## FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
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hours por rosponso	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

	Address of F	Reporting Person*		2. Issue	r Na	me and	Ticke	or T	rading	Symbo	1		5. Rel	ationship o		Person(s) to		
WHITFORD THOMAS K				2. Issuer Name and Ticker or Trading Symbol PNC FINANCIAL SERVICES GROUP INC [PNC]							(Check all applicable)  Director X Officer (give title below)  EVP and Chief Risk Officer  EVP and Chief Risk Officer					w)		
ONE PNC PLAZA, 249 FIFTH AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 01/23/2006										EVF and	cinei Risk Oi	icei		
(Street) PITTSBURGH, PA 15222-2707				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							
(City)		(State)	(Zip)				Table	I - N	on-De	rivative	Securiti	es Acqu	ired, D	Disposed o	f, or Benefi	cially Owned		
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year		Date, if	(Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			I	Ownership Form:	7. Nature of Indirect Beneficial Ownership
				(IVIOIIII)	Диј	,, 1 car)	Cod	e	V	Amount	(A) or (D)	Price	(Instr.	. 5 und 1)				(Instr. 4)
\$5 Par Coı	mmon Stoc	ck	07/24/2005				J <u>(1</u>	1	V	70	I A	\$ 55.53	8,020	,026				401(k) Plan
\$5 Par Co	mmon Stoc	ck	10/24/2005				J <u>(1</u>	)	V	69		\$ 57.99	8,095			]		401(k) Plan
\$5 Par Co	mmon Stoc	k											116,899			]	)	
			Table II -					uireo	a curre d, Disp	ently value	alid OME , or Bene	B contreficially	ol nur	nber.	ness the 1	orm display	S	
1. Title of	2.	3. Transaction	3A. Deemed	(e.g., pu	ts, c	alls, wa					ble secur		41	A	0 D.:	9. Number o	10.	11 1
Derivative Security (Instr. 3)	Conversion Date Execution Date, if or Exercise (Month/Day/Year) any		Execution Date, if	f Transaction of Der Code Securi (Instr. 8) Acqui		erivative irities (Mont ired (A) sposed ) : 3, 4,		Date Exercisable and piration Date onth/Day/Year)		of Ui Secu	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form o Derivat Security Direct ( or Indirect)	Owner (Instr. de Construction )		
			Code	V	(A)	E		Date Exercisable		piration te	Title	;	Amount or Number of Shares		(Instr. 4)	(Instr. 4	•)	
Employee Stock Option (Right-to-	\$ 65.445	01/23/2006		A <sup>(2)</sup>		77,00	0	01/	/23/20	007 01	/23/201	6 Con	Par nmon	77,000	\$ 0	77,000	D	

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
WHITFORD THOMAS K ONE PNC PLAZA 249 FIFTH AVENUE PITTSBURGH, PA 15222-2707			EVP and Chief Risk Officer					

### **Signatures**

Mark C. Joseph, Attorney in Fact for Thomas K. Whitford	01/25/2006
**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) Dividend reinvestment shares acquired.
- (2) Grant of stock options subject to the precondition of an appropriate agreement, signed by the parties. Options generally become exercisable in three equal annual installments, beginning one year after the date of grant.

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.