AICHELE WILLIAM S

Form 5

February 13, 2007

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 **OWNERSHIP OF SECURITIES** 5 obligations 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

	ldress of Reporting P	erson * 2. Issuer l	2. Issuer Name and Ticker or Trading Symbol UNIVEST CORP OF PENNSYLVANIA [UVSP]				5. Relationship of Reporting Person(s) to				
AICHELE W	VILLIAM S	UNIVE					Issuer (Check all applicable)				
(Last)	(First) (M	(Month/D	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2006								
1401 RICKERT ROAD Director, Chairman, Pres & CEO											
	(Street)		4. If Amendment, Date Original				6. Individual or Joint/Group Reporting				
		Filed(Mor	Filed(Month/Day/Year)				(check applicable line)				
PERKASIE, PA 18944 _X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person											
(City)	(State) (Z	Zip) Tabl	e I - Non-Deri	vative Sec	uritie	s Acquire	ed, Disposed of, o	r Beneficially	Owned		
1.Title of Security (Instr. 3)	curity (Month/Day/Year) Executi		3. 4. Securities Acquir Transaction (A) or Disposed of (Instr. 3, 4 and 5) (Instr. 8) (A) or Amount (D) Pr			d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON	12/29/2006	12/29/2006	G	500	D D	\$	66,636.5209	D	Â		
COMMON	12/2/12000	12/2//2000	J	200		30.48	<u>(1)</u>	D	71		
COMMON	Â	Â	Â	Â	Â	Â	66,787.8004 (2)	D	Â		
COMMON	Â	Â	Â	Â	Â	Â	7,724 <u>(3)</u>	I	Trustee - Deferred Salary		

Savings Plan

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

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 2270 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)					7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amoun or Number of Share
STOCK OPTIONS	\$ 18.8533	Â	Â	Â	Â	Â	12/31/2003	12/31/2007	COMMON	25,31
STOCK OPTIONS	\$ 21.616	Â	Â	Â	Â	Â	12/31/2004	12/31/2008	COMMON	26,24
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	12/31/2015	COMMON	15,00

Reporting Owners

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

Signatures

Wallace H.
Bieler

**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) DOES INCLUDE 1,084.5209 SHARES ACQUIRED ON OR AFTER AUGUST 15, 1996 THROUGH THE DIVIDEND REINVESTMENT PLAN AND EMPLOYEE STOCK PURCHASE PLAN.

Reporting Owners 2

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- (2) DOES INCLUDE 1,235.8004 SHARES ACQUIRED ON OR AFTER AUGUST 15, 1996 THROUGH THE DIVIDEND REINVESTMENT PLAN AND EMPLOYEE STOCK PURCHASE PLAN.
- (3) TRUSTEE'S ALLOCATED PECUNIARY INTEREST IN THE SHARES HELD IN THE DEFERRED SALARY SAVINGS PLAN.

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.