FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person * WASHKEWICZ DONALD E					<u>P</u>	2. Issuer Name and Ticker or Trading Symbol PARKER HANNIFIN CORP [PH]									tionship of R all applicabl Director		g Person(Person(s) to Issuer		
(Last) (First) (Middle) PARKER-HANNIFIN CORPORATION						3. Date of Earliest Transaction (Month/Day/Year) 01/11/2006									X Officer (give title below) Chairman and				(specify)	
6035 PARKLAND BOULEVARD (Street)					_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
CLEVELAN	ND OH		44124-414	1											Form filed	i by ivio	re man C	пе кероп	ing Person	
(City)	(Sta		(Zip)																	
			Table I - N			_				d, Dis	_	-						[.		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date		n Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			S E F	5. Amount of Securities Beneficially O Following Rep	oorted	6. Owne Form: D or Indire (Instr. 4)	irect (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)							
Common Sto	ock														23,525.4	-27]	1	Parker Retirement Savings Plan	
Common Sto	ock														985(1)		1	[Ann Washkewicz Revocable Frust	
Common Sto	ock			01/	/11/200)6			M		7,723(2)	A	\$35.93	75	89,865	5	Ι)		
Common Stock				01/	01/11/2006				F		2,470	D \$74.07		7	87,395		D			
Common Stock			01/11/2006)6	G V 5,253 D \$0 82,14		82,142	2 D)									
Common Stock			01/11/2006		06			G	V	5,253	A	\$0		5,253		I		Pamela Washkewicz Revocable Frust		
			Table II								osed of, o			Owne	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Daif any (Month/Day/	ate,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Securities Derivative 3 and 4)	Underlying	ing Derivative		9. Num deriva Securi Benefi Owned Follow Report	tive ties cially d ing	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amour Numbe Shares	er of			action(s)			
Option to Buy	\$35.9375	01/11/2006			M	15,000		15,000(2	(3)		08/08/2010	Common Stock 15		00(2)	\$0 ⁽⁴⁾	56,260		D		
Option to Buy	\$73.46	01/11/2006			A		7,277		01/11/2007		08/08/2010	Common Stock	7,2	77	\$0 ⁽⁵⁾	7,277		D		

Explanation of Responses:

- 1. Reflects Mr. Washkewicz's proportionate interest.
- 2. "Pyramid" stock option exercise resulting in net acquisition of 7,723 shares.
- 3. The option vested in two equal installments on 8/9/2001 and 8/9/2002.
- 4. Granted under the Corporation's 1993 Stock Incentive Program in a transaction exempt under Rule 16b-3.
- 5. Granted under the Corporation's 2003 Stock Incentive Plan in a transaction exempt under Rule 16b-3.

Remarks:

Rhoda M. Minichillo, Attorney-in-Fact 01/12/2006

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.