AICHELE WILLIAM S

Form 5

February 06, 2009

OMB APPROVAL FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer AICHELE WILLIAM S Symbol UNIVEST CORP OF (Check all applicable) PENNSYLVANIA [UVSP] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) _X_ Director 10% Owner Other (specify _X__ Officer (give title (Month/Day/Year) below) below) 12/31/2008 Director, Chairman, Pres & CEO 1401 RICKERT ROAD (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line) PERKASIE, Â PAÂ 18944 _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of 2. Transaction Date 2A. Deemed 3. 4. Securities 5. Amount of 6. 7. Nature of (Month/Day/Year) Execution Date, if Security Transaction Acquired (A) or Securities Ownership Indirect (Instr. 3) Code Disposed of (D) Beneficially Form: Beneficial (Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5) Owned at end of Direct (D) Ownership Issuer's Fiscal or Indirect (Instr. 4) (A) Year (I) or (Instr. 3 and 4) (Instr. 4) Amount (D) Price 82,974.3636 Â Â Â Â Â Â D Â COMMON (1)(2)Trustee -Deferred

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

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COMMON

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Persons who respond to the collection of information contained in this form are not required to respond unless

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9,370 (3)

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SEC 2270 (9-02)

Salary Savings Plan

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the form displays a currently valid OMB control number.

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)				7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shar
STOCK OPTIONS	\$ 28.2667	Â	Â	Â	Â	Â	12/31/2005	12/31/2013	COMMON	20,24
STOCK OPTIONS	\$ 24.27	Â	Â	Â	Â	Â	12/30/2007	12/30/2015	COMMON	15,00
STOCK OPTIONS	\$ 21.11	Â	Â	Â	Â	Â	12/31/2009	12/31/2017	COMMON	27,00
STOCK OPTIONS	\$ 32.14	Â	Â	Â	Â	Â	12/31/2009	12/31/2017	COMMON	5,000
STOCK OPTIONS	\$ 22.9	Â	Â	Â	Â	Â	01/31/2010	01/31/2018	COMMON	2,003

Reporting Owners

Reporting Owner Name / Address	Relationships					
•	Director	10% Owner	Officer	Other		
AICHELE WILLIAM S 1401 RICKERT ROAD PERKASIE, PA 18944	ÂX	Â	Director, Chairman, Pres & CEO	Â		

Signatures

Jeffrey M.
Schweitzer

**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).

Reporting Owners 2

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- (1) DOES INCLUDE 3,004.3636 SHARES ACQUIRED ON OR AFTER AUGUST 15, 1996 THROUGH THE DIVIDEND REINVESTMENT PLAN AND EMPLOYEE STOCK PURCHASE PLAN.
- (2) DOES INCLUDE 5,336 SHARES OF RESTRICTED STOCK.
- (3) TRUSTEE'S ALLOCATED PECUNIARY INTEREST IN THE SHARES HELD IN THE DEFERRED SALARY SAVINGS PLAN.
- (4) DOES INCLUDE 3,333 SHARES OF RESTRICTED STOCK.
- (5) DOES INCLUDE 1,602 SHARES OF RESTRICTED STOCK.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.