## Edgar Filing: LeMaitre Cornelia W - Form 4

LeMaitre Con	melia W										
Form 4											
January 12, 2	012										
FORM	4									PPROVAL	
	UNITED	STATES		ITIES AI hington, ]			NGE (	COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 10 Form 4 or	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF S. SECURITIES									January 31 2005 average Irs per 0.5	
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17	(20) (h) at the Investment Commonly A at at 10/0									
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> LeMaitre Cornelia W			2. Issuer Name <b>and</b> Ticker or Trading Symbol LEMAITRE VASCULAR INC					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			[LMAT]					(Clied	k an applicable	-)	
(Last) C/O LEMAI INC, 63 SEC	3. Date of Earliest Transaction (Month/Day/Year) 01/10/2012					X Director 10% Owner X Officer (give title Other (specify below) below) V.P., Human Resources,Director					
	(Street)	(Street) 4. If Amer Filed(Mont						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BURLINGT	ON, MA 01803							Form filed by M Person	Aore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Dea (Month/Day/Year) Executi any (Month.			<ul> <li>3. 4. Securities</li> <li>TransactionAcquired (A) or</li> <li>Code Disposed of (D)</li> <li>(Instr. 8) (Instr. 3, 4 and 5)</li> </ul>			SecuritiesIBeneficially()OwnedIFollowing()Reported()	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	01/10/2012			S	2,200	D	\$6	276,777	D		
Common Stock	01/11/2012			S	1,650	D	\$6	275,127	D		

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

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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			
LeMaitre Cornelia W C/O LEMAITRE VASCULAR, INC 63 SECOND AVENUE BURLINGTON, MA 01803	Х		V.P., Human Resources, Director				
Signatures							
/s/ Brian J. Kickham Attorney-in-Fact	01/12/2012						
**Signature of Reporting Person	I	Date					
Evaloretion of Deene		_					

## **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.