
UNITED
STATES
SECURITIES
AND
EXCHANGE
COMMISSION

FORM 4
WASHINGTON,
D.C. 20549
OMB
APPROVAL -

----- / /
CHECK THIS
BOX IF NO
STATEMENT
OF CHANGES
IN

BENEFICIAL
OWNERSHIP
OMB NUMBER:
3235-0287
LONGER
SUBJECT TO
EXPIRES:
SEPTEMBER
30, 1998
SECTION 16.

FORM 4 OR
Filed
pursuant to
Section
16(a) of
the
Securities
Exchange
Act of
1934,

ESTIMATED
AVERAGE
BURDEN FORM
5

OBLIGATIONS
MAY Section
17(a) of
the Public
Utility
Holding
Company Act
of 1935 or

HOURS PER
RESPONSE
.... 0.5

CONTINUE.
SEE Section
30(f) of
the
Investment
Company Act
of 1940 ---

INSTRUCTION
1(b).
(Print or
Type
Responses)

-- 1. Name
and Address
of

Reporting
Person* 2.
Issuer Name
AND Ticker
or Trading
Symbol 6.
Relationship

of
Reporting
Person(s)
Palm Julia
D. Charles
River

Laboratories
Int'l, Inc.
(CRL) to

Issuer
(Check all
applicable)
Director
10% Owner -

----- X
Officer
(give Other
(Last)
(First)
(Middle) 3.
IRS or
Social

Security 4.
Statement
for ----
title ----

(specify
Number of
Reporting
Month/Year
below)
below

Person
(Voluntary)
07/2001 Sr.
Vice
President
251

Ballardsvale
Street - --

7.
Individual
or
Joint/Group
Filing

(Street) 5.
If
Amendment,
(Check

Applicable
Line) Date
of Original
_X_Form
filed by
One
Reporting
Person
(Month/Year)
___Form
filed by
More than
One
Wilmington
MA 01887
Reporting
Person - --

(City)
(State)
(Zip) TABLE
I - NON-
DERIVATIVE
SECURITIES
ACQUIRED,
DISPOSED
OF, OR
BENEFICIALLY
OWNED - ---

----- 1.
Title of
Security 2.
Trans- 3.
Trans- 4.
Securities
Acquired
(A) 5.
Amount of
6. Owner-
7. Nature
(Instr. 3)
action
action or
Disposed of
(D)
Securities
ship of In-
Date Code
(Instr. 3,
4 and 5)
Beneficially
Form:
direct
(Instr. 8)
Owned at
Direct
Bene-
(Month/ End
of (D) or

DISPLAYS A
CURRENTLY
VALID OMB
CONTROL
NUMBER.

FORM 4
(CONTINUED)
TABLE II -
DERIVATIVE
SECURITIES
ACQUIRED,
DISPOSED OF,
OR
BENEFICIALLY
OWNED (E.G.,
PUTS, CALLS,
WARRANTS,
OPTIONS,
CONVERTIBLE
SECURITIES)

- - - - -
- - - - -
- - - - -
- - - - -
- - - - -
- - - - -
- - - - -
- - - - -
- - - - -
- - - - -

-- 1. Title
of
Derivative
Security 2.
Conver- 3.
Trans- 4.
Transac- 5.
Number of
Deriv- 6.
Date Exer-
(Instr. 3)
sion or
action tion
Code ative
Securities
Ac- cisable
and Ex-
Exercise
Date (Instr.
8) quired
(A) or Dis-
piration
Date Price
of (Month/
posed of (D)
(Month/Day/
Deriv- Day/
(Instr. 3,
4, and 5)
Year) ative
Year)
Security ---

Date
Expira- ----

Exer- tion
cisable Date
Code V (A)
(D) - -----

**Intentional
misstatements
or omissions
of facts
constitute
**Signature
of Reporting
Person Date
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.

Palm, Julia
D. If space
is
insufficient,
SEE

Instruction
6 for
procedure.

251
Ballardvale
Street
Wilmington,
MA 01887

Potential
persons who
are to
respond to
the
collection
of
information
contained
Charles
River

Laboratories
Int'l, Inc.
in this form
are not
required to
respond
unless the
form

displays a
currently
07/2001
valid OMB
Number. Page

2 SEC 1474
(7-97)