

PARKER HANNIFIN CORP
 Form 3
 September 11, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person * Â Saulnier Charly (Last) (First) (Middle)	2. Date of Event Requiring Statement (Month/Day/Year) 09/01/2008	3. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH]	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP & Pres-Eur, Mid E, Afr Gr	5. If Amendment, Date Original Filed(Month/Day/Year)
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PARKER-HANNIFIN FRANCE
 SAS,Â 142, RUE DE LA
 FORET

(Street)

74130 CONAMINE SUR AVE,
 FRANCEÂ

(City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title Amount or Number of	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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				Shares		or Indirect (1) (Instr. 5)	
Option to Buy	Â (1)	08/12/2013	Common Stock	8,250	\$ 31.5267	D	Â
Option to Buy	Â (2)	08/10/2014	Common Stock	6,000	\$ 36.26	D	Â
Stock Appreciation Right	Â (3)	08/09/2015	Common Stock	7,800	\$ 43.7667	D	Â
Stock Appreciation Right	Â (4)	08/15/2016	Common Stock	8,100	\$ 49.7534	D	Â
Stock Appreciation Right	Â (5)	08/14/2017	Common Stock	8,235	\$ 60.9334	D	Â
Stock Appreciation Right	Â (6)	08/12/2018	Common Stock	13,050	\$ 65.34	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Saulnier Charly PARKER-HANNIFIN FRANCE SAS 142, RUE DE LA FORET 74130 CONAMINE SUR AVE, FRANCEÂ	Â	Â	Â VP & Pres-Eur, Mid E, Afr Gr	Â

Signatures

Joseph R. Leonti,
Attorney-in-Fat 09/11/2008

__Signature of Reporting Person

Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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) The option vested in two equal installments on 8/13/2004 and 8/13/2005.
- (2) The option vested in two equal installments on 8/11/2005 and 8/11/2006.
- (3) The SAR vested in three equal installments on 8/10/2006, 8/10/2007 and 8/10/2008.
- (4) The SAR vests in three equal installments on 8/16/2007, 8/16/2008 and 8/16/2009.
- (5) The SAR vests in three equal installments on 8/15/2008, 8/15/2009 and 8/15/2010.
- (6) The SAR vests in three equal installments on 8/13/2009, 8/13/2010 and 8/13/2011.

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.