FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235-0104						
Estimated average burden							
hours per response	0.5						

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

1. Name and Address of Reporting Person* ROMEO DOMINIC A			. Date of Event equiring Staten Month/Day/Year	nent	3. Issuer Name and Ticker or Trading Symbol IDEX CORP /DE/ [IEX]						
(Last)	(First)	(Middle)	1/12/2004		4. Relationship of Reporting Pers (Check all applicable) Director Officer (size title)		on(s) to Issue 10% Owne Other (spe	er (5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check		
(Street)					X	Officer (give title below) V.P. & Chief Financia	below)	App	Form filed b	y One Reporting Person y More than One	
(City)	(State)	(Zip)							Reporting P	erson	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						nt of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
Expiration (Month/Day		2. Date Exerc Expiration Da (Month/Day/Y			3. Title and Amount of Securit Underlying Derivative Security		4. Conversion or Exercise Price of	ise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Derivativ Security			

Explanation of Responses:

No securities are beneficially owned.

Dominic A. Romeo 01/

** Signature of Reporting Person

01/12/2004

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

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).