## Edgar Filing: FIRSTENERGY CORP - Form 4

FIRSTENE	RGY CORP										
Form 4											
August 29, 2											
FORM	14 LINITE	о статес	SECU	)ITIES <i>(</i>	ND FV	СЦА	NCEC	OMMISSION		PROVAL	
	UNITE	DSIAILS		shington,			INGE C	01/11/11/15/5101	OMB Number:	3235-0287	
Check th	is box		, va	Simgton	, D.C. 20	547				January 31,	
if no longer STATEMENT OF CHANG				GES IN BENEFICIAL OWN				NERSHIP OF	Expires:	2005	
subject to Section 1	)								Estimated average burden hours per		
Form 4 o									response	0.5	
Form 5	<b>.</b>						•	e Act of 1934,			
obligation may cont				•	•	· ·	•	1935 or Section	1		
See Instru		30(h)	of the Ir	vestment	Compar	ny Ac	ct of 194	0			
1(b).											
(Print or Type I	Responses)										
(I fine of Type I	(coponses)										
1. Name and A	ddress of Reportin	ng Person <u>*</u>	2. Issue	r Name <b>and</b>	l Ticker or	Tradi	ng	5. Relationship of	Reporting Pers	on(s) to	
CARTWRIGHT CAROL A Symbol					8	Issuer					
FIRSTENERGY CORP [FE]						(Chask all applicable)					
(Last) (First) (Middle)			3. Date of Earliest Transaction					(Check all applicable)			
			(Month/I	Day/Year)				X Director		Owner	
			08/28/2	08/28/2007			Officer (give title Other (specify below)				
	(Street)		4 TE A			1		, ,	,	-(01 1	
				.mendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
Thed (Mon				nii/Day, i car)				_X_ Form filed by One Reporting Person			
AKRON, O	H 44308							Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)				_				_	
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative	Secur	rities Acqu	uired, Disposed of,	, or Beneficiall	y Owned	
1.Title of	2. Transaction Da			3. T	4. Securi		-	5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year	r) Execution any	n Date, if	Code	on(A) or Di (Instr. 3,			Securities Beneficially	Ownership Form: Direct	Indirect Beneficial	
(11041-0)		•	Day/Year)	(Instr. 8)	(1115111-0)	· uno	.,	Owned	(D) or	Ownership	
								Following	Indirect (I)	(Instr. 4)	
						(A)		Reported Transaction(s)	(Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common							\$				
Stock	08/28/2007			А	353	А	ф 61.062	8,766.563	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. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Title and A Underlying S (Instr. 3 and	Securities	8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Stock Units	\$ 1					<u>(1)</u>	<u>(1)</u>	Common Stock	13,551.112	

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh		
	Director	10% Owner	Officer	Other
CARTWRIGHT CAROL A 76 SOUTH MAIN STREET AKRON, OH 44308	Х			
Signatures				
Jacqueline S. Cooper, POA	08/29/20	007		
<u>**</u> 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) In accordance with the terms and conditions of the FirstEnergy Corp. Deferred Compensation plan for Outside Directors.

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.