FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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

1. Name and Address of Reporting Person* JONAS DANIEL					CO	2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]										licable)	ng Person(s) to	Issuer Owner	
(Last)	(Fire	,	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/31/2015								X	below	,	belov	Other (specify below) Gen. Counsel	
525 FRENCH ROAD				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							′ I	6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) UTICA	NY	1	13502-5994											X	Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
		Tabl	eI-	Non-Deriv	ative	Secu	ıritie	s Ac	quired	l, Di	sposed o	f, or B	enefici	ally	Owne	d			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				ear) E	Execution Date,		3. 4. Securities Acq Disposed Of (D) (5) 5)						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	e Tr		ted action(s) 3 and 4)	(1134: 4)	(msu. 4)		
Common Stock 03/31/201				15		Α	V	244	A	\$47.9	9655 1		2,812	D					
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)	vative irity or Exercise Price of Derivative Security Date (Month/Day/Year) if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (I	saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		rative rities ired r osed) :. 3, 4	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amoun or Numbe of Title Shares				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership			

Explanation of Responses:

<u>Daniel S. Jonas</u> <u>04/02/2015</u>

** 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.

^{*} 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).