

PERRIGO CO  
Form 4  
August 18, 2006

**FORM 4**

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

OMB APPROVAL

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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 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)

1. Name and Address of Reporting Person \*  
**HENDRICKSON JOHN T**

(Last) (First) (Middle)

**PERRIGO COMPANY, 515  
EASTERN AVENUE**

(Street)

**ALLEGAN, MI 49010**

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
**PERRIGO CO [PRGO]**

3. Date of Earliest Transaction (Month/Day/Year)  
**06/30/2006**

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
**Exec VP&GM PRGO Con Healthcare**

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V Amount (A) or (D) Price			
Common Stock	08/16/2006		A <sup>(1)</sup>	4,716 A \$ 0	51,795	D	
Common Stock	06/30/2006		I	19 A \$ 0	11,294	I	By Profit Sharing Plan. <sup>(2)</sup>

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

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SEC 1474 (9-02)

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**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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)			
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option Right To Buy	\$ 15.47	08/16/2006		A		5,480		08/16/2007	08/16/2016	Common Stock	5,480
Employee Stock Option Right To Buy	\$ 15.47	08/16/2006		A		5,480		08/16/2008	08/16/2016	Common Stock	5,480
Employee Stock Option Right To Buy	\$ 15.47	08/16/2006		A		5,480		08/16/2009	08/16/2016	Common Stock	5,480
Employee Stock Option Right To Buy	\$ 15.47	08/16/2006		A		5,480		08/16/2010	08/16/2016	Common Stock	5,480
Employee Stock Option Right To Buy	\$ 15.47	08/16/2006		A		5,480		08/16/2011	08/16/2016	Common Stock	5,480

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
HENDRICKSON JOHN T PERRIGO COMPANY			Exec VP&GM PRGO Con Healthcare	

515 EASTERN AVENUE  
ALLEGAN, MI 49010

## Signatures

Todd W. Kingma, Power of Attorney for John T.  
Hendrickson

08/18/2006

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* 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).
- (1) Restricted Stock awarded Mr. Hendrickson in his capacity as Exec VP & General Manager, pursuant to the 2003 Long-Term Incentive Plan.
- (2) By Profit Sharing Plan as of June 30, 2006.

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.