

**VALLEY NATIONAL BANCORP**

**Form 4**

**November 06, 2002**

1. Name and Address of Reporting Person  
 JONES, GRAHAM O.  
 1455 VALLEY ROAD  
 WAYNE, NJ 07470-
2. Issuer Name and Ticker or Trading Symbol  
 VALLEY NATIONAL BANCORP (VLY)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Day/Year  
 11/01/2002 R1
5. If Amendment, Date of Original (Month/Day/Year)  
 10/30/2002
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)  
 Director                                      10% Owner  
 Officer (give title below)    Other (specify below)
7. 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 Acquired, Disposed of, or Beneficially Owned

1. Title of Security	2. Trans- action Date (Month/ Day/ Year)	2A.Execu- action Date (Month/ Day/ Year)	3. Trans- action Code Code  V	4. Securities Acquired (A) or Disposed of (D) Amount  A/D Price	5. Amo  Securi  Benefi  Owned  Follow  Report  Transa
Common Stock	10/30/2002	10/30/2002	G	-35715             D     \$0.0000	948029