(City)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

(State)

(Zip)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |

hours per response: Filed pursuant to Section 16(a) of the Securities Eychange Act of 1934

| obligations may continue. Instruction 1(b). | See | Filed pursuant to Section 16(a) of the Securities Exchange Act of 193 or Section 30(h) of the Investment Company Act of 1940 | 4 | hours per respor | nse: 0.5 |
|--|-------|--|-----------------------------------|--|------------------------------------|
| 1. Name and Address of Re | | 2. Issuer Name and Ticker or Trading Symbol CHEMED CORP [CHE] | 5. Relationship (Check all applic | , | (s) to Issuer 10% Owner |
| (Last) (First) 255 EAST FIFTH STR 2600 CHEMED CENT | EET | 3. Date of Earliest Transaction (Month/Day/Year) 07/07/2004 | A below) | 10 | Other (specify below) sident |
| (Street) CINCINNATI OH | 45202 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | Line) X Form f | Joint/Group Filing (C iled by One Reportir iled by More than On 1 | ng Person |

| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
|--|--|---|------|--|--------|---|---|---|---|-------------|--|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |
| | | | Code | v | Amount | Amount (A) or (D) Price | | Transaction(s) (Instr. 3 and 4) | | (1113411 4) | |
| Capital Stock | 07/07/2004 | | M | | 8,000 | A | \$33.63 | 21,629 | D | | |
| Capital Stock | 07/07/2004 | | F | | 770(1) | D | \$47.8 | 20,859 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deri Seci Acq (A) o Disp of (E | 5. Number of Expiration Date (Month/Day/Year) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
|--|---|--|---|------------------------------|---|---|--|---------------------|---|------------------|---|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option (right to buy with tandem tax withholding) | \$33.63 | 07/07/2004 | | М | | | 8,000 | 08/01/1995 | 02/01/2005 | Capital Stock | 8,000 | \$33.63 | 155,500 | D | |

Explanation of Responses:

1. Payment of tax obligation on stock option exercise.

Timothy S. O'Toole

07/08/2004

** 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.