

Edgar Filing: OBRIEN THOMAS H - Form 4

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Form 4

October 25, 2002

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 WASHINGTON, D.C. 20549
 FORM 4

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person
 Thomas H. O'Brien
 The PNC Financial Services Group, Inc.
 One PNC Plaza, 2nd Floor
 249 Fifth Avenue
 PA, Pittsburgh 15222-2707
2. Issuer Name and Ticker or Trading Symbol
 The PNC Financial Services Group, Inc. (PNC)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year
 10/24/2002
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
 (X) Director () 10% Owner () Officer (give title below) () Other
 (specify below)
7. Individual or Joint/Group Filing (Check Applicable Line)
 (X) Form filed by One Reporting Person
 () Form filed by More than One Reporting Person

Table I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security	2. Transaction Date	3. Code	4. Securities Acquired (A) or Disposed of (D) Amount	5. Amount of Securities Beneficially Owned at End of Month
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Table II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date	4. Code	5. Number of Derivative Securities Acquired (A) or Disposed of (D) Amount	6. Date Exercisable and Expiration Date Date Exercisable Date of Expiration	7. Title and Amount of Underlying Securities Title and Number of Shares	8. Put or Call or Other Feature of Underlying Securities
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Phantom Stock Unit (1-for-1) | | | | | | | | | | \$5 Par Common Stock | |

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Phantom Stock Unit (1-		10/24 A		7		A			\$5 Par Commo 7	
for-1)		/ 200 1							n Stock	
		2								

Explanation of Responses:

1. Phantom Stock units received as dividend equivalents under PNC Directors Deferred Stock Unit Plan.