FORM 4

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

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

	Check this box if no longer subject
П	to Section 16. Form 4 or Form 5
Ш	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*  LeMaitre Cornelia W  (Last) (First) (Middle)  C/O LEMAITRE VASCULAR, INC  63 SECOND AVENUE  (Street)  BURLINGTON MA 01803						2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT]  3. Date of Earliest Transaction (Month/Day/Year) 12/10/2012  4. If Amendment, Date of Original Filed (Month/Day/Year)									X C L V Individue)	onship of Reporting Person(s) to Issuer all applicable)  Director 10% Owner  Officer (give title Other (specify below) below)  V.P., Human Resources, Director  dual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting Person		
(City)	(5	tate)	(Zip)															
		Та	ole I - N	lon-Deriv	ative S	Secu	ıritie	s Acc	uired, [	Disp	osed o	f, or	Bene	ficia	Ily O	wned		
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. and 5)						Se Be	Amount of ecurities eneficially wned	6. Ownersh Form: Dire (D) or Indirect (I)	of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	Re Tr	ollowing eported ansaction(s) nstr. 3 and 4)	(Instr. 4)	(Instr. 4)
Common Stock 12/10/20					.012		<b>S</b> <sup>(1)</sup>		100		D	\$6.5		242,834	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, urity or Exercise (Month/Day/Year) if any		tion Date,	Code (li	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 Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)  Amou or Numb of Title Share:		ount nber	8. Price of Derivat Securit (Instr.	derivative Securities Beneficially	Owners Form: Direct (I or Indir (I) (Instr	Beneficial Ownership ect (Instr. 4)	

## Explanation of Responses:

1. The sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan.

/s/ Laurie Churchill, Attorney-In-Fact 12/12/2012

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.

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.