FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

yton, 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).

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* DEMERRITT TED C						2. Issuer Name and Ticker or Trading Symbol ITRON INC /WA/ [ITRI]								(Ch	Relationshi eck all ap X Dire	,			
(Last) (First) (Middle) 2818 N. SULLIVAN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 07/01/2005									Offic belo	er (give title w)		ner (specify low)	
(Street) SPOKANE WA 99216 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	e) <mark>X</mark> Forr Forr	lual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,		Code (Instr. 5)						Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect ct Beneficial Ownership		
									Code	v	Amount (A) or (D)		Price	Trans	action(s) 3 and 4)		(Instr. 4)		
Common Stock 07/01/2					/2005	.005		A		225 A		A	\$44.3	4	5,182				
		Та									sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date, T		ransaction ode (Instr.				6. Date Exercisal Expiration Date (Month/Day/Year		7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4)		etr. 3	s. Price of Derivative Security Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Num of Shar						

Explanation of Responses:

By: MariLyn R. Blair, as attorney-in-fact For: Ted C.

07/01/2005

DeMerritt

** 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.