FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPRO	OMB APPROVAL							
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 Address of Reporting Person*  JONAS DANIEL						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [ CNMD ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last)	(Fir	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 12/31/2008										A b	fficer (give title elow) P Legal Affai	b	elow)	
	IMED COR NCH ROAI																		
525 FRE	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)														- 1	,	orm filed by On	e Reporting	Pers	on
UTICA	NY		3502-5	5994												Form filed by More than One Repo Person			orting
(City)	(Sta	ate) (Ž	Zip)																
		Tabl	e I - No	on-Deriv	ative S	Secu	ıritie	s Acc	quired,	Dis	posed o	f, or I	3en	eficia	lly Ov	ned			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5)						Se Be Ow	Amount of curities neficially ned lowing	6. Owners Form: Dire (D) or Indirect (I) (Instr. 4)	ect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (D	) or )	Price	Re Tra	ported insaction(s) str. 3 and 4)	(11150: 4)		(11150. 4)
Common Stock 12/31/2						008		P		78		A	\$22.7	74	2,571	D			
		Та		- Derivat (e.g., ρι							sed of, onvertib				Own	ed			
1. Title of Derivative Security (Instr. 3)	ve Conversion Date, or Exercise (Month/Day/Year) if any			4. Transac Code (li 8)		of Deriv Secu Acqu (A) o Disp of (D	osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		,	8. Price of Derivati Security (Instr. 5	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ship (D) rect	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or Nu of	mber ares					

Explanation of Responses:

Daniel S. Jonas

01/05/2009

\*\* Signature of Reporting Person Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).