### Edgar Filing: PEET SHELLY - Form 4

PEET SHELI	LY										
Form 4											
December 11	, 2012								<u></u>		
FORM 4 UNITED STATES SECURITIES AND E Washington, D.C.							NGE (	COMMISSION	OMB	48 APPROVAL 3235-0287	
Check this	s box		Was	shington,	D.C. 20	549			Number:	January 31,	
if no longe subject to Section 16 Form 4 or Form 5	5. <b>51 A I E</b> IV	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: 200 Estimated average burden hours per response 0.		
Form 5 obligations may continue. See Instruction 1(b). 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											
(Print or Type R	esponses)										
			2. Issuer Name <b>and</b> Ticker or Trading Symbol NORDSON CORP [NDSN]					5. Relationship of Reporting Person(s) to Issuer			
(Last) (First) (Middle)					-	_ · ]		(Check all applicable)			
			3. Date of Earliest Transaction (Month/Day/Year) 12/07/2012					Director 10% Owner X Officer (give title Other (specify below) below) Vice President			
				mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
WESTLAKE	E, OH 44145		T neu(ivioi	ui/Day/Tear	)			_X_ Form filed by	One Reporting Po Jore than One Ro		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secu	rities Acq	uired, Disposed o	f, or Beneficia	lly Owned	
	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		(A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Shares	12/07/2012			Code V F	Amount 105	(D) D	Price \$ 62.85	8,829 <u>(1)</u>	D		
Common Shares								1,397 <u>(2)</u>	I	Company ESOP and 401(k) Plan	

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)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) erivative curities cquired .) or sposed (D) nstr. 3,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price Derivati Security (Instr. 5)
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Share Equivalent Units (3)	<u>(3)</u>				(3)	(3)	Common Shares	<u>(3)</u>	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting O when I tunie / I turi ess	Director	10% Owner	Officer	Other				
PEET SHELLY 28601 CLEMENS ROAD WESTLAKE, OH 44145			Vice President					
Signatures								
Robert E. Veillette, Attorney-In-Fact		12/11/2012	2					
**Signature of Reporting Person		Date						

## **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) Includes 289 shares acquired through participation in the Company's Dividend Reinvestment Plan.
- (2) Balance as of October 31, 2012.

Share Equivalent Units acquired through deferral of performance shares awarded under 2004 Long Term Performance Plan. Deferrals are made to the Nordson Stock Measurement Fund of the Amended & Restated 2005 Deferred Compensation Plan. Equivalent Units are

(3) made to the Abdustri Stock Weasthement Fund of the Amended & Restard 2005 Defended Compensation Fund. Equivalent Onts are settled in common shares at reporting person's termination of employment or retirement subject to delayed distribution rules of Internal Revenue Code Section 409(A).

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.