COHERENT INC

Form 4

November 09, 2006

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

3235-0287 Number:

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

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 or Section may continue. 30(h) of the Investment Company Act of 1940

See Instruction 1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person * SIMONET HELENE (Last) (First) (Middle) P. O. BOX 54980 | | ng Person * | 2. Issuer Name and Ticker or Trading Symbol COHERENT INC [COHR] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|--|--|-------------|---|--|--|--|--|
| | | (Middle) | 3. Date of Earliest Transaction | (2) | | | |
| | | | (Month/Day/Year) 11/09/2006 | Director 10% Owner _X Officer (give title Other (specify below) Exec VP and CFO | | | |
| (Street) | | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| SANTA CLARA, CA 95056-0980 | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |

| (City) | (State) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | |
|------------------------|--------------------------------------|--|------------|----------------------------|---------------|---------------------------------|------------------------|-----------------------|--|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3. | 4. Securities omr Disposed | Acquired (A) | 5. Amount of Securities | 6. Ownership | 7. Nature of Indirect | |
| (Instr. 3) | (Wolldin Day/Tear) | any | Code | (Instr. 3, 4 a | ` ′ | Beneficially | Form: | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | | | Owned Following | Direct (D) or Indirect | Ownership (Instr. 4) | |
| | | | | (A | ٧) | Reported | (I) | | |
| | | | Code V | O Amount (I | r | Transaction(s) (Instr. 3 and 4) | (Instr. 4) | | |
| Common Stock | 11/09/2006 | | I | 315 A | \$ 28.9255 | 16,478 | D | | |

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

(7:m)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of | 2. | 3. Transaction Date | | 4. | 5. | 6. Date Exerc | | 7. Titl | | 8. Price of | 9. Nu |
|--------------------------------------|---|---------------------|---|---------------------------------|--|---------------------|--------------------|------------------------------------|--|--------------------------------------|---|
| Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative Security | (Month/Day/Year) | Execution Date, if any (Month/Day/Year) | Transacti Code (Instr. 8) | ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | Amou Under Securi (Instr. | rlying | Derivative Security (Instr. 5) | Deriv Secur Bene Own Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

SIMONET HELENE P. O. BOX 54980 SANTA CLARA, CA 95056-0980

Exec VP and CFO

Signatures

Scott H. Miller, by power of atty 11/09/2006

**Signature of Reporting Person Date

Explanation of Responses:

- * 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. 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.

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