Edgar Filing: SHALLISH ROBERT D JR - Form 4

SHALLISH F Form 4 October 02, 2	ROBERT D JR									
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN BENEFICIAL OWNERSHI SECURITIES				Expires: Estimated a burden hou response	ours per	
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type Responses)										
1. Name and Address of Reporting Person 2. Issuer Name and SHALLISH ROBERT D JR SHALLISH ROBERT D JR Symbol CONMED COR					Issuer					
(Last)	(First) (M	fiddle) 3. Dat	e of Earliest T	ransaction			(Cheo	ck all applicable	e)	
C/O CONMI FRENCH RO	Aonth/Day/Year) 9/30/2008				Director 10% Owner X Officer (give title Other (specify below) below) Vice President Finance & CFO					
			nendment, Date Original Ionth/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
UTICA, NY	13502-5994							More than One Re		
(City)	(State)	(Zip) T	able I - Non-I	Derivative	Secur	ities Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed	3. if Transacti Code	4. Securi on(A) or D (D) (Instr. 3,	ties A ispose 4 and (A) or	cquired d of 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
common stock	09/30/2008	10/01/2008	А	64	A	\$ 30.4	14,439	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
SHALLISH ROBERT D JR C/O CONMED CORP 525 FRENCH ROAD UTICA, NY 13502-5994			Vice President Finance & CFO					
Signatures								
Heather L. Cohen for Robert D Attorney	. Shallish	, Jr. by Powe	er of 10/02/2008					
<u>**</u> Signature of R	eporting Pers	son	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.