## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287 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

1. Name and Address	of Reporting Person*	D S III I D	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>TTM TECHNOLOGIES INC</u> [ TTMI ]		ionship of Reporting P all applicable)	erson(s)	to Issuer
<u>IIIATEK EQU</u>			L		Director	Х	10% Owner
(1.001)	(First)	(Middle)		4	Officer (give title below)		Other (specify below)
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/29/2003		201011)		50.011)
	ANIA AVENUE NW	/	09/29/2003				
SUITE 350							
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Fil	0.	,
WASHINGTON	DC	20004			Form filed by One R		
				X	Form filed by More 1	han One	e Reporting Person
(City)	(State)	(Zip)					

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Ac Disposed Of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(1150. 4)
Common Stock	09/29/2003		S <sup>(1)</sup>		1,612,160	D	\$12	3,403,254	[ <sup>(2)</sup>	By Circuit Holdings, L.L.C.
Common Stock	09/29/2003		J <sup>(3)</sup>		0	A	\$0	1,356,663	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

Deriv	tle of vative urity (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (li 8)		5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerc Expiration Da (Month/Day/Y	ate	7. Title and An Securities Un Derivative Se 3 and 4)	derlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		

STE 350			
(Last) 1455 PENNSYLVA	(First) ANIA AVE NW	(Middle)	
1. Name and Address of <u>TC EQUITY PA</u>	of Reporting Person <sup>*</sup>		
(City)	(State)	(Zip)	
(Street) WASHINGTON	DC	20004	
SUITE 350	ANIA AVENUE NW		
(Last)	(First)	(Middle)	

Explanation of Responses:

1. Sale in connection with the Issuer's secondary public offering.

2. Thayer Equity Investors III, L.P. ("Thayer III") is the managing member of Circuit Holdings, L.L.C. TC Equity Partners, L.L.C. is the general partner of Thayer III.

3. Reported in conjunction with the common stock sale by Circuit Holdings, L.L.C., an affiliate of the Reporting Person.

By TC Equity Partners, L.L.C., its<br/>general partner10/01/2003By Barry E. Johnson, Authorized<br/>Person, Secretary, Treasurer &<br/>CFO10/01/2003

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.

\*\* Signature of Reporting Person

Date