## Edgar Filing: HUPFER CHARLES J - Form 4

HUPFER CH Form 4 April 02, 200												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									Number:	3235-0287		
Check thi		Shington	, D.C. 20	Expires:	January 31,							
if no longer subject to Section 16. Form 4 or								WNERSHIP OF	Estimated burden hou response	urs per		
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,												
may conti	obligations may continue.Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b)30(h) of the Investment Company Act of 1940											
(Print or Type R	Responses)											
ILLIDEED CITADI EC I			2. Issue Symbol	2. Issuer Name <b>and</b> Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer				
	SONOCO PRODUCTS CO [SON]					(Check all applicable)						
(Last)	(First)	(Middle)	3. Date of Earliest Transaction					(ene	ok un uppheuoi	)		
ONE NORT		onth/Day/Year) /30/2007				Director 10% Owner X_ Officer (give title Other (specify below) below) SENIOR VICE PRESIDENT & CFO						
	(Street)	4. If Am	. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check						
HARTSVIL	onth/Day/Yea	r)		One Reporting Person fore than One Reporting								
(City)	(State)	(Zip)						Person				
	× ,	· •		le I - Non-l			rities A	cquired, Disposed o		-		
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or			)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code V Amount (D) Price					e				
Reminder: Rep	ort on a separate lin	e for each cl	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/I	Day/Year)	(Instr. 8)	or D (D)	uired Dispose tr. 3, 4 5)	ed of					(Inst
					Code V	/ (.	A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	03/30/2007			А	35.	346		(2)	(2)	Common Stock	35.346	\$ 3
Reporting Owners													
Reporting Owner Name / Address			Relationships Director 10% Owner Officer Other										
ONE NOF	CHARLES J RTH SECONE ILLE, SC 295:	) STREET		070 Owner		SENIOR VICE PRESIDENT & CFO							
Signat	tures												
By: George S. Hartley - Power of Attorney For: Charles J. Hupfer							0	4/02	/2007				
<u>**</u> 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.

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.