FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549	Washington.	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	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

1. Name and Address of Reporting Person*  SANDERS MANCIL J  (Last) (First) (Middle)  ONE NORTH SECOND STREET						2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [ SON ]  3. Date of Earliest Transaction (Month/Day/Year) 09/10/2003							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below) below)  VP - IPD NORTH AMERICA				
(Street) HARTSV			29550		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc Line)	<b>,</b>					
(City)	(St	ate)	(Zip)														
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)  2. Tran Date (Month				2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transactio Code (Inst	n Disposed	ties Acquire d Of (D) (Insi	d (A) or r. 3, 4 and 5)	5. Amount Securities Beneficial Owned Fo Reported	ly	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code V	Amount	(A) or (D)	Price	Transactio				
	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 Da if any (Month/Day/	ate, 1	4. Transa Code (1 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Figure 1. The Exercisable and Expiration Date (Month/Day/Year)  7. Title and Figure 1. The Exercisable and Expiration Date (Month/Day/Year)  7. Title and Figure 1. The Exercisable and Expiration Date (Month/Day/Year)  7. Title and Figure 1. The Exercisable and Expiration Date (Month/Day/Year)  7. Title and Figure 1. The Exercisable and Expiration Date (Month/Day/Year)  8. The Exercisable and Exercisable and Expiration Date (Month/Day/Year)  9. The Exercisable and Exercisable		es Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e O	10. Ownership 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		Transacti (Instr. 4)	on(s)		
Dividend Equivalent Rights	(1)	09/10/2003			A		10.3778		(2)	(2)	Common Stock	10.3778	\$23.06	99.017	73	D	
Dividend Equivalents on Restricted Stock Units	(1)	09/10/2003			A		99.1		(3)	(3)	Common Stock	99.1	\$23.06	983.9	9	D	

## Explanation of Responses:

- 2. Acquired on quarterly dividend on the Sonoco Products Company excess benefit plan and are to be settled in cash upon the reporting person's retirement or other termination of service.
- 3. Acquired on quarterly dividend. The rights become exercisable proportionately with the options to which they relate.

By: Vicki B. Arthur - Power of Attorney For: Mancil J. Sanders

09/11/2003

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.