FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

wasiiiigtoii,	D.C.	20549	

OMB APPROVAL 3235-0287 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)

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

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1. Name and Address of Reporting Person [*] <u>SMITH EDWARD L</u>					2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [SON]							Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) ONE NORTH SECOND STREET					3. Date of Earliest Transaction (Month/Day/Year) 12/10/2007							helow)		Other below)		
(Street) HARTSVILLE SC 29550				4.	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				
(City)	(5	tate)	(Zip)									1 61301	!			
		Tab	le I - Non-D	erivativ	re Se	curities	Ac	quired, Di	sposed o	of, or Bei	neficia	lly Owned				
Date			Transactio te onth/Day/Y	Execution Date,		3. Transaction Code (Instr. 3, 4) 5) 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)				Beneficia Owned F	es Fally (I Following (I	i. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
						Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)			
		٦	Table II - Dei e.ز)					uired, Dis , options,				/ Owned				
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3. Transaction Execution D if any (Month/Day/			Code	Transaction of Code (Instr. Deriva		ive ies ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirect (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)	12/10/2007		A		113		(2)	(2)	Common Stock	113	\$34.45	4,090.1	D		
Phantom Stock Units	(1)	12/10/2007		A		27.327		(3)	(3)	Common Stock	27.327	\$34.45	30,067.542	28 D		
Phantom Stock Units	(1)	12/10/2007		A		73.2		(4)	(4)	Common Stock	73.2	\$34.45	30,140.742	28 D		
Phantom Stock Units	(1)	12/10/2007		A		136.1		(5)	(5)	Common	136.1	\$34.45	30,276.842	28 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.
- 5. Acquired on quarterly dividend on Sonoco Products Company's officers' deferred compensation plan and will be settled upon the reporting person's retirement or other termination of service.

By: George S. Hartley - Power of Attorney For: Edward L. 12/12/2007 **Smith**

** Signature of Reporting Person

Date

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.