Edgar Filing: CHARLES RIVER LABORATORIES INTERNATIONAL INC - Form 4

CHARLES RIVER LABORATORIES INTERNATIONAL INC

Form 4

February 25, 2014

FORI	OMB APPROVAL								
	UNII	OMB Number:	3235-0287						
	Check this box if no longer CRACKED CHANGES IN DESCRIPTION OF								
subject to Section 16. Form 4 or			OF CHANGES IN BENEFICIAL OW SECURITIES	Expires: Estimated burden hou response	urs per				
Form 5 obligations may continue. See Instruction 1(b). 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									
(Print or Type	e Responses)								
1. Name and Address of Reporting Person * Molho Davide		rting Person *	2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES	Issuer	onship of Reporting Person(s) to (Check all applicable)				
			INTERNATIONAL INC [CRL]	Director		% Owner			
(Last)	(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)	_X_ Officer (give below)	title Oth below) ate Executive	ner (specify			
251 BALLARDVALE STREET			02/22/2014	Corpora	ate Executive	VI			
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Jo Applicable Line) _X_ Form filed by C					
WILMING	GTON, MA 01	887		Form filed by M Person	Iore than One R	eporting			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acc	quired, Disposed of	, or Beneficia	lly Owned			
1.Title of Security		Date 2A. Deer ear) Execution			6. Ownership	7. Nature of Indirect			

` •	, ,	· 17 I ab	ie i - No	on-L	erivative	Secui	riues Acq	uirea, Disposea (or Beneficia	any Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Pransaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securi n(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	
Common Stock	01/21/2014		G	V	200	D	\$0	40,692	D	
Common Stock	02/22/2014		F		699	D	\$ 59.15	39,993	D	
Common Stock								8,574	I	By Revocable Trust

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 (9-02)

Edgar Filing: CHARLES RIVER LABORATORIES INTERNATIONAL INC - Form 4

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	xpiration Date		ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr.	. 3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
									Amount		
						Date		or Title Number			
						Exercisable			of		
				Codo V	(A) (D)						
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Molho Davide

251 BALLARDVALE STREET WILMINGTON, MA 01887 Corporate Executive VP

Signatures

/s/Davide Molho 02/24/2014

**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).

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.

Reporting Owners 2