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 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*  LeMaitre Cornelia W  (Last) (First) (Middle)  C/O LEMAITRE VASCULAR, INC  63 SECOND AVENUE  (Street)  BURLINGTON MA 01803						Issuer Name and Ticker or Trading Symbol LEMAITRE VASCULAR INC [LMAT]      Date of Earliest Transaction (Month/Day/Year)     10/30/2013  4. If Amendment, Date of Original Filed (Month/Day/Year)									X Di X O be V.  Individuence) X Fo	X Officer (give title Other (specify below) below)  V.P., Human Resources, Director  Individual or Joint/Group Filing (Check Applicable le)				
(City)	(State)	(Z	ip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Executive (Year)		Deemed cution Date, ny nth/Day/Year)		Transaction D			4. Securities Acquired (, Disposed Of (D) (Instr. 3 and 5)			Sec Be Ow	amount of urities reficially ned lowing		ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Code	v	Amount		(A) or (D)	Price	Re Tra	eported ransaction(s) nstr. 3 and 4)		. 4)	(mau: 4)			
Common Stock	10/30/2	/2013				S		4,000(	1)	D	<b>\$7</b> .	75	5 190,579		D					
Common Stock 10					013				S		6,000	1)	D	\$7.	75	5 184,579		D		
Common Stock 1					/2013				S		10,000	(1)	D	\$	8	174,579		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security or Exer (Instr. 3) Price of Derivati	/e Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			Code (I 8)	Fransaction of Code (Instr. Derivative				6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date				str. ount	8. Price of Derivati Security (Instr. 5	Beneficiall	Ov Fo Di or (I) 4)	vnership orm: rect (D) Indirect (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## Explanation of Responses:

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

/s/ Laurie A. Churchill, Attorney-in-Fact 11/01/2013

\*\* 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.