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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

WASHINGTON, D.C. 20549

CHARLES RIVER LABORATORIES INTERNATIONAL INC

Form 3 March 28, 2002

FORM 3

		INITIAL S	STATEMENT OF BENEFICIAL	OWNERSHIP OF SECURITIES		
(Print or Type R		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 Section 17(a) of the Public Utility Holding Company Act of 1935 Section 30(f) of the Investment Company Act of 1940				
	ess of Reportin	g Person*	 Date of Event Requiring Statement (Month/Day/Year) 	4. Issuer Name AND Ticker Charles River Laboratorie		
(Last)	(First)	(Middle)	 06-22-00 	5. Relationship of Report to Issuer (Check all X Director 10		
			curity Number of			
251 Ballardvale						
	(501000)			BOARD DIRECTOR		
Wilmington	MA	01887				
(City)	(State)			TABLE I NON-DERIVA		
1. Title of Security (Instr. 4)			Beneficially Owned (Instr. 4)	es 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5		
Common Stock	Common Stock		16,895	D		
Common Stock			1,878	I		

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	ne for each class on an one reporting pe		cially owned don 5(b)(v).	irectly or i
FORM 3 (CONTINUED) TABLE II - D	ERIVATIVE SECURITIE SECURITIES)	S BENEFICIALLY OWNED	(E.G., PUTS,	CALLS, WARE
1. Title of Derivative Security (Instr. 4)	2. Date Exer- 3. Title and Amount of Securities cisable and Underlying Derivative Security Expiration (Instr. 4) Date (Month/Day/ Year)		ve Security	
	Date Expir- Exer- ation cisable Date	Title	Amount or Number of Shares	Security

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Explanation of Responses:

SEE ATTACHED PAGE(S)

**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 provided is insufficient, SEE Instruction 6 for procedure.

Potential persons who are to respond to the collection of information 06/22/2000 contained in this form are not required to respond unless the form displays a currently valid OMB Number.

/s/ WILLIAM WALTRIP

**Signature of Reporting

WALTRIP, WILLIAM 251 Ballardvale Street

Wilmington MA 01887 Charles River Laborator

FORM 3 (CONTINUED) EXPLANATION OF RESPONSES

NAME: WALTRIP, WILLIAM 251 Ballardvale Street

Wilmington MA 01887

ISSUER NAME: Charles River Labor

DATE OF EVENT: 00-06-22

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