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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB APPROVAL
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1. Name and Addre	ss of Reporting Perso	on*	2. Issuer Name and Ticker or Trading Symbol <u>STERIS CORP</u> [STE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle)		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/06/2012	x	Officer (give title below) V P - Corporate 1	Other (specify below)		
(Street) MENTOR	,		4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	,			
(City)	(State)	(Zip)			Person	ene roporang		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(1150.4)		
Common Shares, No Par Value	07/06/2012		w	v	701	A	\$ <mark>0</mark>	701	Ι	See Footnote Below. ⁽¹⁾		
Common Shares, No Par Value								10,699 ⁽²⁾	D			
Common Shares, No Par Value								500	I	See Footnote Below. ⁽³⁾		
Common Shares, No Par Value								635	I	See Footnote Below. ⁽⁴⁾		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., pare, care, care, optione, contention (contention)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents Common Shares held by a family trust. As of July 6, 2012, the Reporting Person and his brother agreed to become co-trustees of this family trust of which they are co-beneficiaries. The Reporting Person disclaims beneficial ownership of these securities, except to the extent of his pecuniary interest therein.

2. 5,280 of these Common Shares are restricted. The restrictions on these Common Shares lapse as follows: 2,680 on May 20, 2014, 500 on May 31, 2013, 500 on June 2, 2014, 500 on June 1, 2015, 275 on May 30, 2013, 275 on May 30, 2014, 275 on June 1, 2015 and 275 on May 30, 2016.

3. Represents an investment by Mr. Aamoth in his Vanguard William L. Aamoth - Rollover IRA Brokerage Account.

4. Represents 648.151 units of the STERIS Corporation 401(k) Plan STERIS Stock Fund which equals 635 Common share equivalents as of July 6, 2012.

/s/ Dennis P. Patton,

<u>Authorized Representative</u> <u>under Power of Attorney</u> 07/10/2012

** 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.

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