UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL 3235-0287 OMB Number: 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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)											
1. Name and Address of R SEBO J ROBERT	2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
911 PANORAMA TI	(First) RAIL S.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/07/2005						Officer (give title below)	Other (specify b	elow)
ROCHESTER, NY 1	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				
(City)	(State)	(Zip)		Table I - N	lon-D	erivative	Securi	ties Acq	l uired, Disposed of, or Beneficially O	wned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if any	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form:	Beneficial
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common Stock		10/06/2005		G		1,340	D	\$ 37.46	616,032	D	
Common Stock									17,780	I	Spouse
Common Stock									57,536	I	401(k)
Common Stock									2,549,125	I	John Robert Sebo Revocable Trust
Reminder: Report on a sep	arate line for ea	ch class of securities	beneficially owned	directly or i	ndire	ctly.					
					in th	is form	are no	t require	he collection of information cont ed to respond unless the form OMB control number.	ained SE	C 1474 (9-02)
		Table II -	- Derivative Securit	ties Acquir	ed, D	isposed o	f, or Be	eneficiall	y Owned		

(e.g., puts, calls, warrants, options, convertible securities)

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code)	5. Num of Deriv Secur Acqui (A) of Disposof (D (Instruct, and the security of	vative rities nired or osed o) r. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$ 11.6297							10/02/1999	10/02/2007	Common Stock	50,625		50,625	D	
Stock Option	\$ 49.563							10/10/2002	10/10/2010	Common Stock	10,000		10,000	D	
Stock Option	\$ 28.14							07/11/2004	07/11/2012	Common Stock	5,000		5,000	D	
Stock Option	\$ 29.55							07/10/2005	07/10/2013	Common Stock	10,000		10,000	D	
Stock Option	\$ 31.79							07/08/2006	07/08/2014	Common Stock	10,000		10,000	D	
Stock Option	\$ 33.68							07/07/2007	07/07/2015	Common Stock	10,000		10,000	D	

Reporting Owners

David O V	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SEBO J ROBERT 911 PANORAMA TRAIL S. ROCHESTER, NY 14625	X						

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	10/07/2005
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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.