Edgar Filing: Webster G Alfred - Form 4

| Webster G A | Alfred | | | | | | | | | | |
|--|--------------------------------------|---------------|------------------------|--|---|---------|---|--|--|---|--|
| Form 4 October 29, 1 | 2007 | | | | | | | | | | |
| | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENE SECURITIES | | | | | | ICIA | L OWN | Expires: January 31, 2005 Estimated average burden hours per | | | |
| Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b). | Filed pu ns Section 17 | 7(a) of the F | Public U | | ding Con | npany | Act of 1 | Act of 1934, 1935 or Section) | response | 0.5 | |
| (Print or Type I | Responses) | | | | | | | | | | |
| Webster G Alfred Symbol | | | Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) (First) (Middle) 3. Date (Month | | | | . Date of Earliest Transaction Month/Day/Year) 0/26/2007 | | | | (Check all applicable) | | | |
| | | | (Month/E | | | | | _X_ Director Officer (give t below) | Officer (give title Other (specify | | |
| (Street) 4. If Amo | | | endment, Date Original | | | (| 6. Individual or Joint/Group Filing(Check | | | | |
| Filed(Month/Da GREENSBORO, NC 27410 | | | | th/Day/Year) Applicable Line) _X_ Form filed by One Re Form filed by More th Person | | | | | | | |
| (City) | (State) | (Zip) | Tabl | e I - Non-I | Derivative | Secur | ities Acqu | ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Year | | Date, if | 3. Transactic Code (Instr. 8) Code V | 4. Securiti nor Dispose (Instr. 3, 4) | ed of (| D) | 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 Stock | 10/26/2007 | | | P | 50,000 | A | \$ 2.6946 | 100,000 | D | | |

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 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 | Secur | ınt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu 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 | | | | | | |
|--|---------------|-----------|----------|-------|--|--|--|
| L G | Director | 10% Owner | Officer | Other | | | |
| Webster G Alfred C/O UNIFI, INC. 7201 W. FRIENDLY AVE. GREENSBORO, NC 27410 | X | | | | | | |
| Signatures | | | | | | | |
| /s/G. Alfred Webster/Charles F McCoy POA | | 1 | 0/29/200 | 7 | | | |
| **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).

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.