FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

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)		3. Date of Earliest Transaction (Month/Day/Year) 07/01/2005									Offic belo	er (give title	Oth beld	er (specify w)					
(Street) SYRACUSE NY 13203 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - N	on-Deriv	ative S	Secu	ıritie	s Acc	uired, l	Disp	osed o	f, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Exec if any	Deemed cution Date, ny nth/Day/Year)		3. 4. Securit Transaction Code (Instr. 8) and 5)						Secur Bene Owne	rities ficially ed	6. Ownership Form: Direct (D) or Indirect (I)	of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	or	Price			(Instr. 4)	(Instr. 4)	
Common Stock 07/01/2						2005			A		116 A		A	\$23.8		774	D		
		Та	ble II	- Derivat (e.g., pı							sed of, onvertib				Owned	I			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, n/Day/Year)	4. Transac Code (li 8)		5. Number of 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 Securities Underlying Derivative Security (Inst 3 and 4)		o D S (I	Price f erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	nber					

Explanation of Responses:

/s/ Daniel Jonas

07/01/2005

** Signature of Reporting Person

Date

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

- * 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.

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.