FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-02								

287 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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* SANDERS MANCIL J					2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) ONE NO	Last) (First) (Middle) ONE NORTH SECOND STREET					3. Date of Earliest Transaction (Month/Day/Year) 03/10/2008						X Officer (give title below) Other (specify below) Executive VP - Industrial				
(Street) HARTSV (City)	HARTSVILLE SC 29550					4. If Amendment, Date of Original Filed (Month/Day/Year)						Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - Non-De	erivativ	e Sec	curities	s Ac	quired, D	sposed o	of, or Be	neficial	ly Owned	i			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				е	Execution Date,			Code (Instr. 5)				Benefici	es F ally (I Following (I	Ownership orm: Direct O) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			(111501.4)	
	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/Ye	e, Trans Code	4. Transaction Code (Instr. 8)		nber ative ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Dividend Equivalents on Restricted Stock Units	(1)	03/10/2008		A		81.9		(2)	(2)	Common Stock	81.9	\$26.46	1,753.5	D		
Phantom Stock Units	(1)	03/10/2008		A		34.62		(3)	(3)	Common Stock	34.62	\$26.46	14,519.568	2 D		
Phantom Stock Units	(1)	03/10/2008		A		103.3		(4)	(4)	Common	103.3	\$26.46	14,622.868	2 D		

Explanation of Responses:

- 1. Each share of phantom stock is the economic equivalent of one share of Sonoco Products Company common stock.
- 2. Acquired on quarterly dividend. The rights become exercisable proportionately with the options to which they relate.
- 3. Acquired on quarterly dividend on Sonoco Products Company's excess benefit plan and will be settled upon the reporting person's retirement or other termination of service.
- 4. Acquired on quarterly dividend on Sonoco Products Company's deferred long term incentive plan and are to be settled upon the reporting person's retirement or other termination of service.

By: George S. Hartley - Power 03/12/2008 of Attorney For: Mancil J. Sanders

Date

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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.

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 Number.