FORM 4

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

OMB APPROVAL

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

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

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

(Print or Ty	pe Responses)													
1. Name and Address of Reporting Person* DEMCHAK WILLIAM S				2. Issuer Name and Ticker or Trading Symbol PNC FINANCIAL SERVICES GROUP INC [PNC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) Other (specify below)				
ONE PN	*	(First) 249 FIFTH AV		3. Date of 11/03/2			Γrans	action (Month	n/Day/Year)				Vice Chairn	nan	
(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				
PITTSBU		15222-2707 (State)	(Zip)				Tabl	la I. Non Da	rivativa Sa	ourities A agr	uired Die	nosad of a	r Danafiaially (humod	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year			2A. Deemed Execution Date, any (Month/Day/Yea		Date, if	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownersh Form: Direct (I	ct (Instr. 4)		
Reminder:	Report on a s	eparate line for each		· Derivat	tive S	Securit	ties A	Perso in this displa	ons who re s form are nys a curre	not require ently valid (r Beneficially	ed to res OMB cor	pond unle	ormation con ss the form er.	tained SI	EC 1474 (9-02)
	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code of (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		rative rities ired r osed)	6. Date Exer and Expirati (Month/Day	cisable on Date	7. Title and Amour of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock Unit	(1)	10/24/2005		J(2)	V	571		(3)	(3)	\$5 Par Common Stock	571	\$ 57.99	66,730	I	Deferred Compensation Plan
Phantom Stock Unit	(1)	10/24/2005		J ⁽⁴⁾	V	16		(3)	(3)	\$5 Par Common Stock	16	\$ 57.99	1,804	I	Supplementa Incentive Savings Plan
Phantom Stock Unit	<u>(1)</u>	11/03/2005		<u>J⁽⁵⁾</u>		22		(3)	(3)	\$5 Par Common Stock	22	\$ 60.9	1,826	I	Supplementa Incentive Savings Plan

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
DEMCHAK WILLIAM S							
ONE PNC PLAZA			Vice Chairman				
249 FIFTH AVENUE			vice Chaminan				
PITTSBURGH, PA 15222-2707							

Signatures

Signature of Reporting Person	Date
organistic of responding Ferson	
_	

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) 1 for 1
- (2) Phantom Stock Units received as dividend equivalents under the PNC Deferred Compensation Plan.
- (3) Phantom Stock Units will be settled in cash upon distribution from the reporting person's plan account and generally do not expire.
- (4) Phantom Stock Units received as dividend equivalents under the PNC Supplemental Incentive Savings Plan.
- (5) Phantom Stock Units acquired under the PNC Supplemental Incentive Savings 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.