FORM 4

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

OMB APPE	KOVAL
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Savings Plan

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	3)															
Name and Address of Reporting Person * PATTERSON SAMUEL R				2. Issuer Name and Ticker or Trading Symbol PNC FINANCIAL SERVICES GROUP INC [PNC]							· INC	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) ONE PNC PLAZA, 249 FIFTH AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 11/16/2006										Controller			
(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	e I - No	on-Dei	rivative Se	curiti	ies Acqu	ired, Dis	posed of, or	Beneficially O	wned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i) any (Month/Day/Year		ate, if	Cod (Inst	Transaction ode		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	Beneficial		
					/Year		ode	V		A) or (D)	Price	(Instr. 3	str. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)		
\$5 Par Co	ommon Sto	ock	10/24/2006				J	(1)	V	309 A		<u>(2)</u>	5,076		I	401(k) Plan	
\$5 Par Common Stock 11/16/2006		11/16/2006				I	(3)		3,562 E)	\$ 69.51	11.514		401(k) Plan			
\$5 Par Co	\$5 Par Common Stock			4,304			D										
Reminder.	Report on a s	eparate line for each						i i	Perso n this displa	ns who re form are	not ently	require valid C	d to resp MB con		ormation cont ss the form er.	ained SEC	C 1474 (9-02)
	1	1	.			alls, w		ts, opt	ions, c	convertible	secu	rities)					
	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)		4. 5. Num Code of (Instr. 8) Deriv Secu Acqu (A) c Disp of (E (Instr. 4, an		ber and Expi (Month/I rities dired or sosed b) : 3,		xpirati	Exercisable ration Date Day/Year)		7. Title and Amof Underlying Securities (Instr. 3 and 4)			Derivative Securities Beneficially Owned Following Reported Transaction(s)	Ownership I Form of I Derivative (11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Titl	le	Amount or Number of Shares				
Phantom Stock	<u>(4)</u>	11/16/2006		I ⁽⁵⁾			794	(<u>6)</u>	<u>(6)</u>		5 Par mmon	794	\$ 69.51	198		Supplement Incentive

Stock

Reporting Owners

Unit

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
PATTERSON SAMUEL R ONE PNC PLAZA 249 FIFTH AVENUE PITTSBURGH, PA 15222-2707			Controller					

Signatures

Lori A. Hasselman, Attorney-in-Fact for Samuel R. Patterson	11/20/2006
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) Shares acquired under the PNC Incentive Savings Plan, including shares acquired through reinvestment of dividends.
- (2) Shares acquired under the PNC Incentive Savings Plan at various prices ranging from \$63.67 to \$72.77.
- (3) Shares liquidated in the PNC 401(k)Incentive Savings Plan pursuant to a reallocation request.
- (A) 1 for 1
- (5) Phantom stock units liquidated in the PNC Supplemental Incentive Savings Plan pursuant to a reallocation request.
- (6) Phantom Stock Units will be settled in cash upon distribution from the reporting person's plan account and generally do not expire.

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.