FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287

hours per response:

0.5

	Check this box if no longer subject
П	to Section 16. Form 4 or Form 5
Ш	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* <u>DANIELS BRUCE</u>					2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(Fire	st) (N		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2012									Officer (give title below)			Other (specif below)			
406 ROS	S COURT				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) NEW HARTFO					Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City)	(Sta	(State) (Zip)																	
		Table	e I - N	on-Deriv	ative S	ecu	rities	s Acq	uired, l	Disp	osed of,	or Ben	eficiall	y Owned					
Date				2. Transac Date (Month/Da	- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securiti Disposed and 5)			5. Amou Securitie Beneficia Owned	es ally	Form (D) or Indire	: Direct c r E ect (I) C	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Followin Reported Transact (Instr. 3	ted action(s)		str. 4) (II	nstr. 4)	
Common Stock 06/01/2					012				M		200	A	\$0	2,000		D			
Common	Stock			06/01/2	012				M		3,000	A	\$0	5,000			D		
			Tab								sed of, or			vned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Conversion or Exercise (Month/Day/Year) Price of Derivative		eemed tion Date, n/Day/Year)	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercisab Expiration Date (Month/Day/Year)		ite	7. Title a Amount Securitie Underlyi Derivativ Security and 4)	of s ng e	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares						
Rsus (restricted Stock Units)	\$0	06/01/2012			M			200	(1)		06/01/2019	Common Stock	200	\$0	400		D		
Rsus (restricted Stock Units)	\$0	06/01/2012		М				3,000	06/01/2012 ⁽²		06/01/2021	Common Stock	3,000	\$0	0		D		
Rsus (restricted Stock Units)	\$0	06/01/2012			A		3,000		06/01/201	13 ⁽²⁾	06/01/2022	Common Stock	3,000	\$0	3,000	0	D		
Sars (Stock Appreciation	\$26.09	06/01/2012			A		1,000		06/01/201	3(3)	06/01/2022	Common	1,000	\$0	1.000	0	D		

Explanation of Responses:

- 1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.01 per share of ConMed Corporation (the "Company") and will be subject to the terms and to vest and be delivered upon the Director's termination of service provided the Director has completed one full year of service since the date of the award.
- 2. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.01 per share of ConMed Corporation (the "Company") and will be subject to the terms and conditions of the Company's 2007 Amended and Restated Non-Employee Director Equity Compensation Plan, with the RSUs generally vesting 100% after a one year period.
- 3. The stock appreciation rights ("SARs") were granted under the Company's 2007 Amended and Restated Non-Employee Director Equity Compensation Plan, with the SARs generally vesting 100% after a one year period.

Daniel S. Jonas for Bruce F. Daniels by Power of Attorney

06/04/2012

** Signature of Reporting Person

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.	