## Edgar Filing: CHEMED CORP - Form 4

CHEMED CORP Form 4 August 26, 2005									
Check this box Check this box								3235-0287 January 31, 2005 average irs per	
					5. Relationship of Issuer				
(Last) (First) (N 2600 CHEMED CENTER, 2 EAST 5TH STREET	(Montl	3. Date of Earliest Transaction (Month/Day/Year) 08/24/2005				(Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) below) executive vice president			
Filed(Month/Day/Year) Applicable I _X_Form fi Form file					Applicable Line) _X_ Form filed by Form filed by M	Joint/Group Filing(Check y One Reporting Person More than One Reporting			
	(Zip) T	abla I - Non-	Dorivativ	o Socu	urities A co	Person quired, Disposed o	f or Bonoficial	lly Owned	
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or				5. Amount of 6 Securities 1 Beneficially 6 Owned 1 Following 6 Reported Transaction(s)	6. Ownership 7 Form: Direct II (D) or B Indirect (I) C	7. Nature of	
capital stock 08/24/2005		Code V S	Amount <b>5,000</b>	(D) D	Price \$ 40.38	(Instr. 3 and 4) 45,200	D		
capital stock 08/25/2005		S	13,000	D	\$ 39.66	32,200	D		

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.

## Edgar Filing: CHEMED CORP - Form 4

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **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. 08/26/2005 O'Toole \*\*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).

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.