FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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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* Sayler Bryan H		Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 01/01/2023 3. Issuer Name and Ticker or Trading Symbol ESCO TECHNOLOGIES INC [ESE]							
l	AYTON RO	(Middle) OGIES INC OAD 63124 (Zip)	-		4. Relationship of Reportir Issuer (Check all applicable) X Director X Officer (give title below) CEO & President of the P	10% C Other below) Owner (specify	A Person	/Year) bint/Group Filing e Line) by One Reporting by More than One	
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	3. Own Form: I (D) or I (I) (Inst	Direct C	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock					20,514	I)			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
Ex		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative S (Instr. 4)		4. Conversion Exercise Price of	se Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
					Amount or Number	Derivative Security	Direct (D) or Indirect (I) (Instr. 5)			

Explanation of Responses:

Remarks:

Power of Attorney on file

<u>Jeffrey D. Fisher,</u> <u>Attorney-In-Fact</u>

01/03/2023

** 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 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.

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.