## Edgar Filing: MCKEON BRIAN P - Form 4

MCKEON B Form 4 November 01											
FORM	Л								OMB AF	PROVAL	
	<b>CUNIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287			
Check thi if no long subject to Section 1 Form 4 or	er <b>STAT</b>	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES								Expires:January 31 2001Estimated average burden hours per response0.4	
Form 5 obligations may continue. See Instruction 1(b). 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 30(h) of the Investment Company Act of 1940											
(Print or Type R	Responses)										
1. Name and Address of Reporting Person <u>*</u> MCKEON BRIAN P			2. Issuer Name <b>and</b> Ticker or Trading Symbol IDEXX LABORATORIES INC /DE					5. Relationship of Reporting Person(s) to Issuer			
			LADORATORIES INC /DE				(Check all applicable)				
(Mont				of Earliest Transaction /Day/Year) /2006				X_ Director 10% Owner Officer (give title Other (specify below) below)			
	(Street)	4. If Amendment, Date ( Filed(Month/Day/Year)			-	Applicable Line) _X_ Form filed by			Dint/Group Filing(Check		
WESTBRO	OK, ME 0409	2						Form filed by M Person	fore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ity (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)			
Common Stock	10/30/2006			А	108 <u>(1)</u>	А	φ 85.49 ( <u>1)</u>	2,460	D		

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

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 control number.

 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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>								
	Director	10% Owner	Officer	Other				
MCKEON BRIAN P C/O IDEXX LABORATORIES, INC. ONE IDEXX DRIVE WESTBROOK, ME 04092	Х							
Signatures								
Conan R. Deady, Attorney-in-Fact for McKeon	11/01/2006							
**Signature of Reporting Person			Date					
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## **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).

Represents deferred stock units acquired pursuant to the IDEXX Laboratories, Inc. Director Deferred Compensation Plan, as amended (the "Plan") in accordance with Rule 16b-3. The number of deferred stock units acquired is determined by dividing the amount of

(1) Director's cash compensation deferred purusant to the Plan (\$9,250) by the closing price of the IDEXX Laboratories, Inc. Common Stock on the date of the deferral. Deferred stock units are issuable only as common stock on a one-for-one basis one year following the Director's resignation from the Board of Directors.

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.