FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL
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hours per response

OMB Number: 3235-0287 Estimated average burden

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

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

Name and Address of Reporting Person*     Mitchell David T.						2. Issuer Name and Ticker or Trading Symbol Fabrinet [FN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Mitchell David T.							-						X	Director		X	10% Ow	ner	
(Last)	(First) (Middle)												X	Officer (g below)	jive title		Other (s below)	pecify	
C/O FABRINET					3. Date of Earliest Transaction (Month/Day/Year)									CEO & Chairman					
4104 24TH STREET #345					11/10/2011														
(Street)				_															
SAN CA 94114				4. If Amendment, Date of Original Filed (Month/Day/Year) 11/16/2011									6. Individual or Joint/Group Filing (Check Applicable Line)						
FRANCISCO		34114											X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
(City)	()	State)	(Zip)																
		-	Table I - Non-l	Deriva	tive S	Securitie	s Acc	quired,	Dis	posed o	f, or B	enef	icially C	Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Da		Date,	e, Transaction Dispose Code (Instr.			es Acqui Of (D) (In			Beneficially Ow Following		Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A)	or	Price	Reported Transaction (Instr. 3 and				Instr. 4)	
Ordinary Shares 11/10						/2011		А		63,739 <sup>(1)(2)</sup> A		A	\$0	63,739(1)			D		
			Table II - Do											vned					
			(e	.g., pu	ıts, ca	alls, warr	ants,	, optior	1S, C	onvertil	ole sec	uriti	es)						
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)	Code (Instr.		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)				es Un ve Se		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)		Date Exercisab		Expiration Date	Title	Nu	nount or imber of ares		Transaction(s) (Instr. 4)				
Stock Option (right to	\$14.12	11/10/2011		A		129,828 <sup>(1)</sup>		12/10/201	1(3)	11/10/2018	Ordinar Shares	12	29,828(1)	\$0	129,82	28 <sup>(1)</sup>	D		

## Explanation of Responses:

- 1. Due to an administrative error, the number of securities reported pursuant to this transaction in the Reporting Person's original Form 4 was incorrect. This amendment reflects the correct number of options and RSUs, as applicable, received by the Reporting Person and the correct number of shares beneficially owned by the Reporting Person following the reported transaction.
- 2. Each share is represented by a Restricted Stock Unit ("RSU"). The RSUs will vest in equal annual installments over a period of four years on the anniversary date of the RSU grant, provided that the Reporting Person is a service provider on each such vesting date.
- 3. The shares subject to the option vest in equal installments of 1/48 per month until fully vested and exercisable.

Andrew Chew, Attorney-in-fact for David T. Mitchell

11/17/2011

\*\* 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.