#### ERSKINE DAVID J M

Form 4

January 05, 2006

## FORM 4

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

OMB Number:

January 31, Expires: 2005

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**OMB APPROVAL** 

Estimated average burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading ERSKINE DAVID J M Issuer Symbol CSS INDUSTRIES INC [CSS] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) \_X\_ Director

01/03/2006

10% Owner X\_ Officer (give title \_ Other (specify below) President and CEO

Person

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

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

### PHILADELPHIA, PA 19103

C/O CSS INDUSTRIES, INC., 1845

(Ctota)

WALNUT STREET, SUITE 800

(City)	(State) (	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)  (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)		
			Code V	Amount	(D)	Price	(IIIsti. 3 and 4)			
Common Stock (\$.10 par value)	01/03/2006(1)		S	1,000 (1)	D	\$ 30.5	35,750	D		
Common Stock (\$.10 par value)	01/03/2006(1)		S	1,000 (1)	D	\$ 30.55	34,750	D		
Common Stock (\$.10 par value)	01/03/2006(1)		S	1,000 (1)	D	\$ 30.6	33,750	D		
Common Stock (\$.10	01/04/2006(1)		S	2,000 (1)	D	\$ 30.5	31,750	D		

par value)

 Common
 See

 Stock (\$.10
 6,750
 I
 Footnote

 par value)
 (2)

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

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(9-02)

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

# 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. Transac Code (Instr. 8	etion 8) I	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)
				Code	V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

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# **Reporting Owners**

Reporting Owner Name / Address	Keiationsinps							
	Director	10% Owner	Officer	Other				
ERSKINE DAVID J M								
C/O CSS INDUSTRIES, INC.	X		President and CEO					
1845 WALNUT STREET, SUITE 800	Λ		1 resident and CEO					
PHILADELPHIA, PA 19103								

## **Signatures**

David J. M.
Erskine

\*\*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).

Reporting Owners 2

## Edgar Filing: ERSKINE DAVID J M - Form 4

- (1) (1) This sale was made pursuant to a plan intended to comply with Rule 10b5-1(c) previously adopted on October 26, 2005.
- (2) Reflects indirect ownership of 6750 shares consisting of 6,000 shares held by the reporting person's spouse and 750 shares held by the reporting person's spouse as co-trustee of a trust for the benefit of her child.

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.