FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | |
| Estimated average h | nurden | | | | | | | |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB Number: 3235-0287 | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| Estimated average burden | | | | | | | |
| hours per response: | 0.5 | | | | | | |

| 1. Name and Address of Reporting Person PRISING JONAS | | | | | MANPOWER INC /WI/ [MAN] | | | | | | | | | (Ch | eck all appli Directo | cable) | ig Pers | 10% O Other (| wner | |
|---|---|---|---|---------|---------------------------|--|---|--------|-------------------|----------------------------|--------------------|--|--|------------------------------|---|---|--------------------------------------|--|---------------------------------------|--|
| (Last) MANPO 100 MA | 02/ | 3. Date of Earliest Transaction (Month/Day/Year) 02/19/2008 | | | | | | | | | Exec V | below) below) Exec VP US and Canadian Oper. | | | | | | | | |
| (Street) MILWAU (City) | | | 53212 (Zip) | | . 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | e) X Form: Form: | vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - Noi | n-Deriv | ative | Se | curiti | ies Ac | quired, | Dis | posed o | of, or | Bene | eficial | ly Owned | d | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Trans Date (Month/I | | ay/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (Instr. | | | | (A) or 3, 4 and | Securiti Benefic Owned | 5. Amount of Securities Beneficially Owned Following | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (| A) or D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | | |
| Common | Stock | | | 02/19 | 0/2008 | 3 | | | М | | 2,575 | 5 | A | (1) | 5,95 | 1.4547 | 547 D | | | |
| Common | Stock | | | 02/19 | 9/2008 | 3 | | | F | | 910 | | D | \$54.3 | 5 5,04 | 41.4547 D | | | | |
| | | 1 | able II - | | | | | | | | osed of onverti | | | | Owned | | | | | |
| Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Da | Date, | | Transaction Code (Instr. | | n of | | ercisa n Date ny/Yea | | Amou Secu Unde Deriv | le and unt of rities rlying rative So : 3 and | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | ٧ | (A) | | Date Exercisab | | xpiration ate | Title | 0 N 0 | lumber | | | | | | |
| Restricted Stock | (1) | 02/19/2008 | | | M | | | 2,575 | 02/19/200 | 08 0 | 2/19/2008 | Comr | | 2,575 | (1) | 2,574.: | 2 | D | | |

Explanation of Responses:

1. These restricted stock units were settled in shares of Manpower common stock on a 1 for 1 basis upon vesting.

Remarks:

Michael J. Van Handel (pursuant to Power of Attorney 02/20/2008 previously filed)

** 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.