FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | S IN BENEFICIAL | OWNERSHIP |
|-----------|------------|-----------------|-----------|

OMB APPROVAL OMB Number: Estimated average burden

0.5

hours per response:

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 Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* ZAPICO DAVID A | | | | | | 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 X Officer (give title Other (specify below) PRES ELECTRONIC INSTRUMENTS | | | | | |
|--|---|--|---|---------|-----------|---|-------|--------------|--|-----|-------------------|--|--|---|--|--------------------------------------|--|--|--|
| (Last) (First) (Middle) 37 NORTH VALLEY ROAD BUILDING 4 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/24/2008 | | | | | | | | | | | | | |
| (Street) PAOLI | PA 19301-0801 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (Si | tate) | (Zip) | | | | | | | | | | | 1 0130 | | | | | |
| | | | le I - No | | | _ | | | <u> </u> | Dis | | | | Ily Owner | | | | | |
| Dai | | | Date | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | | | | Benefic Owned | ties Fo cially (D Following (I) | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) Prid | | | orted saction(s) tr. 3 and 4) | | | (instr. 4) | |
| Common Stock | | | | | | | | | | | | | | 64 | 64,933 | | D | | |
| Common Stock/SERP 01/24/ | | | | | /2008 | 2008 | | | J ⁽¹⁾ | | 941 | A | \$46.5 | 555 10 | 10,495 | | D | | |
| | | Т | able II - | | | | | | | | | , or Ben ble seci | | y Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/D | n Date, | Code (Ins | | on of | | 6. Date Exercisable a Expiration Date (Month/Day/Year) | | | 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisab | | xpiration vate | Title | Amount or Number of Shares | | | | | | |
| Stock Option | \$17.45 | | | | | | | | 05/18/200 | 5 0 | 5/17/2011 | Common Stock | 30,000 | | 30,000 | | D | | |
| Stock Option | \$20.27 | | | | | | | | 09/22/200 | 5 0 | 9/21/2011 | Common Stock | 28,200 | | 28,200 | | D | | |
| Stock Option | \$25.2867 | | | | | | | | 04/27/200 | 6 0 | 4/26/2012 | Common Stock | 22,815 | | 22,815 | | D | | |
| Stock Option | \$33.2667 | | | | | | | | 04/26/200 | 7 0 | 4/25/2013 | Common Stock | 22,485 | | 22,485 | | D | | |
| Stock Option | \$36.44 | | | | | | | | 04/24/200 | 8 0 | 4/23/2014 | Common | 25,720 | | 25,720 | | D | | |

Explanation of Responses:

1. Allocated pursuant to the AMETEK, Inc. Supplemental Executive Retirement Plan under which shares are automatically distributed on a one-for-one basis upon the participant's retirement.

DAVIDA.ZAPICO

01/24/2008

** Signature of Reporting Person

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.