JONAS DANIEL Form 4 May 18, 2011

### FORM 4

Check this box

if no longer

Section 16.

Form 4 or

subject to

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

(Last)

FRENCH ROAD

1. Name and Address of Reporting Person \* JONAS DANIEL

(First)

(Street)

C/O CONMED CORP, 525

(Middle)

2. Issuer Name and Ticker or Trading Symbol

CONMED CORP [CNMD]

3. Date of Earliest Transaction (Month/Day/Year) 05/16/2011

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to

**OMB** 

Number:

Expires:

response...

**OMB APPROVAL** 

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

Issuer

(Check all applicable)

Director 10% Owner \_X\_\_ Officer (give title \_ \_ Other (specify below)

VP Legal Affairs, Gen. Counsel

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

UTICA, NY 13502-5994 Person

(City)	(State) (	Zip) Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	05/16/2011		M	800	A	\$0	7,082	D	
Common Stock	05/16/2011		F	290	D	\$ 27.69	6,792	D	
Common Stock	05/17/2011		M	800	A	\$ 0	7,592	D	
Common Stock	05/17/2011		F	290	D	\$ 27.89	7,302	D	

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

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SEC 1474 (9-02)

> 8. F Der Sec (Ins

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	Deri Secu Acq (A) Disp of (I	osed D) er. 3, 4,	6. Date Exer Expiration D (Month/Day)	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Rsus (restricted Stock Units)	\$ 0	05/16/2011		M		800	<u>(1)</u>	05/16/2016	Common Stock	800
Rsus (restricted Stock Units)	\$ 0	05/17/2011		M		800	<u>(1)</u>	05/17/2017	Common Stock	800

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
JONAS DANIEL			WDI 1					
C/O CONMED CORP			VP Legal					
525 FRENCH ROAD			Affairs, Gen.					
UTICA, NY 13502-5994			Counsel					

# **Signatures**

Daniel S. Jonas 05/18/2011

\*\*Signature of Reporting 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).

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Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.01 per share of

(1) ConMed Corporation (the "Company") and will be subject to the terms and conditions of the Company's 2006 Stock Incentive Plan, with the RSUs generally vesting over a five year period with the first 20% of the RSU's vesting one year after the grant date.

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.