Edgar Filing: WAUSAU PAPER CORP. - Form 4

WAUSAU P	PAPER CORP.										
Form 4											
January 09, 2											
FORM 4 UNITED STATES SECURITIES AND						TTA	NCE	COMMISSION	OMB APPROVAL		
-	UNITED	SIAILS		shington,			NGE (OMB Number:	3235-0287	
Check th	is box		vv as	mington,	D.C. 203	-				January 31,	
if no long		IENT O	F CHAN	NGES IN BENEFICIAL OW SECURITIES				NERSHIP OF	Expires:	2005	
subject to Section 1)								Estimated average burden hours per		
Form 4 o									response	0.5	
Form 5	Filed pur	suant to S	Section 1	6(a) of the	e Securiti	es Ez	kchang	ge Act of 1934,	·		
obligation may cont				•	•	• •		f 1935 or Section	n		
See Instru		30(h)	of the In	vestment	Company	/ Act	of 19	40			
1(b).											
(Print or Type I	Responses)										
· • • • •											
	ddress of Reporting	Person [*]	2. Issuer	r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
-			Symbol	Symbol				Issuer			
			WAUSAU PAPER CORP. [WPP]					(Chec	k all applicable	;)	
(Last)	(First) (I	Middle)	3. Date of	Earliest Tr	ansaction			(
				nth/Day/Year)			_X_ Director 10% Owner _X_ Officer (give title Other (specify				
100 PAPER	PLACE		01/07/20	008				below)	below)	er (specify	
								Pres	sident & CEO		
			4. If Ame	If Amendment, Date Original led(Month/Day/Year)				6. Individual or Joint/Group Filing(Check			
			Filed(Mon					Applicable Line)			
							_X_Form filed by One Reporting Person Form filed by More than One Reporting				
MOSINEE,	W1 J++JJ							Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	ecuri	ties Ace	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date	e 2A. Deer	med	3.	4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Executio any	on Date, if		on(A) or Dis	sposed	l of	Securities	Form: Direct		
(Instr. 3)		Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned	(D) or Benefic Indirect (I) Owner	Beneficial Ownership		
		(infolicity)	Duy, I cui)	(msu: o)	(111511.5,	i una .	.,	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				a		or		(Instr. 3 and 4)			
No Par				Code V	Amount	(D)	Price	````			
No Par Value							\$0				
Common	01/07/2008			А	18,000	А	(1)	40,241.4387	D		
Stock							_				

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.

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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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HOWATT THOMAS J 100 PAPER PLACE MOSINEE, WI 54455	Х		President & CEO					
Signatures								
Sherri L. Lemmer, Attorney-in-Fact		01/09/2008						

<u>**</u>Signature of Reporting Person

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).

Date

(1) Grant of restricted stock which vests in three equal installments of 6,000 shares on December 31, 2008, 2009, and 2010, respectively.

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.