Edgar Filing: RAMSDELL JAMES D - Form 4/A

RAMSDELL	L JAMES D										
Form 4/A											
April 09, 20	09										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										PROVAL	
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check th									Expires:	January 31,	
if no longer subject to STATEMENT OF CHAN				GES IN BENEFICIAL OWNERSHIP					Estimated a	2005 verage	
	Section 16. S				SECURITIES					burden hours per	
Form 4 c Form 5								A (C1024	response	0.5	
obligatio	-						-				
may cont	tinue. Section 1			vestment	•	-	•	1935 or Sectior	1		
See Instr 1(b).	uction	50(II)		ivestinent	Compa	IY AC	1 01 1940	0			
1(0).											
(Print or Type I	Responses)										
						-	f Reporting Person(s) to				
RAMSDELL JAMES D Symbol NATIO				ol				Issuer			
				NAL FU	EL GAS	CO	[NFG]	(Check all applicable)			
(Last) (First) (Middle) 3. Date of				e of Earliest Transaction							
				nth/Day/Year)				Director		Owner	
6363 MAIN STREET 12/03/2			008				XOfficer (give titleOther (specify below) below)				
								Sr. V	/ice President		
(Street) 4. If Ame			endment, Date Original				6. Individual or Joint/Group Filing(Check				
				nth/Day/Year	:)			Applicable Line)			
12/04/2008 _X_Form filed by O Form filed by M								one Reporting Person fore than One Reporting			
WILLIAMS	SVILLE, NY 14	-221						Person		porung	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3.	4. Securi		•	5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year		n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					Securities Beneficially	Ownership Form: Direct	Indirect Panaficial	
(Instr. 3)		any (Month/Day/Year)			(11150.5,	4 anu	5)	Owned	Form: Direct Benef (D) or Owne	Ownership	
		× ·	, , , , , , , , , , , , , , , , , , ,	(Instr. 8)				Following	Indirect (I)	(Instr. 4)	
						(A)		Reported	(Instr. 4)		
						or		Transaction(s) (Instr. 3 and 4)			
Common				Code V		(D)	Price	(
Common Stock	12/03/2008			F	3,346 (1)	D	\$ 29.685	40,634	D		
SIUCK					(-)		29.003				

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)	4. Transactic Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
RAMSDELL JAMES D 6363 MAIN STREET WILLIAMSVILLE, NY 14221			Sr. Vice President					
Signatures								
James R. Peterson, Attorney in Fact		04/09/2009						
<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) This corrects the erroneous entry made in this column in the Form 4 filed December 4, 2008. Also corrects balance of Directly Held shares reported on Form 4 filed December 23, 2008.

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.