| SEC | Form | 4 |
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| | Check this hav if no langer subject to |
|---|--|
| | Check this box if no longer subject to |
| 1 | Section 16. Form 4 or Form 5 |
| | obligations may continue. See |
| | Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burde | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person [*] | | | 2. Issuer Name and Ticker or Trading Symbol DOVER CORP [DOV] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|----------------|---|------------------------|---|---|--|--|--|--|
| REECE THOMAS L | | | | X | Director | 10% Owner | | | | |
| | (Last) (First) (Middle) DOVER CORPORATION 280 PARK AVENUE, 34 W | | 3. Date of Earliest Transaction (Month/Day/Year) 10/23/2003 | - x | Officer (give title below) Chairman of the B | Other (specify below) coard & CEO | | | | |
| (Street) NEW YORK (City) | NY (State) | 10017 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) 10/27/2003 | 6. Indiv Line) X | vidual or Joint/Group Fili Form filed by One Re Form filed by More th Person | porting 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) | Code | Transaction Disposed Of (D) (Instr. 3, 4 and 5) Code (Instr. | | 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 | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1150.4) | |
| Common Stock | 10/22/2003 | | G | v | 6,500 | D | \$14.875 | 195,945 | D | | |
| Common Stock | 10/23/2003 | | D | | 10,000 | D | \$38.25 | 185,945 | D | | |
| Common Stock | 10/24/2003 | | D | | 15,000 | D | \$38.37 | 170,945 | D | | |
| Common Stock | 10/24/2003 | | D | | 5,000 | D | \$38.33 | 165,945 | D | | |
| Common Stock | | | | | | | | 75,410 | Ι | By Wife | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | | | (* 5 / 1* | , | , | - | , | | | | , | | | | |
|---|---|--|---|------------------------------|---|--|---------------------------------|--|--------------------|---|---|---|--|--|--|
| 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) | | 5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed | 6. Date Exerc Expiration Da (Month/Day/Y | ate | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying tive ty (Instr. 3 | 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 | | | | |

Explanation of Responses:

Remarks:

Ambika Sharma

10/27/2003

** 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.