Edgar Filing: CONMED CORP - Form 4

CONMED CO	ORP								
Form 4									
May 19, 2005	5								
FORM	4							PPROVAL	
	UNITED S	TATES SECUR Was	shington, l			COMMISSION	OMB Number:	3235-0287	
Check this if no longe	ar.						Expires:	January 31,	
subject to	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF				Estimated a	2005 average			
Section 16		SECURITIES					burden hours per		
Form 4 or Form 5				a	F 1		response	0.5	
obligation		uant to Section 10							
may contin	nue. Section 17(a)) of the Public Ut					n		
See Instru	ction	30(h) of the In	vestment	Company	ACI 01 19	40			
1(b).									
(Print or Type R	esponses)								
× 71	1 /								
	ddress of Reporting Po S WILLIAM	erson <u>*</u> 2. Issuer Symbol	Name and '	Ticker or T	Frading	5. Relationship of Issuer	f Reporting Per	son(s) to	
	CONMI	CONMED CORP [CNMD]							
(Last)	(First) (M	iddle) 3. Date of	Earliest Tra	nsaction	-	(Cheo	ck all applicable	e)	
()	((Month/D		insuction		X Director	10%	6 Owner	
621 PATIO		05/17/2005			Officer (give title Other (specify below)				
	4. If Ame	4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
	Filed(Mon	Filed(Month/Day/Year)			Applicable Line)				
ONEIDA, N	Y 13421					_X_ Form filed by Form filed by M Person	One Reporting Po More than One Ro		
(City)	(State) (Z	Zip) Tabl							
		1 401	e I - Non-De	erivative S	securities Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction Date		3. Transactio	4. Securit		5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	Transactio Code	Disposed		Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(11501.5)		(Month/Day/Year)	(Instr. 8)	(Instr. 3,		Owned	Indirect (I)	Ownership	
						Following	(Instr. 4)	(Instr. 4)	
					(A)	Reported Transaction(s)			
					or	(Instr. 3 and 4)			
Common			Code V	Amount	(D) Price				
Stock						9,008	D		
STOCK									

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. Transactio Code (Instr. 8)	5. Number owf Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		88 11 55 ((
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Options to purchase common stock	\$ 31.4	05/17/2005		А	4,500	05/17/2006	05/17/2015	Common Stock	4,500	

Reporting Owners

Reporting Owner Name / Addres	Relationships					
	Director	10% Owner	Officer	Other		
MATTHEWS WILLIAM 621 PATIO CIRCLE DRIVE ONEIDA, NY 13421	Х					
Signatures						
/s/ William D. Matthews	05/19/2003	5				
**Signature of Reporting	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.

Person