FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, 5.5. 20045	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0		
STATEMENT OF STIANGES IN BENEFICIAL SWILLISHIN				

OMB Number:	3235-0287
Estimated average bu	rden
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* <u>HERLITZ JOHN E</u>						2. Issuer Name and Ticker or Trading Symbol WINNEBAGO INDUSTRIES INC [WGO]									ck all applic	or 10% O		wner	
(Last) (First) (Middle) WINNEBAGO INDUSTRIES, INC.				3. Date of Earliest Transaction (Month/Day/Year) 11/30/2007									Officer below)	(give title		Other (below)	specify		
P.O. BOX 152					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line)									plicable				
(Street) FOREST	t) EST CITY IA 50436												,	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate) (Zip)																
		Tab	le I - Non	-Deriv	ative	Se	curities	s Ac	quired, I	Dis	osed o	f, or Be	nefic	cially	Owned	ı .			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar) E	A. Deemed execution Date, fany Month/Day/Year)		Code (II	Transaction Disposed Of (E Code (Instr. 5)		ies Acquired (A) or Of (D) (Instr. 3, 4 ar			5. Amour Securitie Beneficia Owned F Reported	es Form ally (D) of following (I) (II		nership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V Amount (A) or (D)		Pri	ice	Transact	saction(s) r. 3 and 4)			(111341. 4)							
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date Execution Date, if any (Month/Day/Year)				4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		expiration pate	Title	Amo or Num of Shar	ber					
Winnebago Stock Units ⁽¹⁾	(1)	11/30/2007			A		119 ⁽²⁾		(1)		(1)	Common Stock	119) (2)	\$21.85	4,107 ⁽³	3)	D	

Explanation of Responses:

- 1. Winnebago Stock Units are accrued under the Winnebago Industries, Inc. Directors Deferred Compensation Plan and are to be settled 100% in Winnebago common stock upon the earliest of the following events: reporting person's termination of service as a director, death, disability or a "change in the effective control of the Company" as defined in the Plan pursuant to an election made by reporting person on
- $2. \ Represents \ amount \ of \ Winnebago \ Stock \ Units \ acquired \ by \ reporting \ person \ on \ the \ transaction \ date.$
- 3. Represents total amount of Winnebago Stock Units held by reporting person in Winnebago Industries, Inc. Directors Deferred Compensation Plan as of reporting date.

/s/ Raymond M. Beebe, Secretary, Winnebago Industries, Inc. under Power of

12/03/2007

<u>Attorney</u>

** 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.