

CHARLES RIVER LABORATORIES INTERNATIONAL INC

Form 4

June 04, 2002

1. Name and Address of Reporting Person
 THIER, SAMUEL O.
 251 Ballardvale Street
 Wilmington, MA 01887
 USA
2. Issuer Name and Ticker or Trading Symbol
 Charles River Laboratories Int'l., Inc (CRL)
3. IRS or Social Security Number of Reporting Person (Voluntary)
4. Statement for Month/Year
 5/2002
5. If Amendment, Date of Original (Month/Day/Year)
6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
 Director 10% Owner
 Officer (give title below) Other (specify below)
7. Individual or Joint/Group Filing (Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

TABLE I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security	2. Trans- action Date (Month/ Day/ Year)	3. Trans- action Code	4. Securities Acquired (A) or Disposed of (D)	5. Amou Secu Bene Owe End Mont
			Code V Amount A/D Price	

TABLE II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.	2.	3.	4.	5.	6.	7.	8.
						Title and Amount of Underlying Securities	
	Conver- sion or Exercise Price of	Transac- tion Date (Month/ Day/Year)	Transac- tion Code	Number of Derivative Securities Acquired (A) Disposed (D)	Date Exercisable and Expiration Date (Month/Day/Year)	Amount or Number of	
Title of Derivative Security	Deriv- ative Security	tion Date (Month/ Day/Year)	Code V	(A) (D)	isable Expira- tion Date	Title Shares	\$
Stock Options (Right to buy)	\$33.7	05/03/2002	A	V 6000	05/03/2004 05/03/2007	Common Stock	6000

Explanation of Responses:

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SIGNATURE OF REPORTING PERSON
/s/ SAMUEL O. THIER

DATE
06/04/2002