

PERRIGO CO
Form 3
May 10, 2007

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

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

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Kochan Sharon</p> <p>(Last) (First) (Middle)</p> <p>C/O PERRIGO COMPANY,Â 515 EASTERN AVENUE</p> <p>(Street)</p> <p>ALLEGAN,Â MIÂ 49010</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>05/02/2007</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>PERRIGO CO [PRGO]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other</p> <p>(give title below) (specify below)</p> <p>EVP US Generics</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	---	--	---	--

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)
Common Stock	20,996	D	Â

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

SEC 1473 (7-02)

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 control number.

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	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: PERRIGO CO - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option Right To Buy	09/14/2006	09/14/2015	Common Stock	5,000	\$ 14.69	D	Â
Employee Stock Option Right to Buy	09/14/2007	09/14/2015	Common Stock	5,000	\$ 14.69	D	Â
Employee Stock Option Right to Buy	09/14/2008	09/14/2015	Common Stock	5,000	\$ 14.69	D	Â
Employee Stock Option Right to Buy	09/14/2009	09/14/2015	Common Stock	5,000	\$ 14.69	D	Â
Employee Stock Option Right to Buy	09/14/2010	09/14/2015	Common Stock	5,000	\$ 14.69	D	Â
Employee Stock Option Right to Buy	08/16/2007	08/16/2016	Common Stock	2,500	\$ 15.47	D	Â
Employee Stock Option Right to Buy	08/16/2008	08/16/2016	Common Stock	2,500	\$ 15.47	D	Â
Employee Stock Option Right to Buy	08/16/2009	08/16/2016	Common Stock	2,500	\$ 15.47	D	Â
Employee Stock Option Right to Buy	08/16/2010	08/16/2016	Common Stock	2,500	\$ 15.47	D	Â
Employee Stock Option Right to Buy	08/16/2011	08/16/2016	Common Stock	2,500	\$ 15.47	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Kochan Sharon C/O PERRIGO COMPANY 515 EASTERN AVENUE ALLEGAN, MI 49010	Â	Â	Â EVP US Generics	Â

Signatures

Sharon Kochan 05/09/2007
 **Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.