

Letcher John R  
 Form 3/A  
 February 11, 2010

**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)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â Letcher John R		(Month/Day/Year)	PERKINELMER INC [PKI]	
(Last)	(First)	(Middle)	02/01/2010	
940 WINTER STREET			4. Relationship of Reporting Person(s) to Issuer	
(Street)			(Check all applicable)	
WALTHAM, Â MA Â 02451			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) Senior Vice President, HR	
(City)	(State)	(Zip)	5. If Amendment, Date Original Filed(Month/Day/Year)	
			02/05/2010	
			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)
Common Stock	20,973 <sup>(1)</sup>	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 Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable    Expiration Date	Title    Amount or Number of			

Edgar Filing: Letcher John R - Form 3/A

				Shares		(I) (Instr. 5)	
NQ Stock Option (Right to Buy)	Â (2)	01/31/2013	Common Stock	5,000	\$ 22.58	D	Â
NQ Stock Option (Right to Buy)	Â (2)	01/30/2014	Common Stock	16,000	\$ 23.45	D	Â
NQ Stock Option (Right to Buy)	Â (2)	01/29/2015	Common Stock	16,000	\$ 25.02	D	Â
NQ Stock Option (Right to Buy)	Â (2)	02/03/2016	Common Stock	25,000	\$ 12.945	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Letcher John R 940 WINTER STREET WALTHAM, MA 02451	Â	Â	Â Senior Vice President, HR	Â

## Signatures

/s/ John L. Healy (POA on file) for John R.  
Letcher

02/11/2010

\*\*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).

(1) This includes 1,685 shares held in the Reporting Person's Deferred Compensation Plan account.

(2) This option vests in three equal annual installments, beginning one year from the grant date, and may be exercised for seven years from the grant date.

Â

### Remarks:

This amendment is being filed solely to include the Power of Attorney attached as Exhibit 24 here

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.