## FORM 4

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

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).

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	s)															
Name and Address of Reporting Person * VERONNEAU MARCEL					2. Issuer Name and Ticker or Trading Symbol TECHNE CORP /MN/ [TECH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last	)	(First)	(Middle)	3. Date of Earliest Transacti 05/12/2003				sactio	ion (Month/Day/Year)				X Officer (give title below) Other (specify below)  Vice Pres-Hematology Oper.				
(Street)				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City	)	(State)	(Zip)	Table I - Noi				Non-	-Derivative Securities Acquired, Disposed of, or Beneficially Owned						Owned		
1.Title of S (Instr. 3)	1.Title of Security 2. Transaction Date (Month/Day/Year)		Execution Date, if Code		(A (D (Ir	ion 4. Securities Acquires (A) or Disposed of (D) (Instr. 3, 4 and 5)  V Amount (D) Pric		of	Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Reminder: indirectly.	Report on a	separate line f	or each class of sec	urities	beneficia	ally	owned	l direc	ctly or								
Persons who respond to the collection of information SEC 1474 (9-contained in this form are not required to respond unless 02) the form displays a currently valid OMB control number.																	
			Table II -						/ *		of, or Ben			1		,	
Security	Conversion	3. Transaction Date (Month/Day/Ye		4. Transaction Code Year) (Instr. 8)		)	of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Ame Und Seco	itle and ount of lerlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownershi Form of Derivative Security: Direct (D) or Indirec	(Instr. 4)	
					Code	V	(A)	(D)	Date Exercis		Expiration Date	n Title	Amount or Number of Shares				
Repor	ting O	wners															
Domonti	O N	/			Relation	nshi	ps										
Keporting	Owner Nan	ne / Address	Director 10% Ov	ner (	Officer					Ot	her						
VERONNEAU MARCEL				Vice Pres-Hematology Oper.													

# Signatures

Marcel Veronneau	05/14/2003
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).

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.