FORM 4

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

OMB APPROVAL

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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 Response	es)											
1. Name and Address of Reporting Person *- Vossler Jennifer R.			2. Issuer Name and Ticker or Trading Symbol PAYCHEX INC [PAYX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
911 PANORAMA	(First) TRAIL SOUTH	3. Date of Earliest Transaction (Month/Day/Year) 07/06/2013						X_ Officer (give title below) Other (specify below) VP/Controller				
DOCHESTED N	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group FilingCheck Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
ROCHESTER, NY	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	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		quired of (D)	5. Amount of Securities Beneficiall Owned Following Reported Transaction(s)	y 6. Ownership Form:	Beneficial	
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock		06/01/2013		J		47 <u>(1)</u>	A	\$ 0	20,455	D		
Common Stock		07/06/2013		S		282 (2)	D	\$ 37.61	20,173	D		
Common Stock		07/07/2013		S		329 (2)	D	\$ 37.61	19,844	D		
Common Stock									556 ⁽³⁾	I	401(k)	
Reminder: Report on a	separate line for each		- Derivative Securiti (e.g., puts, calls, wa	es Acquire	Perso in thi displ ed, Dis tions,	ons who s form a ays a cu sposed of, convertit	re not i rrently or Ben ble secu	required valid O eficially rities)	e collection of information cont d to respond unless the form MB control number. Owned and Amount 8. Price of 9. Number 9. Number		1474 (9-02)	
Derivative Conversion			4. 5. 6. Date Exercisable and 7. Title Transaction Number Expiration Date of Unde								hip of Indire	

1. Title of Derivative Security (Instr. 3)	Conversion	Date (Month/Day/Year)	Execution Date, if	Code		of	vative rities tired or osed b) : 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		of Underlying Securities		Derivative Security (Instr. 5)		Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$ 27.27							05/04/2010	05/03/2019	Common Stock	12,000		12,000	D	
Stock Option	\$ 24.21							07/09/2010	07/08/2019	Common Stock	11,155		11,155	D	
Stock Option	\$ 26.02							07/07/2011	07/06/2020	Common Stock	16,383		16,383	D	
Stock Option	\$ 31.34							07/06/2012	07/05/2021	Common Stock	24,372		24,372	D	
Stock Option	\$ 31.63							07/07/2014	07/06/2021	Common Stock	100,000		100,000	D	
Stock Option	\$ 31.65							07/11/2013	07/10/2022	Common Stock	29,450		29,450	D	

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				

AMA TRAIL SOUTH VP/Controller R, NY 14625

Signatures

Stephanie L. Schaeffer, Attorney-in-fact	07/08/2013
**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) Updated balance reflects 47 shares acquired through a Dividend Reinvestment Program.
- (2) Disposition of shares to satisfy tax withholding obligations arising from lapse of restrictions applicable to award of restricted stock.
- (3) 401(k) balance as of June 1, 2013

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see} \ Instruction 6 for procedure. \\$

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.