## Edgar Filing: IDEXX LABORATORIES INC /DE - Form 4

IDEXX LAB Form 4 August 02, 2	ORATORIES II 005	NC /DE									
FORM 4 UNITED STATES SECUR									OMB AF	PROVAL	
<b>FURIWI 4</b> UNITED STATES SE				RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to	er STATEN	ox STATEMENT OF CHAI				[CIA	L OWI	NERSHIP OF	Expires:	January 31, 2005	
Section 1 Form 4 or	6.	SECURITIES								verage rs per 0.5	
Form 5 obligation may cont <i>See</i> Instru 1(b).	Public Ut	ection 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940						0.5			
(Print or Type F	Responses)										
1. Name and Address of Reporting Person _       2. Issuer         MURRAY ROBERT J       Symbol				r Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
			IDEXX [IDXX]	LABORA	ATORIE	S IN	C /DE	(Check all applicable)			
(Last)(First)(Middle)3. Date of (Month/DC/O NEW ENGLAND BUSINESS SERVICE INC, 500 MAIN STREET07/29/20				-				X_ Director 10% Owner Officer (give title Other (specify below)			
(Street) 4. If Ame			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check				
Filed(Mon GROTON, MA 01471							Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
								Person			
(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)2. Transaction Date (Month/Day/Year)2A. Deeme Execution I any (Month/Day/Year)			Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8)			Securities Beneficially	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	07/29/2005			А	118 <u>(1)</u>	А	\$ 63.46 (1)	4,250	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)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(Instr. 3, 4, and 5) (A) (D)	Date Exercisable	Expiration Date	Amour or Title Numbe of Shares	er	

er

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Oth		
MURRAY ROBERT J C/O NEW ENGLAND BUSINESS SERVICE INC 500 MAIN STREET GROTON, MA 01471	Х					
Signatures						
Merilee Raines, Attorney-in-Fact for Robert J. Murray	08/02/2005					
<u>**</u> 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).

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

(1) compensation deferred pursuant to the Plan (\$7,500) 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.

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