FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL |         |  |  |  |  |  |  |
|--------------|---------|--|--|--|--|--|--|
| OMB Number:  | 3235-02 |  |  |  |  |  |  |

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0.5

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

|  |  |                                  |                                  |                  |  |        |                            |  |                    |  |   |   | <u> </u>  |  |   |  |
|--|--|----------------------------------|----------------------------------|------------------|--|--------|----------------------------|--|--------------------|--|---|---|---|--|---|--|
| 1. Name and Address of Reporting Person*  YOUNG DONA D   |  |                                  |                                  |                  | 2. Issuer Name and Ticker or Trading Symbol SONOCO PRODUCTS CO [ SON ] |        |                            |  |                    |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |   |  |   |  |
|  |  |                                  |                                  |                  | [  |        |                            |  |                    |  |   | X Director  | or  | 10% C  | wner                                    |  |
| (Last) (First) (Middle)  |  |                                  |                                  |                  | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2003            |        |                            |  |                    |  |   | Officer below)  | (give title   | Other<br>below   | (specify                                |  |
| (Chroat)   |  |                                  |                                  |                  | 4. If Amendment, Date of Original Filed (Month/Day/Year)               |        |                            |  |                    |  |   | 6. Individual or Joint/Group Filing (Check Applicable Line)             |   |  |   |  |
| (Street)   |  |                                  |                                  |                  |  |        |                            |  |                    |  |   | X Form fi   | led by One I  | Reporting Pers   | on                                      |  |
| (City)   | (St  | ate)                             | (Zip)                            |                  |  |        |                            |  |                    |  |   | Form filed by More than One Reporting Person                            |   |  | orting                                  |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |                                  |                                  |                  |  |        |                            |  |                    |  |   |   |   |  |   |  |
| Date   |  |                                  | Transactio<br>ate<br>Month/Day/\ | Execution Date   |  |        | Code (Instr. 5)            |  |                    | ed (A) or<br>tr. 3, 4 and  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                               | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership            |   |  |
|  |  |                                  |                                  |                  |  | Code V | Amount                     | (A) or<br>(D)  | Price              | Transact<br>(Instr. 3  | ion(s)  |   | (Instr. 4)  |  |   |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |                                  |                                  |                  |  |        |                            |  |                    |  |   |   |   |  |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security            | Date Ex<br>(Month/Day/Year) if a | Execution Date, Tiff any C       | Code             | Transaction<br>Code (Instr.  |        | tive<br>ties<br>red<br>sed | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative Security<br>(Instr. 3 and 4) |   | 8. Price of<br>Derivative<br>Security<br>(Instr. 5)                     | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Beneficial<br>Ownership<br>t (Instr. 4) |  |
|  |  |                                  |                                  | Code             | v  | (A)    | (D)                        | Date<br>Exercisable  | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares                                    |   |   |  |   |  |
| Phantom<br>Stock<br>Units  | 0  | 07/01/2003                       |                                  | A <sup>(1)</sup> |  | 724.9  |                            | 08/08/1988 <sup>(1)</sup>                                      | 08/08/1988         | Common<br>Stock  | 724.9   | \$24.14   | \$14,795.3  | 32 D   |   |  |

## Explanation of Responses:

1. The phantom stock units were accrued under the Sonoco Products Company directors' deferred compensation plan and are to be settled in cash upon the reporting person's retirement.

By: George S. Hartley - Power of Attorney For: Dona Davis Young

\*\* 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.