FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL					
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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).

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* BARKER PETER K							2. Issuer Name and Ticker or Trading Symbol AVERY DENNISON CORPORATION [Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
DANKERTETEKK							AVY]								Directo	or		10% Ov	vner			
							-									(give title		Other (s	specify			
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)								below)			below)				
2121 AVENUE OF THE STARS							09/30/2010															
(Street)		4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)											
LOS ANGELES CA 90067														X Form filed by One Reporting Person								
LOS ANGELES CA 5000/														Form filed by More than One Reporting								
(City) (State) (Zip)															Person							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																						
1. Title of	Security (Inst	tr. 3)	tion		2A. Deem	ed	3.			ities Acquir			Amou	int of 6. O		vnership	7. Nature					
Date						Execution Date						d Of (D) (Ins	str. 3, 4 aı		Securities F				of Indirect Beneficial			
(Month/Day							ii aiiy (Month/Da	ay/Yea						0	wned F	=ollowing (ì) (Ir		nstr. 4)	Ownership			
								Code V Amount		(A) or Price		Iт.	Reported Transaction(s)				(Instr. 4)					
										V	Amount (D)		Price	(li	nstr. 3	and 4)						
Table II. Derivative Convities Assuired Disposed of as Baneficially Owned																						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of	2.	3. Transaction	3A. Deemed	4.	4.		5. Number		6. Date Exercisa		able and 7. Title and		d	8. Pr	ice of	9. Number	of	10.	11. Nature			
Derivative	Derivative Conversion Date Execution Date, 1			ate, Tr	ansa	ction	ction of		Expiration Date Amount of				f	Derivative		derivative		Ownership				
Security or Exercise (Month/Day/Year) if any (Instr. 3) Price of (Month/Day/Year)				Code (Instr. 3)		Securities Acquired		(Month/Day/Year) Securities Underlying					Security (Instr. 5)		Securities Beneficially		Form: Direct (D)	Beneficial Ownership				
,,	Derivative							Derivative Secu							Owned Following		or Indirect	(Instr. 4)				
	Security					(A) or Unstr. 3 and 4)										Reported		(I) (Instr. 4)				
						of (D)										Transaction(s)						
						(Instr. 3, 4 and 5)									(Instr. 4)							
					$\neg \neg$					Т			Amoun									
													or									
									Date	E	piration		Number of									
				C	ode	٧	(A)	(D)	Exercisable	Da	ate	Title	Shares									
Common Stock Units	\$0	09/30/2010		A	(1)		702.3		08/08/1988	08	3/08/1988	Common Stock	702.3		60	7,924.6	i9	I	DDECP			

Explanation of Responses:

1. Stock units were acquired by the reporting person pursuant to the Avery Dennison Corporation Non-Employee Director Deferred Equity Compensation Program ("DDECP") in a transaction exempt under Rules 16a-11 and 16b-3(d).

> Barbara M. Bartoletti for Peter K. Barker

10/01/2010

** 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.