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 Add THOMSON	N/	Date of Event equiring Staten Month/Day/Year 6/28/2004	nent	3. Issuer Name and Ticker or Trading Symbol INFORMATION HOLDINGS INC [IHI]								
(Last) (First) (Middle) METRO CENTER		(Middle)			4. Relationship of Reporting Perso (Check all applicable) Director X	. ,		5. If Amendment, Date of Original Filed (Month/Day/Year)				
ONE STATION PLACE					Officer (give title Other (specify below) below)			6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street)								X Form filed b	y One Reporting Person			
STAMFORD	CT	06902						Form filed b Reporting P	y More than One erson			
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Expir			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversio or Exercis	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title	Amount or Number of Shares	Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)				

Explanation of Responses:

Remarks:

No securities are beneficially owned. For further information, see the Schedule 13D filed with respect to Information Holdings Inc.

No securities are beneficially owned.

/s/ Deirdre Stanley (on behalf 07/08/2004 of The Thomson Corporation)

** 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.