

Measurement Specialties Inc
 Form 4/A
 March 10, 2008

FORM 4

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

OMB APPROVAL

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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, 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 *
TOPFER MORTON L

(Last) (First) (Middle)

1000 LUCAS WAY

(Street)

HAMPTON, VA 23666

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol

Measurement Specialties Inc [meas]

3. Date of Earliest Transaction (Month/Day/Year)

02/29/2008

4. If Amendment, Date Original Filed (Month/Day/Year)

03/04/2008

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing (Check Applicable Line)

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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D) Code V Amount (D) Price			
Common Stock, no par value					1,000	I	By wife ⁽¹⁾
Common Stock, no par value					636,309	I	Castletop Capital, L.P. ⁽²⁾

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

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

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
TOPFER MORTON L 1000 LUCAS WAY HAMPTON, VA 23666		X		

Signatures

Mark Thomson, as Attorney-in-Fact 03/10/2008

**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).
- These shares, which are held by Mr. Topfer's wife, were previously included in the total number of shares directly held by Mr. Topfer.
- (1) The shares were removed from the number of shares directly held by Mr. Topfer in his previous Form 4, but such corrected indirect ownership was inadvertently omitted from the previous Form 4 filing.

- These shares, which are held by Castletop Capital, L.P. (Castletop), a private investment company of which Mr. Topfer is a managing director, were previously included in the total number of shares directly held by Mr. Topfer. The shares were removed from the number
- (2) of shares directly held by Mr. Topfer in his previous Form 4 filing, but such corrected indirect ownership was inadvertently omitted from the previous Form 4 filing. Mr. Topfer disclaims beneficial ownership of the shares held by Castletop except to the extent of his pecuniary interest therein.

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.