### Edgar Filing: FREER PATRICK J - Form 4

FREER PA Form 4	ATRICK J													
November	09, 2005													
FOR	М 4									OMB APF	PROVAL			
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549								OMB Number:	3235-0287					
Section 16. Form 4 or		MENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES									0			
Form 5 obligations may continue. See Instruction 1(b). 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)														
(I IIII OI I yp	e Responses)													
				2. Issuer Name and Ticker or Trading Symbol Issu FULTON FINANCIAL CORP										
		[FULT]						(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction      X Director         (Month/Day/Year)      Officer (giv         10/31/2005       below)					Officer (give t	title Other (specify below)					
				ed(Month/Day/Year) App					Individual or Joint/Group Filing(Check plicable Line) _ Form filed by One Reporting Person					
PA								_	Form filed by Mo					
(City)	(State)	(Zip)	Ta	able I -	Nor	n-Derivative S	Securi	ties Acquir	ed, Disposed of,	or Beneficially	Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution D any (Month/Day	Date, if	Code (Instr. 3, 4 and 5)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4	· /				
\$2.50 par value common stock	10/31/2005			J	V	<u>192.4249</u> ( <u>1)</u>	A	\$ 16.2796	21,796.567 (2)	<sup>1</sup> D				
\$2.50 par value common stock	10/31/2005			J	v	2.0652 <u>(1)</u>	А	\$ 16.2796	233.906	Ι	Spouse			
\$2.50 par value common stock	10/31/2005			J	V	37.0501 (1)	A	\$ 16.2796	46,119.803	1 I	Strickler Insurance Agency, Inc. $(3)$			

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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)	Securities Acquired	3	ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Beno
				(A) or Disposed of (D) (Instr. 3, 4, and 5)	Date Exercisable	Expiration Date	Title	Amount or Number		Repo Trans (Instr
			Code V	(A) (D)				of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
FREER PATRICK J								
	Х							
PA								
Signatures								
George R. Barr, Jr., Attorney-in-Fact	5							
**Signature of Reporting Person		Date						

## **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).
- (1) Reinvestment of Dividends
- (2) Shares held jointly with spouse
- (3) The reporting person disclaims beneficial ownership of any shares held in the name of Strickler Insurance Agency, Inc. beyond his pro rata ownership of the Corporation.

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.