### Edgar Filing: LAWTON EDGAR H III - Form 4

LAWTON	EDGAR H III										
Form 4											
December	14, 2009										
FOR			CECU	DITIEC			UCE		NT.	PPROVAL	
	UNITED	STATES		shington			NGE	COMMISSIO	N OMB Number:	3235-0287	
Check the check	this box						Expires:	January 31,			
subject		MENT OF	F CHANGES IN BENEFICIAL OV					WNERSHIP OI	F Estimated	Estimated average	
Section				SECUI	RITIES				burden hou	urs per	
Form 4 Form 5		rement to S	action	16(n) of the	na Saguri	tion Ex	zohor	nge Act of 1934	response	. 0.5	
obligati	ions Section 17							of 1935 or Sect			
may co	ntinue. Section 170 truction			nvestmen	•	- ·			lon		
1(b).	liuction	~ /			1	5					
(Print or Type	e Responses)										
1. Name and	Address of Reporting	Person <sup>*</sup>	2. Issue	er Name <b>an</b>	<b>d</b> Ticker of	Tradin	g	5. Relationship	of Reporting Per	rson(s) to	
LAWTON	EDGAR H III		Symbol				0	Issuer			
			SONOCO PRODUCTS CO [SON]				ON]	(Check all applicable)			
(Last)	(First) (	(Middle)	3. Date of Earliest Transaction					(Ch	cek an applicabl		
			(Month/Day/Year)					_X_Director10% Owner			
ONE NOR	TH SECOND ST	REET	12/10/2	2009				Officer (gi below)	ve title Oth below)	ner (specify	
(Street)			4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	ur)			Applicable Line)	y One Reporting P	Parson	
HARTSVI	LLE, SC 29550								More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-J	Derivative	Securi	ties A	cquired, Disposed	of, or Beneficia	ally Owned	
1.Title of	2. Transaction Date			3.	4. Securit			5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution	Date, if	Transactic Code	-			Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial	
(1130.3)		any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)			)	Owned	(I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	Amount	or (D) I	Drica	(Instr. 3 and 4)			
				Coue v	Amount	(D) I	ince				
Reminder: Re	eport on a separate line	e for each cla	ass of sec	urities bene	-		-	-			
								pond to the colle		SEC 1474	
					inforr	nation	cont	ained in this form	n are not	(9-02)	

required to respond to the collection of sEC (9) 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	6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof	Expiration Date	Underlying Securities	Derivati
Security	or Exercise		any	Code	Derivative	(Month/Day/Year)	(Instr. 3 and 4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securities			(Instr. 5

#### Edgar Filing: LAWTON EDGAR H III - Form 4

	Derivative Security			Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)						
			Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	<u>(1)</u>	12/10/2009	А	77.	1	(2)	(2)	Common Stock	77.1	\$ 29.5

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh			
	Director	10% Owner	Officer	Other	
LAWTON EDGAR H III ONE NORTH SECOND STREET HARTSVILLE, SC 29550	Х				
Signatures					
By: Power Of Attorney-George S. H Lawton, III	12/14/2009				

<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) Each share of phantom stock is the economic equivalent of one share of Sonoco Products Company common stock.
- (2) Acquired on quarterly dividend on Sonoco Products Company's directors' deferred compensation 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.