## Edgar Filing: SONOCO PRODUCTS CO - Form 4

SONOCO F Form 4 August 04,	PRODUCTS CO 2008											
	ЛЛ								OMB A	PPROVAL		
FORM	UNITED	STATES		RITIES A shington			NGE	COMMISSIO	N OMB Number:	3235-0287	7	
Check this box								Expires:	January 31,			
if no longer subject to Section 16. Form 4 or								Estimated burden hou response	urs per			
Form 5	Filed put	rsuant to S	ection	16(a) of th	ne Securi	ties E	Exchar	nge Act of 1934,	•			
obligatio may cor <i>See</i> Inst 1(b).	ntinue. Section 170			Itility Hol nvestment	•	-	•	of 1935 or Secti 940	on			
(Print or Type	Responses)											
Saunders Barry L Symb				2. Issuer Name <b>and</b> Ticker or Trading mbol ONOCO PRODUCTS CO [SON]				5. Relationship of Reporting Person(s) to Issuer				
	<b></b>						(Check all applicable)					
(Last)	(First) (	(Middle)	3. Date of Earliest Transaction					D	100			
ONE NOR	TH SECOND ST	REET	(Month/) 07/31/2	Day/Year) 2008				Director X Officer (gi below) VP, Cor		% Owner her (specify CAO		
(Street) 4. If				. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
Filed(Mo				ed(Month/Day/Year) Applicabl _X_Form				Applicable Line) _X_ Form filed by				
HARTSVI	LLE, SC 29550							Person	whole than one it	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Secu	rities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Date, Instr. 3) any		Date, if	3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or		) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code V	Amount	(D)	Price	(				
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned di	rectly o	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. Number of	6. Date Exercisable and	7. Title and Amount of	8. Pr
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	Deri
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	Secu

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(Instr. 3)	Price of Derivative Security		(Month	/Day/Year)	(Instr. 8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Inst
					Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	07/31/2008			A	26.661		(2)	(2)	Common Stock	26.661	\$ 3
Reporting Owners												
Reporti	ng Owner Name			Relat								
<b>Reporting Owner Name / Address</b>			Director	10% Owner	Officer				Other			
Saunders Barry L ONE NORTH SECOND STREET HARTSVILLE, SC 29550					VP, C	Corp Cont						
Signa	tures											
By: George S. Hartley - Power of Attorney For: Barry L. Saunders					•	08	8/04/	/2008				

\*\*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) Each share of phantom stock is the economic equivalent of one share of Sonoco Products Company common stock.
- (2) The reported phantom stock units were acquired under Sonoco Products Company's excess benefit plan and will be settled upon the reporting person's retirement or other termination of service.
- (3) Includes 6.004 shares acquired on June 10, 2008 dividend payment on Sonoco Products Company's excess benefit plan.

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.