FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
OMB Number: 3235-0							
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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

Name and Address of Reporting Person* LeMaitre Cornelia W				LEI	2. Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT] 3. Date of Earliest Transaction (Month/Day/Year)								5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner					
(Last)	(Fir	st) (M	⁄liddle)		04/24/2015									Officer (give title below) Other (specification)				` '
C/O LEMAITRE VASCULAR, INC														VP, Human Resources, Director				
63 SECOND AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													X	Form	filed by One	Reportin	g Pers	son
BURLINGTON MA 01803														Form filed by More than One Reporting Person				
(City) (State) (Zip)																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transa Date (Month/E				Execution (Year)		emed ion Date, i/Day/Year)		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Se Be Ov		ount of ities ficially d wing	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		Repo Trans		(mstr. 4)		(111501. 4)
Common Stock 04/24/201				15	5			S 2		2,400(1)	D	\$8.63	88.6344(2)		334,240			By spouse
Common Stock 04/27/2015				5			S		5,500(1)	D	\$8.67	\$8.6714(3)		328,740			By spouse	
Common Stock														1	68,319	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	ate Execution Date,			sansaction of of Derivativ Securitie Acquirec (A) or Dispose of (D) (Instr. 3, and 5)		Expir: (Mont	ation I	(Year) Securities Underlying Derivative Security (Instr 3 and 4) Amount or Numbor Of		t of ies ying ive y (Instr.) Amount or Number	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Direct or Int (I) (In 4)	t (D) direct	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

- 1. This transaction was effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$8.60 to \$8.66. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.
- 3. The price reported in Column 4 is a weighted average price. The transaction was executed in multiple trades ranging from \$8.62 to \$8.69. The reporting person undertakes to provide to the issuer, any securityholder of the issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares and price at which the transaction was effected.

Remarks:

<u>Laurie A. Churchill, Attorney-</u> 04/28/2015 in-fact

** Signature of Reporting Person

Date

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

- * 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.