FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average burder	ı
hours per response:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* FAIRBAIRN URSULA F				4	2. Issuer Name and Ticker or Trading Symbol AIR PRODUCTS & CHEMICALS INC /DE/ [APD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) 7201 HA	,	First) BOULEVARD	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/31/2008								Officer (g below)	give title	Other (specify below)		pecify
(Street) ALLENTOWN PA 18195					4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5	State)	(Zip)														
		Ţ	able I - Non-D			ecuriti	es Ac	cquire	d, Di	<u> </u>	<u>, </u>		Owned				
1. Title of Security (Instr. 3) 2. Transpate (Month						2A. Deemed Execution Date if any (Month/Day/Ye		Code (Instr.					5. Amount Securities Beneficiall Owned Fol	For lly (D) ollowing (I) (I		n: Direct or Indirect nstr. 4)	7. Nature of ndirect Beneficial Ownership
								Cod	e V	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an				(Instr. 4)
	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)	vative Conversion Date Execution Date, Trans trity or Exercise (Month/Day/Year) if any Code		Transa Code (action Derivative			Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	onia		
Phantom Stock ⁽¹⁾	\$0 ⁽²⁾	03/31/2008		A		90.1056		08/08/19	88 ⁽³⁾	08/08/1988 ⁽³⁾	Common Stock	90.1056	\$93.09	5,334.5	956	D	

Explanation of Responses:

- 1. Phantom deferred stock units (Units) acquired under the Air Products Stock Account of the issuer's Deferred Compensation Program for Directors, of the Company's Long-Term Incentive Plan (the Plan). Under the Plan, all non-employee directors are credited with Units for the portion of their Board retainer required to be received in this form and they are permitted to defer receiving payment of all or a portion of the remainder of their Board and Committee retainers and meeting fees.
- 2. Not applicable to this security
- 3. These units are payable in the form of shares of common Stock equal in number to the units, at the time elected by the reporting person, which is generally after service on the issuer's Board of Directors ends. Units may be paid in a lump sum or up to ten installments as elected by the reporting person in advance.

Remarks:

Linda M. Svoboda as Attorney

04/01/2008

in Fact

** Signature of Reporting Person

Date

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

- * 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).

 $Note: File \ three \ copies \ of \ this \ Form, \ one \ of \ which \ must \ be \ manually \ signed. \ If \ space \ is \ insufficient, \ see \ Instruction \ 6 \ for \ procedure.$

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 Number.