

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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nours per response 0				

#### INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)									
1. Name and Address of Reporting Person *  Rees Diane  2. Date of Event Statement (Mont 07/14/2006)			3. Issuer Name an Lexaria Corp.	nd Ticker or Trading Symbol [*******]					
(Last) (First) (Middle) 1259 INGLEWOOD AVENUE	07/14/2000		Issuer		\ /	5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) WEST VANCOUVER, A1 V6E 3Z3				ector 10% Owner  icer (give title Other (specify		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WEST VANCOUVER, AT VOE 323				ncial Officer, PAG	— Form fil	led by More than One Reporting Person			
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)		2. Amount of Se Beneficially Ow (Instr. 4)	ned	1	4. Nature of Indire (Instr. 5)	ct Beneficial Ownership			
Common	50,000		D						
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  SEC 1473 (7-02)  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 control number.  Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and A Securities Un Security (Instr. 4)	Amount of nderlying Derivativ	Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
	Date Expirat Exercisable Date	Title Amount	nt or Number of	Security	(D) or Indirect (I) (Instr. 5)				

### **Reporting Owners**

		Relationships			
Reporting Owner Name / Address		Director	10% Owner	Officer	Other
	Rees Diane 1259 INGLEWOOD AVENUE WEST VANCOUVER, A1 V6E 3Z3	X		Chief Financial Officer, PAO	

# **Signatures**

Diane Rees	07/14/2006
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.