Edgar Filing: DEBENEDICTIS NICHOLAS - Form 4

| | STATES SECU | URITIES AND EX ashington, D.C. 20 | | COMMISSION | OMB AF OMB Number: | PPROVAL 3235-0287 January 31, |
|--|---|---|---|--|--|-------------------------------------|
| Section 16. Form 4 or Form 5 Filed pu | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 20(b) of the Investment Company Act of 1940 | | | | | |
| (Print or Type Responses) 1. Name and Address of Reporting DEBENEDICTIS NICHOL | aer Name and Ticker or l | 5. Relationship of Reporting Person(s) to Issuer | | | | |
| (Last) (First) 96 SOUTH GEORGE STREET, SUITE 500 | (Middle) 3. Date | FELTER P H CO [of Earliest Transaction /Day/Year) /2008 | (Check all applicable) <u>X</u> Director Officer (give title <u>10%</u> Owner Director below) Other (specify below) | | | |
| (Street) YORK, PA 17401 | | nendment, Date Origina Ionth/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) (State) | (Zip) Ta | ble I - Non-Derivative | Securities Acq | uired, Disposed of | , or Beneficial | ly Owned |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | f Transaction(A) or D Code (Instr. 3, | 4 and 5) (A) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | |
| Common Stock, Par 04/30/2008 Value \$.01 | | Code V Amount A (1) 1,326 | or (D) Price A \$ 14.59 | (Instr. 3 and 4) 5,603 | D | |
| Common Stock, Par 05/01/2008 Value \$.01 | | A <u>(2)</u> 805 | A \$ 14.49 | 6,408 | D | |

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

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(9-02)

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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. Transacti Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|---------------------------------------|--|--|--------------------|---|-------------------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Phantom Stock | \$ 14.49 | 05/01/2008 | | A | 31.589 | <u>(3)</u> | (3) | Common Stock, Par Value \$.01 | 31.589 |
| Restricted | \$ 0 | 05/01/2008 | | A | 2,070 | 04/27/2011 | 04/27/2011 | Common Stock, Par Value \$.01 | 2,070 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| DEBENEDICTIS NICHOLAS 96 SOUTH GEORGE STREET SUITE 500 YORK, PA 17401 | Х | | | | | |
| Signatures | | | | | | |
| Suzanne 05/0 DeMars | 5/2008 | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (3) These phantom stock units were accrued under the P. H. Glatfelter Company Deferred Compensation Plan for Directors on quarterly dividend payments of \$.09 and will be settled in cash following termination of the reporting person's service as a Director.
- (1) These shares represent the 2005 RSU grant that lapsed on April 30, 2008.
- (2) The Directors receive a retainer of 17,500 semi-annually. 2/3 is paid in stock. These shares represent the 2/3 that is paid in stock.

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.

**Signature of

Reporting Person