Edgar Filin	ng: CHARLES	RIVER LABORA	TORIES INTERI	NATIONAL II	NC - Form 4
- 3	- U -	_		-	

Lugar i mig									
CHARLES RIVER LABO Form 4 August 05, 2015	RATORIES	S INTERNATION	NAL INC	l					
FORM 4 Check this box if no longer subject to Section 16. Form 4 or Form 5 chilantiana Filed p	EMENT OF pursuant to S 7(a) of the 1	S SECURITIES Washington F CHANGES IN SECU Section 16(a) of t Public Utility Ho of the Investmen	h, D.C. 20 N BENEH RITIES he Securi	0549 FICIA ities Ei mpany	L OWN xchange	ERSHIP OF Act of 1934, 1935 or Section	OMB Number: Expires: Estimated a burden hour response		
(Print or Type Responses)									
1. Name and Address of Report CHUBB STEPHEN D (Last) (First) 251 BALLARDVALE ST	(Middle)	2. Issuer Name ar Symbol CHARLES RIV LABORATORI INTERNATION 3. Date of Earliest 7 (Month/Day/Year) 08/03/2015	<sup>7</sup> ER IES NAL INC	C [CRL		_X_ Director	all applicable	) Owner	
(Street) 4. If Ameno Filed(Month			-	al	1	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WILMINGTON, MA 018		_X_ Form filed by C Form filed by M Person							
(City) (State)	(Zip)	Table I - Non-	-Derivative	e Securi	ities Acqu	ired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)2. Transaction De (Month/Day/Yea)		Date, if Transacti Code ay/Year) (Instr. 8)		sed of (	D)	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)	
Common 08/03/2015 Stock		S <u>(1)</u>	2,000	D	\$ 76.4634	15,504	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)

## Edgar Filing: CHARLES RIVER LABORATORIES INTERNATIONAL INC - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addres		Relationships ess							
		Director	10% Owner	Officer	Other				
CHUBB STEPHEN D 251 BALLARDVALE STI WILMINGTON, MA 0188		Х							
Signatures									
/s/Stephen D. Chubb	08/04	4/2015							
<u>**</u> Signature of Reporting Person	Da	ate							

## **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) This sale occurred pursuant to a 10b5-1 Trading Plan.

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.