 for the Period Ending 03/16/07

Address 100 MISSION RIDGE

GOODLETTSVILLE, TN, 37072

Telephone 6158554000

CIK 0000029534

Symbol DG

SIC Code 5331 - Retail-Variety Stores

Industry Discount Stores

Sector Consumer Cyclicals

Fiscal Year 02/02



[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
BULEY BEI	RYL J]	OOLI	LAR (GENER	AL (COR	P [DC	3]	(Circuit un up	pricacie)			
(Last) (First) (Middle)				3	3. Date of Earliest Transaction (MM/DD/YYYY)							Director				
100 MISSION RIDGE					3/16/2007							`	X Officer (give title below) Other (specify below) Division President			
(Street)				4	4. If Amendment, Date Original Filed (MM/DD/YYYY)							(Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)			
GOODLETTSVILLE, TN 37072					3/20/2007								X_Form filed by One Reporting Person Form filed by More than One Reporting Person			
(C	ity) (Sta	te) (Z	ip)													
			Table I	- Non-D	erivat	ive Sec	urities Ac	quire	ed, Dis	sposed o	f, or	Beneficially Own	ed			
1. Title of Security (Instr. 3)			. Trans. Da	Execu	Deemed ution if any	3. Trans. Code (Instr. 8)		4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securi Following Reported (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		Ownership Form:	Beneficial	
							Code	V	Amoun	(A) or (D)	Pric	ee			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock												2	2100 (1)		I	By Spouse
	Tab	le II - Der	ivative S	Securitie	s Bene	ficially	Owned (e.g. ,	puts,	calls, wa	arrar	its, options, conv	ertible sec	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deeme Execution Date, if an	(Instr.		Code 5. Number of Derivative Se Acquired (A) Disposed of ((Instr. 3, 4 an		Securities Expired (A) or of (D)		ration Date		e and Amount of ities Underlying ative Security 3 and 4)	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	e V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	
Explanation of	Responses	:														

(1) This holding was omitted from the reporting person's original Form 4. The reporting person acquired beneficial ownership of these shares upon his marriage to the owner of the shares in February 2007.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director 10% Owner Officer		Officer	Other			
BULEY BERYL J							
100 MISSION RIDGE			Division President				
GOODLETTSVILLE, TN 37072							

Signatures

/s/ Susan S. Lanigan, by Power of Attorney	4/20/2007			
**Signature of Reporting Person	Date			

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

- * 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.

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.