WOOD ROBERT G

Form 4

August 25, 2008

FORM 4

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

SECURITIES

OMB Number:

3235-0287

0.5

Check this box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

January 31, Expires: 2005

OMB APPROVAL

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response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

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

See Instruction 1(b).

(Last)

(City)

(Print or Type Responses)

1. Name and Address of Reporting Person * WOOD ROBERT G

(First)

(Street)

(State)

2. Issuer Name and Ticker or Trading Symbol

G&K SERVICES INC [GKSR]

5. Relationship of Reporting Person(s) to

Issuer

(Middle)

(Zip)

3. Date of Earliest Transaction

Director 10% Owner

(Check all applicable)

5995 OPUS PARKWAY

(Month/Day/Year)

08/21/2008

Filed(Month/Day/Year)

X_ Officer (give title Other (specify

6. Individual or Joint/Group Filing(Check

below) President, G&K Services Canada

4. If Amendment, Date Original

Applicable Line) _X_ Form filed by One Reporting Person

Form filed by More than One Reporting

Person

MINNETONKA,, MN 55343

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)

(A)

Transaction(s)

(Instr. 3 and 4) Code V Amount (D) Price

Class A Common

Stock

08/21/2008

4,695 Α (2)

24,760.8881 (1) (3)

D

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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. Number of on Derivative Securities Acquired (A or Disposed (D) (Instr. 3, 4, and 5)	Expira (Mont	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (I	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option	\$ 34.27	08/21/2008		A	12,525		<u>(4)</u>	08/21/2018	Class A Common Stock	12,525

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WOOD ROBERT G 5995 OPUS PARKWAY MINNETONKA., MN 55343

President, G&K Services Canada

Signatures

/s/ Robert G. Wood 08/25/2008

**Signature of Date
Reporting Person

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) Grant of restricted stock pursuant to Section 16b-3.
- (2) Subject to the terms of the company's plan, vests in equal increments over a five year period, commencing on the first anniversary of the date of grant.
- (3) Awards are subject to vesting in accordance with the terms of the company's plan. Also includes shares purchased through the company's employee stock purchase plan.
- (4) Subject to the terms of the company's plan, vests in equal increments over a three year period, commencing on the first anniversary of the date of grant.
- (5) Includes options previously granted under the company's plan at various exercises prices.

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.

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