## Edgar Filing: GLATFELTER P H CO - Form 4

GLATFELT Form 4	ER P H CO									
November 02	2, 2006									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB AF	OMB APPROVAL		
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549							OMB Number:	3235-0287		
subject to								Expires:	January 31,	
				ES IN BENEFICIAL OWNERSHIP OF			Estimated a	2005 verage		
				SECURITIES				burden hours per		
Form 4 of Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,						response	0.5		
obligation	ns Section 17(s	a) of the Public Ut				•		n		
may cont <i>See</i> Instru	inue.	30(h) of the In	•	•	· ·					
1(b).	etton			1	2					
(Print or Type F	Responses)									
1 Name and A	ddress of Reporting I	Person <sup>*</sup> 2 Lagua	Nome and	Tieker or	Tradia	20	5. Relationship of	Reporting Pers	on(s) to	
DAHLBER	Name <b>and</b> Ticker or Trading			iig	Issuer					
DAHLBERG KATHLEEN Symbol Issuer GLATFELTER P H CO [GLT]							11 1: 1: 1:			
(Last)	(First) (M	fiddle) 3. Date of	Earliest Tr	ansaction			(Chec.	k all applicable	)	
(Month/D						_X_ Director10% Owner				
96 SOUTH GEORGE 11/01/2			006			Officer (give title Other (specify below) below)				
STREET, SUITE 500				5000.)						
(Street) 4. If Amenda Filed(Month/			ndment, Date Original				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
			th/Day/Year	h/Day/Year)						
					ore than One Reporting					
							Person			
(City)	(State)	(Zip) Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date		3.	4. Securi			5. Amount of	6. Ownership		
(Instr. 3) any (			Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
			(Instr. 8)			5)	Owned	Indirect (I)	Ownership	
							Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common				mount						
Stock, Par	11/01/2006	11/01/2006	A <u>(1)</u>	622	А	\$ 14.48	5,064	D		
Value \$.01						17.70				

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Addre	55	Relationships						
	Director	10% Owner	Officer	Other				
DAHLBERG KATHLEEN 96 SOUTH GEORGE STREE SUITE 500 YORK, PA 17401	ET X							
Signatures								
Suzanne 1 DeMars	1/02/2006							
<u>**</u> Signature of	Date							

Reporting Person

## 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) As part of the Director's compensation, each Director receives a retainer of \$13,500.00 semi-annually, 1/3 is paid in cash and 2/3 in GLT stock. These shares represent the stock portion of this retainer.

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. html>