FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* BATHGATE BRIAN (Last) (First) (Middle) 251 BALLARDVALE STREET						2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL INC [CRL] 3. Date of Earliest Transaction (Month/Day/Year) 10/20/2004									5. Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Corporate Vice President				
(Street) WILMINGTON MA 01887 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person													n
Table I - Non-Derive 1. Title of Security (Instr. 3) 2. Transa Date (Month/E					action	ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			l (A) or	5. Amou Securitie Benefici Owned F	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
										v	Amount	(A) or (D)		Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock 10/20/						4			A		34,494	4 ⁽²⁾ A		\$0 ⁽¹⁾	34	34,494		D	
			Table II - I (uired, D s, option						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	oate, T	4. Transa Code (1 3)		of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	s S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		expiration Pate	Title		Amount or Number of Shares					
Employee Stock Option (right to buy)	\$0.03	10/20/2004			A		32,634		(3)	0	8/31/2011	Comr		32,634	\$0 ⁽¹⁾	32,634	4	D	
Employee Stock Option (right to buy)	\$22.19	10/20/2004			A		16,000		(4)	0	6/28/2013	Comr		16,000	\$0 ⁽¹⁾	16,000	0	D	
Employee Stock Option	\$29.55	10/20/2004			A		36,000		(5)	0	1/30/2014	Comr		36,000	\$0 ⁽¹⁾	36,000	0	D	

Explanation of Responses:

- 1. Shares and options to purchase shares of Issuer common stock were acquired pursuant to the transactions contemplated by the Agreement and Plan of Merger dated as of June 30, 2004, by and among the Issuer, Inveresk Research Group, Inc. Indigo Merger I Corp. and Indigo Merger II LLC (successor to Indigo Merger II Corp.).
- 2. Received in exchange for 71,863 shares of Inveresk common stock in connection with the Merger.
- 3. Immediately.

buy)

- 4. 4,666 options are immediately exercisable; 4,667 options are exercisable on each of 6/30/05 and 6/30/06.
- 5. 12,000 options are exercisable on each of 1/30/05, 1/30/06 and 1/30/07.

/s/ Deborah E. Gray as attorney-in-fact for Brian

10/22/2004

Bathgate

** Signature of Reporting Person

Date

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

- * 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.

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.