Chivinski Beth Ann L Form 4 July 05, 2012

# FORM 4

#### OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

Form 4 or Form 5 obligations may continue.

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

burden hours per response...

Form filed by More than One Reporting

Person

*See* Instruction 1(b).

(Print or Type Responses)

Chivinski Beth Ann L  (Last) (First) (Middle)  C/O FULTON FINANCIAL  CORPORATION, P.O. BOX 4887,  ONE PENN SQUARE		2. Issuer Name and Ticker or Trading Symbol FULTON FINANCIAL CORP [FULT]	Issuer  (Check all applicable)			
		3. Date of Earliest Transaction (Month/Day/Year) 06/13/2012	Director 10% Owner X Officer (give title Other (specification) below)  Executive Vice President			
	(Street)	4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line)			

### LANCASTER, PA 17604

(City)	(State)	(Zip) Ta	ble I - I	Non	-Derivative S	ecurit	ies Acquir	ed, Disposed of, o	r Beneficially	Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (Instr.	8)	4. Securities in Disposed of (Instr. 3, 4 and Amount	(D)	red (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	06/13/2012		J	V	247.3317 (1)	A	\$ 8.1643	46,256.0297 (2)	D	
\$2.50 par value common stock	07/02/2012		F		1,049	D	\$ 9.97	45,207.0297 (2)	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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SEC 1474 (9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amoun	it of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						Ì
					4, and 5)						
								1	Amount		
						Date	Expiration		or		
						Exercisable	Date	Title N	Number		
									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 P.O. BOX 4887, ONE PENN SQUARE LANCASTER, PA 17604

**Executive Vice President** 

### **Signatures**

Mark A. Crowe, Attorney-in-Fact

07/05/2012

\*\*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) Purchase made with cash in the Employee Stock Purchase Plan.
- (2) Includes 7,339.2274 shares held in the Fulton Financial Corporation 401(k) Retirement Plan based on statement dated June 30, 2012.

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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