Edgar Filing: UNIVEST CORP OF PENNSYLVANIA - Form 4

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UNIVEST C Form 4 August 11, 2	CORP OF PENNS 2011	SYLVAN	ΊΑ										
FORM 4Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).(Print or Type Responses)									N OMB Number: Expires: Estimated burden he response	Number: 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5			
1. Name and Address of Reporting Person <u>*</u> SCHLOSSER MARK A			2. Issuer Name and Ticker or Trading Symbol UNIVEST CORP OF PENNSYLVANIA [UVSP]				ng	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First) (N	Middle)	 Date of Earliest Transaction (Month/Day/Year) 					X_ Director 10% Owner Officer (give title Other (specify					
2135 KEIP	ER ROAD		08/10/2	-				below) below)					
			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)		(Zip)	Tabl	le I - Non-F)erivative	Secu	rities A <i>c</i>	Person cquired, Disposed	of. or Benefic	ially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	ned n Date, if	3. Transactic Code (Instr. 8)					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Common	08/10/2011	08/16/2	011	Р	500	А	\$ 13.5	12,500	I	Co-Trustee - Mark A. Schlosser Trust			
Common								12,500	Ι	Co-Trustee - Mark A. Schlosser Trust			
Common								8,433	Ι	Quarta Trust			
Common								843	Ι	Spouse			

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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.

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. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						· · · · •	Date				
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SCHLOSSER MARK A 2135 KEIPER ROAD QUAKERTOWN, PA 18951	Х							
Signatures								
Jeffrey M. Schweitzer 08/	11/2011							

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.