

SECURITIES AND EXCHANGE COMMISSION

FORM 3

Filing Date: **2011-11-07** | Period of Report: **2011-10-26**
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REPORTING OWNER

NEFF DEBORAH J

CIK: **1221786**

Type: **3** | Act: **34** | File No.: **001-07928** | Film No.: **111183682**

Mailing Address

*C/O BECTON DICKERSON &
CO
1 BECTON DR
FRANKLIN LAKES NJ 07417*

ISSUER

BIO RAD LABORATORIES INC

CIK: **12208** | IRS No.: **941381833** | State of Incorporation: **DE** | Fiscal Year End: **1231**
SIC: **3826** Laboratory analytical instruments

Mailing Address

*1000 ALFRED NOBEL DR
HERCULES CA 94547*

Business Address

*1000 ALFRED NOBEL DR
HERCULES CA 94547
5107247000*

OMB APPROVAL	
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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person <u>NEFF DEBORAH J</u> (Last) (First) (Middle) <u>191 BRYANT STREET</u> (Street) <u>PALO ALTO, CA 94301</u> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>10/26/2011</u>	3. Issuer Name and Ticker or Trading Symbol <u>BIO RAD LABORATORIES INC [BIO, BIOB]</u>		
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input type="checkbox"/> Officer (give title below) <input type="checkbox"/> Other (specify below)		5. If Amendment, Date Original Filed (Month/Day/Year)
				6. Individual or Joint/Group Filing (Check applicable line) <input checked="" type="checkbox"/> Form Filed by One Reporting Person <input type="checkbox"/> Form Filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
No securities beneficially owned	0	D	

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Signatures

Deborah J Neff

** Signature of Reporting Person

11/04/2011

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.