FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* WELLAND DAVID R						2. Issuer Name and Ticker or Trading Symbol SILICON LABORATORIES INC [SLAB]									all app		ng Person	10% C	wner
(Last) (First) (Middle) 4635 BOSTON LANE					3. Date of Earliest Transaction (Month/Day/Year) 09/02/2003								X		Officer (give title pelow) Vice F		Other (specify below)		
(Street) AUSTIN (City)			78735 Zip)		4. If	Amen	dment,	, Date (of Origir	nal File	ed (Month/Da	ay/Year)		6. Indiv Line) X	Forn	or Joint/Group on filed by One on filed by Mor oon	e Repo	orting Pers	on
		Tabl	e I - N	on-Deriv	/ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ially (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date		Date,	Transaction Disposed C		es Acquired (A) or Of (D) (Instr. 3, 4 a		and 5) Secu Bene		icially d Following	Form (D) o	vnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) o (D)	Price		Trans	action(s) 3 and 4)			(11150.4)
Common	Stock, \$0.0	001 par value		09/02/	2003				S		30,000	D	\$44.	2134	4,9	960,131		D	
		Та	ble II								osed of, convertib				vned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Security 3. Transaction Date (Month/Day/Year)		Executi if any			ansaction ode (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)			and it of ties ying tive ty (Instr. 3	Deriv Secu (Insti		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	O F D O (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
		Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	of Shares									

Explanation of Responses:

David R. Welland

09/03/2003

** 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.