Chivinski Beth Ann L Form 4 August 25, 2010

## FORM 4

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

**SECURITIES** 

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005 Estimated average

10% Owner

Other (specify

0.5

burden hours per response...

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

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 may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Last)

vesting)

(Print or Type Responses)

1. Name and Address of Reporting Person \* Chivinski Beth Ann L

(First)

2. Issuer Name and Ticker or Trading Symbol

**FULTON FINANCIAL CORP** 

[FULT]

3. Date of Earliest Transaction (Month/Day/Year)

07/20/2010

5. Relationship of Reporting Person(s) to

Issuer

below)

Director

X\_ Officer (give title

(Check all applicable)

**Executive Vice President** 

C/O FULTON FINANCIAL CORPORATION, ONE PENN **SQUARE** 

(Street)

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

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

LANCASTER, PA 17602

(Middle)

(City)	(State) (	Zip) Table	e I - Non-l	Derivative S	ecuriti	es Acquir	ed, Disposed of, o	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		ed of (I 4 and 5) (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)
\$2.50 par value common stock	07/20/2010		Code V	7 Amount 7 19.2837 (1)	( )	Price \$ 10.23	· ·	D	
Common Stock (Restricted shares subject to	07/22/2010		J V	/ <u>(1)</u>	A	\$ 10.15	8,194.134	D	

#### Edgar Filing: Chivinski Beth Ann L - Form 4

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.

SEC 1474

(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<ol> <li>Title of</li> </ol>	2.	3. Transaction Date	3A. Deemed	4.		5.	6. Date Exerc	cisable and	7. Tit	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transa	ction	Number	Expiration D	ate	Amou	ınt of	Derivative
Security	or Exercise		any	Code		of	(Month/Day/	Year)	Unde	rlying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr.	8)	Derivative	•		Secur	ities	(Instr. 5)
	Derivative		•			Securities			(Instr	. 3 and 4)	
	Security					Acquired			`		
	Ĭ					(A) or					
						Disposed					
						of (D)					
						(Instr. 3,					
						4, and 5)					
						, ,					
										Amount	
							Date	Expiration		or	
								Date		Number	
								Date		of	
				Code	V	(A) (D)				Shares	

### **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Chivinski Beth Ann L C/O FULTON FINANCIAL CORPORATION ONE PENN SQUARE LANCASTER, PA 17602

**Executive Vice President** 

#### **Signatures**

George R. Barr, Jr., Attorney-in-Fact

\*\*Signature of Reporting Person Da

# **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 Dividend
- (2) Includes 7,106.0302 shares held in the Fulton Financial Corporation 401(k) Retirement Plan.

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.

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