## Edgar Filing: SHALLISH ROBERT D JR - Form 4

SHALLISH Form 4 April 07, 20	ROBERT D JR							
FORM	ΠΛ				OMB AP	PROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 o Form 5 obligatio may con	ger o 16. or Filed pursuant t	SECURITIES o Section 16(a) of the Secu	NGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934, Itility Holding Company Act of 1935 or Secti			Expires: January 31, 2005 Estimated average burden hours per response 0.5 n		
See Instr 1(b).		h) of the Investment Comp	any Act of 194	0				
(Print or Type	Responses)							
	Address of Reporting Person 2	2. Issuer Name and Ticker Symbol CONMED CORP [CN]	Issuer					
(Last)	(First) (Middle)	3. Date of Earliest Transaction	-	(Check	all applicable	)		
. ,	1ED CORP, 525	(Month/Day/Year) 03/31/2011		Director 10% Owner X_ Officer (give title Other (specify below) Vice President/Finance/CFO				
	(Street)	4. If Amendment, Date Origi	nal	6. Individual or Joint/Group Filing(Check				
UTICA, N	Y 13502-5994	Filed(Month/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) (Zip)	Table I - Non-Derivati	ve Securities Aca	uired. Disposed of.	or Beneficiall	v Owned		
1.Title of Security (Instr. 3)	any	eemed 3. 4. Sect tion Date, if Transaction(A) or	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect		
Common Stock	03/31/2011	A V 313	A \$ 24.966	25,561	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 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	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SHALLISH ROBERT D JR C/O CONMED CORP 525 FRENCH ROAD			Vice President/Finance/CFO				
UTICA, NY 13502-5994							
Signatures							
Daniel S. Jonas for Robert D. S Attorney	hallish by l	Power of	04/07/2011				
<u>**</u> Signature of Report	ing Person		Date				

## **Explanation of Responses:**

\* 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. 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.