

SMITH CLAIBOURNE D  
Form 4  
December 14, 2007

**FORM 4** UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2005  
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 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 \*  
SMITH CLAIBOURNE D

2. Issuer Name and Ticker or Trading Symbol  
WSFS FINANCIAL CORP [WSFS]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)  
12/12/2007

Director  10% Owner  
 Officer (give title below)  Other (specify below)

C/O WSFS FINANCIAL CORP, 500 DELAWARE AVENUE

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

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

WILMINGTON, DE 19801

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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 Beneficial Ownership (Instr. 4)
				(A) or (D)	Code V Amount (D) Price		

Reminder: Report on a separate line for each class of securities 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.**

SEC 1474 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any	4. Transaction Code	5. Number of Derivative Securities	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)
---------------------------------	---------------------------	--------------------------------------	-----------------------------------	---------------------	------------------------------------	--	---

Edgar Filing: SMITH CLAIBOURNE D - Form 4

(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy)	\$ 11.421								12/21/2001	12/21/2010	Common Stock	1,000
Stock Options (Right to Buy)	\$ 17.2								12/19/2002	12/19/2011	Common Stock	1,000
Stock Options (Right to Buy)	\$ 33.4								12/19/2003	12/19/2012	Common Stock	1,500
Stock Options (Right to Buy)	\$ 43.7								12/18/2004	12/18/2013	Common Stock	1,500
Stock Options (Right to Buy)	\$ 58.75								12/16/2005	12/16/2014	Common Stock	1,000
Stock Options (Right to Buy)	\$ 63.67								12/15/2006	12/15/2010	Common Stock	1,400
Stock Options (Right to Buy)	\$ 65.2								12/13/2007	12/13/2011	Common Stock	1,223
Stock Options (Right to Buy)	\$ 53.39	12/12/2007			A		1,110		12/12/2008	12/12/2012	Common Stock	1,110

## Reporting Owners

Reporting Owner Name / Address

Relationships

Edgar Filing: SMITH CLAIBOURNE D - Form 4

Director 10% Owner Officer Other

SMITH CLAIBOURNE D  
C/O WSFS FINANCIAL CORP X  
500 DELAWARE AVENUE  
WILMINGTON, DE 19801

## Signatures

/s/Clairbourne D. Smith By: Robert F. Mack, Power of  
Attorney

12/14/2007

\_\_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).

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.