## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Sectio	n 30(	h) of the	Investm	ent C	Company Act	of 1940								
Name and Address of Reporting Person*     WINQUIST DONNA F						2. Issuer Name and Ticker or Trading Symbol AMETEK INC/ [ AME ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) 37 NORTH VALLEY ROAD BUILDING 4						3. Date of Earliest Transaction (Month/Day/Year) 07/25/2003									X Office (give title Office (specify below)  VP & GENERAL COUNSEL					
(Street) PAOLI PA 19301-0801					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Application)  X Form filed by One Reporting Person												.		
(City)	City) (State) (Zip)				-										Form f Persor		re thar	n One Repo	orting	
				on-Deriv	ative	Sec	curit	ies Ac	quire	d, Di	isposed (	of, or Be	nefic	ially	Owned	<u> </u>				
1. Title of Security (Instr. 3)				2. Transac Date (Month/Da		Exe if ar	ny	ned n Date, ay/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following Reported		es ially Following	Form: I	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)		(Instr. 4)		
Common Stock				07/25/2			М		2,125	A	\$26.2	285(1)	9,	802	D					
Common Stock				07/25/2	3		M		1,875	A	\$37.64		11	,677 D		D				
Common Stock				07/25/2003		_			S		4,000	D	\$39.45		7,	,677		D		
Common Stock																546		I	By self for son & daughter	
Common Stock						T										546		I	By sons	
401K PLAN				07/25/2	07/25/2003				J		1	A	\$0		1,	1,094			401K PLAN	
BY TRUST															3	371			BY TRUST	
Common Stock/SERP															1,1	92.07		D		
		Т	able II								posed of converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date,	4. Transactio Code (Inst 8)		5. Number of		6. Date Exerci Expiration Da (Month/Day/Y		isable and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	mber						
Stock Option	\$19.9375								04/13/2	2001	04/12/2007	Common Stock	1,87	1,875		1,875		D		
Stock Option	\$26.285	07/25/2003			M			2,125	05/22/2	2002	05/21/2008	Common Stock 2,12		5 \$2	.6.285 <sup>(1)</sup>	4,250		D		
Stock Option	\$36.125								05/20/2	2004	05/19/2010	Common Stock	7,50	0		7,500		D		

05/22/2003

## **Explanation of Responses:**

Stock Option

1. Program is rounding. Actual price is \$26.285.

\$37.64

Kathryn E. Londra

Common Stock

05/21/2009

07/28/2003

5,625

\*\* Signature of Reporting Person

1,875

\$37.64

Date

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

07/25/2003

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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.	