## Edgar Filing: CROCKER CHARLES - Form 4

CROCKER	CHARLES						
Form 4							
December 1							
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSIO					PPROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549					OMB Number:	3235-0287	
Check t	his box	v	asimigton, D.C. 20549			January 31,	
if no lor		MENT OF CHA	ANGES IN BENEFICIAL O	WNERSHIP OF	Expires:	2005	
subject Section	10		SECURITIES		Estimated		
Form 4					burden hou response	•	
Form 5	Filed pu	rsuant to Sectior	16(a) of the Securities Excha	nge Act of 1934,			
obligati may cor		(a) of the Public	Utility Holding Company Act	t of 1935 or Section	n		
See Inst		30(h) of the	Investment Company Act of	1940			
1(b).							
	D \						
(Print or Type	Responses)						
1 Name and	Address of Reporting	Person <sup>*</sup> 2 L		5. Relationship of	Reporting Per	rson(s) to	
CROCKER CHARLES Symbo							
			NKLIN RESOURCES INC				
		[BEN		(Chec	k all applicabl	e)	
(Last)	(First) (	-	of Earliest Transaction	_X_ Director	109	% Owner	
			Conth/Day/Year)		e title Other (specify		
C/O BEI T	ECHNOLOGIES		//2005	below)	below)		
INC., ONE	E POST STREET,	SUITE					
2500							
	(Street)	4. If A	mendment, Date Original	6. Individual or Joint/Group Filing(Check			
			Month/Day/Year)	Applicable Line)			
				_X_ Form filed by C Form filed by M			
SAN FRAI	NCISCO, CA 941	.04		Person		epotting	
(City)	(State)	(Zip) T	able I - Non-Derivative Securities A	Acquired, Disposed of	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date		3. 4. Securities		. Ownership	7. Nature of	
Security	(Month/Day/Year)				Form: Direct	Indirect	
(Instr. 3)		any	Code Disposed of (D)	Beneficially (D	D) or Indirect Ben		
		(Month/Day/Year	(Instr. 8) (Instr. 3, 4 and 5)		I) Instr. 4)	Ownership (Instr. 4)	
				Reported	uisu. + <i>j</i>	(1130.4)	
			(A) or	Transaction(s)			
			Code V Amount (D) Price	(Instr. 3 and 4)			
D							
Reminder: Re	port on a separate line	e for each class of s	ecurities 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)

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Date (Month/Day/Year	-	7. Title and An Underlying Se (Instr. 3 and 4)	eci
				Code V	(A) (D)	Date Exercisable	Expiration Date		Ai Ni Sł
Deferred Director's Fees (FRI)	<u>(1)</u>	12/15/2005		A	7.6892	02/12/2014(2)	02/12/2014 <u>(2)</u>	Common Stock, par value \$.10	7
Deferred Director's Fees (FRI)	<u>(1)</u>	12/16/2005		A	15.4623	02/12/2014(2)	02/12/2014 <u>(2)</u>	Common Stock, par value \$.10	1

## **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
CROCKER CHARLES C/O BEI TECHNOLOGIES, INC. ONE POST STREET, SUITE 2500 SAN FRANCISCO, CA 94104	Х				
Signatures					
By: BARBARA J. GREEN, ATTORNEY-IN-FACT			12/19/2005		
**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) Not Applicable

Represents a hypothetical investment account calculation of deferred Franklin Resources, Inc.'s director's fees based upon the
 (2) performance of Issuer's stock (including reinvested dividends) payable in cash on the earlier of Mr. Crocker's ceasing to be a director or February 12, 2014.

(3) Represents the equivalent amount of Franklin Resources, Inc.'s common stock under the director's deferred compensation arrangement.

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.