

CHARLES RIVER LABORATORIES INTERNATIONAL INC

Form 3

March 28, 2002

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FORM 3  
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
WASHINGTON, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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  
Section 30(f) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Date of Event Re- quiring Statement (Month/Day/Year)	4. Issuer Name AND Ticker Charles River Laboratorie
WALTRIP	WILLIAM		06-22-00	5. Relationship of Report to Issuer (Check all X Director 10
(Last)	(First)	(Middle)		----- Officer (give Ot title below) b
251 Ballardvale Street			3. IRS or Social Se- curity Number of Reporting Person (Voluntary)	----- -----
(Street)				

BOARD DIRECTOR

Wilmington	MA	01887
(City)	(State)	(Zip)

TABLE I -- NON-DERIVA

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)
Common Stock	16,895	D
Common Stock	1,878	I

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly by the reporting person.  
\* If the form is filed by more than one reporting person, SEE Instruction 5(b)(v).

POTENTIAL PERSONS WHO ARE TO RESPOND TO THE COLLECTION OF INFORMATION CONTAINED IN THIS FORM SHOULD BE ADVISED THAT THEY ARE NOT TO RESPOND UNLESS THE FORM DISPLAYS A CURRENTLY VALID OMB CONTROL NUMBER.

FORM 3 (CONTINUED) TABLE II - DERIVATIVE SECURITIES BENEFICIALLY OWNED (E.G., PUTS, CALLS, WARRANTS AND OTHER SECURITIES)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

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Explanation of Responses:

SEE ATTACHED PAGE(S)

/s/ WILLIAM WALTRIP

\*\*Intentional misstatements or omissions of facts constitute Federal Criminal Violations. SEE 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

\*\*Signature of Reporting Person

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

WALTRIP, WILLIAM  
251 Ballardvale Street

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.

Wilmington MA 01887  
Charles River Laboratories International  
06/22/2000

FORM 3 (CONTINUED) EXPLANATION OF RESPONSES

NAME: WALTRIP, WILLIAM  
251 Ballardvale Street

DATE OF EVENT: 00-06-22  
ISSUER NAME: Charles River Laboratories International

Wilmington MA 01887

Note: (1) Held indirectly through its interest in CRL Acquisition LLC, a limited liability company