

KOSTELNI JEFFREY C
Form 3
December 21, 2006

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

OMB APPROVAL

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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 and Ticker or Trading Symbol	
Â KOSTELNI JEFFREY C		(Month/Day/Year)	Measurement Specialties Inc [MEAS]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		12/15/2006		
1000 LUCAS WAY			(Check all applicable)	
(Street)			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP Finance	
HAMPTON,Â VAÂ 23666			6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)	<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)
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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 (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable Expiration Date	Title	Amount or Number of Shares		

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Option (right to buy)	05/13/2007 ⁽¹⁾	05/13/2011 ⁽¹⁾	Common Stock, no par value	2,450	\$ 18.9	D	Â
Option (right to buy)	05/20/2007 ⁽²⁾	05/20/2012 ⁽²⁾	Common Stock, no par value	16,000	\$ 21.02	D	Â
Option (right to buy)	11/09/2006 ⁽³⁾	11/09/2011 ⁽³⁾	Common Stock, no par value	500	\$ 24.14	D	Â
Option (right to buy)	11/22/2007 ⁽⁴⁾	11/22/2012 ⁽⁴⁾	Common Stock, no par value	5,000	\$ 23.09	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
KOSTELNI JEFFREY C 1000 LUCAS WAY HAMPTON, VA 23666	Â	Â	Â VP Finance	Â

Signatures

Jeffrey C. Kostelni 12/15/2006

**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) 1,400 exercisable on 5/13/07 (expires 5/13/12) and 1,050 exercisable on 5/13/08 (expires 5/13/13)
- (2) 4,000 shares exercisable each on 5/20/07, 5/20/08, 5/20/09, 5/20/10; 4,000 shares expire each on 5/20/12, 5/20/13, 5/20/14, 5/20/15
- (3) 100 shares exercisable each on 11/9/06, 11/9/07, 11/9/08, 11/9/09, 11/9/10; 100 shares expire each on 11/9/11, 11/9/12, 11/9/13, 11/9/14, 11/9/15
- (4) 1,000 shares exercisable each on 11/22/07, 11/22/08, 11/22/09, 11/22/10, 11/22/11; 1,000 shares expire each on 11/22/12, 11/22/13, 11/22/14, 11/22/15, 11/22/16

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.