NORDSON CORP Form 4

January 05, 2005

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Check this box

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 30(h) of the Investment Company Act of 1940

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * GINN WILLIAM D

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

(Middle)

NORDSON CORP [NDSN]

(Check all applicable)

3. Date of Earliest Transaction (Month/Day/Year)

01/04/2005

_X__ Director Officer (give title

below)

10% Owner Other (specify

28601 CLEMENS ROAD

6. Individual or Joint/Group Filing(Check

(Street)

(First)

4. If Amendment, Date Original Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

WESTLAKE, OH 44145

(City)	(State) (Zi	Table	I - Non-De	rivative S	ecurit	ies Acqui	red, Disposed of,	, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)				Securities O Beneficially Found D Following of	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
COMMON SHARES	01/04/2005		S	500	D	\$ 39.46	41,851	D	
COMMON SHARES	01/04/2005		S	100	D	\$ 39.4	41,751	D	
COMMON SHAES	01/04/2005		S	100	D	\$ 39.38	41,651	D	
COMMON SHARES	01/04/2005		S	300	D	\$ 39.37	41,351	D	
COMMON SHARES	01/04/2005		S	750	D	\$ 39.3	40,601	D	
							4,764	I	

COMMON BY
SHARES SPOUSE

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

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 control number.

SEC 1474

(9-02)

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. Transactic Code (Instr. 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 Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Director Stock Option (right to buy)	\$ 27.71	01/04/2005		J	2,500 (1)	05/03/2004	11/03/2013	COMMON SHARES	2,500
Director Stock Option (right to buy)	\$ 37.11	01/04/2005		J	2,500 (1)	05/08/2005	11/08/2014	COMMON SHARES	2,500

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
GINN WILLIAM D						
28601 CLEMENS ROAD	X					
WESTLAKE, OH 44145						
0:						

Signatures

Robert E. Veillette, Attorney-In-Fact 01/05/2005

**Signature of Reporting Person Date

Reporting Owners 2

Edgar Filing: NORDSON CORP - Form 4

Explanation of Responses:

- * 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).
- (1) Reporting person gifted and tansferred the stock option granted to him to his daughter, Anna M. Ginn, pursuant to provisions of the Plan governing award and transfer of non-qualified options in issuer's stock.
- (2) The price of the Derivative Security has been reported in column 2.

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.