Edgar Filing: GILLETT NANCY - Form 4

GILLETT N	ANCY											
Form 4												
March 11, 20	009											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							COMMISSION	OMB Number:	3235-0287		
Check this box											Expires:	January 31,
if no long subject to		FEM	ENT O	F CHAN	GES IN BENEFICIAL OWNERSHIP OF					Estimated average		
0	Section 16. SECURITIES							burden hours per response 0.5				
Form 4 o Form 5												
obligation	20	-							•	ge Act of 1934,		
may cont	inue. Section	17(a)		of the Inv	•		•	- ·		f 1935 or Sectio	n	
See Instru 1(b).	uction		50(II)	of the first	/csunc	iii V	Compan	y Act	01 19	40		
(Print or Type I	Responses)											
1. Name and A GILLETT N	Address of Report	rting Po	erson <u>*</u>	2. Issuer Symbol	Name a	nd '	Ticker or '	Fradin	g	5. Relationship of Issuer	f Reporting Per	son(s) to
CHARLES RIVER LABORATORIES				-	-							`
				S	(Check a			ck all applicable	all applicable)			
				INTERN	JATIO	NA	L INC	CRL]	Director	10%	6 Owner
(Last)	(First)	(Mi	iddle)	3. Date of Earliest Transaction			Officer (give title Other (specify below)					
				(Month/Da	ay/Year))				· · · · · · · · · · · · · · · · · · ·	rate Executive '	VP
251 BALLA	ARDVALE S	TREE	ET	03/09/20)09							
	(Street)			4. If Amer	ndment,	Dat	e Original			6. Individual or Jo	oint/Group Filin	ng(Check
				Filed(Mont	th/Day/Y	ear)				Applicable Line)		
WII MINC		007								_X_ Form filed by 0 Form filed by M		
WILMING	ΓΟΝ, MA 01	00/								Person		
(City)	(State)	(2	Zip)	Table	e I - Non	ı-De	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned
1.Title of	2. Transaction				3.		4. Securi				6. Ownership	
Security (Instr. 3)	(Month/Day/	Year)		on Date, if	Transa Code	ct10	nAcquired Disposed			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial
(1130. 5)			any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				•	Indirect (I)	Ownership	
										Following	(Instr. 4)	(Instr. 4)
								(A)		Reported Transaction(s)		
					Code	V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common						v						
Stock	03/09/2009	(2)			А		3,750	А	\$0	64,507	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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to Buy) (1)	\$ 24.8	03/09/2009		А	14,800	02/27/2010	02/27/2016	Common Stock	14,800

Reporting Owners

Reporting Owner Name / Address	Relationships						
I B B B B B B B B B B B B B B B B B B B	Director	10% Owner	Officer	Other			
GILLETT NANCY 251 BALLARDVALE STREET WILMINGTON, MA 01887			Corporate Executive VP				

Signatures

/s/Nancy Gillett	03/10/2009
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<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) Options vest equally over 4 years, each February 27, beginning 02/27/10.
- (2) Restricted Common Shares vest equally over four years, each February 27, beginning 02/27/10.

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.