FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
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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

1. Name and Address of Reporting Person* Roberts David B (Last) (First) (Middle) C/O LEMAITRE VASCULAR, INC. 63 SECOND AVENUE						Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT] One of Earliest Transaction (Month/Day/Year) 09/06/2012 4. If Amendment, Date of Original Filed (Month/Day/Year)									X (X)	I applicate Director Officer (groelow) Pres	give title		Owner (specify
(Street) BURLIN (City)	GTON M		21803 Zip)												X		•	Reporting Peresthan One Re	
		Tabl	e I - N	lon-Deriv	ative S	Secu	rities	s Acc	uired, [Disp	osed o	f, or	Bene	ficia	illy 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)						3, 4 Secur Bene Owne		lly	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount (A)		(A) or (D)	Price	R	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)	(Instr. 4)
Common Stock 09/06/2					2012				S		100		D	\$5.9		227,477		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 urity or Exercise Price of Derivative Security Derivative Security Date (Month/Day/Year) if any (Month/Day/Year)		4. Transac Code (Ir 8)	action of			6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str. ount	8. Pric of Deriva Securi (Instr.	tive Sec ty Ben 5) Owr Foll Rep Trai	Number of rivative curities neficially uned llowing ported ansaction (str. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Nicole Brookshire. Attorney-in-Fact 09/06/2012

** 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.

 $^{^{\}star}$ 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).