FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
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Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Gebauer Peter R  (Last) (First) (Middle)							Issuer Name and Ticker or Trading Symbol     LEMAITRE VASCULAR INC [ LMAT ]      Date of Earliest Transaction (Month/Day/Year)     11/15/2013										tionship of Reporting all applicable) Director Officer (give title below)		10% C		Owner (specify	
C/O LEM													sident, Int		,							
63 SECOND AVENUE							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)																	X Form filed by One Reporting Person					
BURLINGTON MA 01803																	Form Perso	filed by Mor on	e than One	Repo	orting	
(City)	(\$	State)	(Z	ip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)							Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5)						3, 4 Secu		cially	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		Report Transa		(mou . 4)		(msu. <del>1</del> )	
Common Stock 11/15/20							2013			S		5,000		D	\$8.45		8,694		D			
	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)	vative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any			Code (Ir	ransaction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)			ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct ( or Indir (I) (Instr 4)	nip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Explanation of Responses:

/s/ Laurie Churchill Attorneyin-Fact 11/19/2013

\*\* Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).