FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	L OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Kochevar Deborah Turner</u>						2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
						INTERNATIONAL INC [CRL]									X	Direc	tor	10% C	wner		
(Lact)	(5	=irct\		Middlo)											_		Office below	er (give title v)	Other below	(specify	
(Last) (First) (Middle) 251 BALLARDVALE STREET								est Trar	saction (N	Month	/Day/Year)	1				20.01	-,	20.011			
251 BALLARDVALE STREET					03/	03/02/2015															
(Stroot)						- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) WILMINGTON MA 01887																Form filed by One Reporting Person					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	Form filed by More than One Reporting																			
(City)	(5	State	e) (2	Zip)													Perso	on			
			Tabl	e I - No	n-Deriv	/ative	Se Se	ecurit	ies Ad	quired	, Di	sposed	of,	or Be	nefic	cially	Owne	d			
Dat			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,			Transaction Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			or and 5)	Securit	. Amount of ecurities	6. Ownership Form: Direct	7. Nature of Indirect			
			(Month/L			if any (Month/Day/Year)) 8) Code (Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership					
							Code	v	Amount (A) or (D)		Pric	e	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
Common	Stock				03/02	2/2015				S		100		D	\$7	6.531	1:	1,270	D		
Common	Stock				03/02	/2015				S		76		D	\$7	6.55	1:	1,194	D		
Common Stock			03/02/2015				S		623		D	\$7	\$76.57		0,571	D					
Common Stock			03/02/2015					S		200		D	\$7	\$76.579		0,371	D				
Common Stock			03/02/2015				S		100		D	\$7	5.582 1		0,271	D					
Common	ommon Stock			03/02/2015				S		100		D	\$7	76.592 1		0,171	D				
Common	Stock				03/02	/2015				S		200		D \$7		6.595	9,971		D		
Common	Stock				03/02	2/2015				S		200		D	\$7	6.598	9	9,771 D			
Common					03/02	2/2015				S		201		D	\$7	6.601	9,570 D				
Common	Stock				03/02	2/2015				S		200		D	\$7	6.604	9,370 D				
Common	Stock				03/02	/2015				S		200		D	\$7	6.611	9	9,170 D			
Common	Stock				03/02	2/2015				S		100		D	\$7	6.622	9				
Common Stock 03/02						/2015				S		300	D \$7		\$7	6.631	8,770		D		
			Та	ble II - I.)	Derivat (e.g., p	tive S uts, c	ec all	uritie: s, wa	S Acq	uired, E , option)isp 1s, (osed of, converti	, or ble	Bene secu	eficia rities	ılly Oı s)	wned				
1. Title of	2.	3.	Transaction	3A. Deem	ed	4.		5. 1	lumber	6. Date	Exerc	isable and	7.	. Title ar	nd	8. Pi	rice of	9. Number of	10.	11. Nature	
Derivative Security	Conversion or Exercise	1 D	Date (Month/Day/Year)	Execution if any (Month/Da	n Date,		Transaction Code (Insti		rivative	Expirati (Month/	on Da	ite	A	mount of	of	Deri	vative urity	rative derivative rity Securities 5. 5) Beneficially	Ownership Form:	of Indirect Beneficial Ownership (Instr. 4)	
(Instr. 3)	Price of Derivative	``				8)	(Se	curities	(- u,, .	· · · · · ·	ļυ	Underlying Derivative			tr. 5)		Direct (D)		
	Security								Acquired (A) or Disposed of (D)				S	Security (Instr. and 4)		3		Owned Following	or Indirect (I) (Instr. 4)	(111511. 4)	
							of					aı				Reported Transaction	(s)				
								(Instr. 3, 4 and 5)										(Instr. 4)			
				F			\dashv	Т				\top	Amour		<u>-</u>						
														0							
			Code	ode V		(D)	Date Exercisable		Expiration Date		0										

Explanation of Responses:

/s/Deborah Kochevar

03/02/2015

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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 Number.

^{*} 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).