SCHROCK MICHAEL V Form 4 April 15, 2003 1. Name and Address of Reporting Person Schrock, Michael V. 1500 County Road B2 West Suite 400 St. Paul, MN 55113-3105 USA 2. Issuer Name and Ticker or Trading Symbol Pentair, Inc. (PNR) 3. IRS or Social Security Number of Reporting Person (Voluntary) 4. Statement for Month/Day/Year 04/14/2003 5. If Amendment, Date of Original (Month/Day/Year) 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) () 10% Owner () Director (X) Officer (give title below) () Other (specify below) President, COO Enclosures 7. Individual or Joint/Group Filing (Check Applicable Line) (X) 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 	action action Date Date (Month/ (Month	Code / ++	osed of (D) Secur Bened Owned Folld -++Repor A/D Price Trans
Common Stock Common Stock - ESPP	04/14/2003	A V 25.944	42360 A \$36.1355 1302