

FOULKROD PATRICIA G

Form 5

February 13, 2003

1. Name and Address of Reporting Person
 Foulkrod, Patricia G.
 96 South George Street
 Suite 500
 York, PA 17401
 USA
2. Issuer Name and Ticker or Trading Symbol
 Glatfelter (GLT)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year
 12/2002
5. If Amendment, Date of Original (Month/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
 Director 10% Owner
 Officer (give title below) Other (specify below)
7. Individual or Joint/Group Filing (Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

TABLE I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security	2. Trans- action Date (Month/ Day/ Year)	2A.Execu- action Date (Month/ Day/ Year)	3. Trans- action Code	4. Securities Acquired (A) or Disposed of (D) Amount A/D Price	5. Amo Securi Benefi Owned Follow Yea
Common Stock, Par Value \$.01					815
Common Stock, Par Value \$.01					52476
Common Stock, Par Value \$.01					2136.2
Common Stock, Par Value \$.01					0
Common Stock, Par Value \$.01	12/31/2002		G		