Edgar Filing: CHEMED CORP - Form 4

CHEMED	CORP									
Form 4										
May 22, 20										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							т	OMB APPROVAL		
	UNITEE	DSIAIES		ashingtor				COMMISSION	OMB Number:	3235-0287
if no lo	this box								Expires:	January 31, 2005
subject	to STATE	STATEMENT OF CHA			NGES IN BENEFICIAL OWN SECURITIES			VNERSHIP OF	Estimated	
Section Form 4									burden hou response	
Form 5		Filed nursuant to Section 1				6(a) of the Securities Exchange Act of 1934,				
obligat	ions Section 17							of 1935 or Sectio	n	
may co See Ins	ntinue. truction			Investmen	•	-	•			
1(b).	uueuon					•				
	_									
(Print or Type	e Responses)									
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting F							f Reporting Per	rson(s) to		
OTOOLE TIMOTHY S Syn				ymbol				Issuer		
СН			CHEN	CHEMED CORP [CHE]				(Check all applicable)		
(Last)	(First)	(Middle)	3. Date	of Earliest	Fransaction	n		× ×	11	,
			(Month/Day/Year) 05/21/2007			X_ Director 10% Owner X_ Officer (give title Other (specify				
	H STREET	233	05/21/	2007				below)	below)	
L/101 511	IGIREEI							execut	tive vice presid	ent
	(Street)			nendment, I	-	nal		6. Individual or J	oint/Group Fili	ng(Check
			Filed(M	lonth/Day/Ye	ar)			Applicable Line) _X_ Form filed by	One Reporting P	erson
CINCINNATI, OH 45202				Form filed by M					Iore than One Reporting	
								Person		
(City)	(State)	(Zip)	Та	ble I - Non-	Derivativ	e Seci	urities Ac	cquired, Disposed o	f, or Beneficia	lly Owned
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership	7. Nature of
Security (Instr. 3)	(Month/Day/Year)	Execution 1	Date, if	Transactio Code	n(A) or Di (Instr. 3,			Securities Beneficially	Form: Direct (D) or	Indirect Beneficial
(msu. <i>5)</i>		any (Month/Da	y/Year)	(Instr. 8)	(insu: 5,	4 anu	5)	Owned	Indirect (I)	Ownership
		·	•					Following	(Instr. 4)	(Instr. 4)
						(A)		Reported Transaction(s)		
				Cada V	Amount	or	Drice	(Instr. 3 and 4)		
capital				Code V	Amount	(D)	Price \$			
stock	05/21/2007			A <u>(1)</u>	400	А	φ 67.95	65,459	D	
							50			

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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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)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisab Expiration Date (Month/Day/Year		7. Title an of Underl Securities (Instr. 3 a	lying S
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amou or Numb of Sha
stock option(right to buy with tandem tax withholding)	\$ 67.95	05/21/2007		А	20,000	05/21/2008 <u>(2)</u>	05/21/2017	capital stock	20,0

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
OTOOLE TIMOTHY S 2600 CHEMED CENTER 255 EAST 5TH STREET CINCINNATI, OH 45202	Х		executive vice president			
Signatures						

Timothy S. O'Toole	05/22/2007
<u>**</u> 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).
- (1) award of stock
- (2) exercisable in three equal annual installments commencing 5/21/2008.

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.