The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

]]	The reader should no	ot assume	e that the inform	ation is accurate and con	nplete.
					OMB APPROVAL
UNI		Vashingto	5 AND EXCHA on, D.C. 20549 DRM D	NGE COMMISSION	OMB 3235- Number: 0076 Estimated average
	Notice of	f Exempt	Offering of Sec	urities	burden
					hours per 4.00 response:
1. Issuer's Identity					
CIK (Filer ID Nu	mberi	revious Names	X None		Entity Type
0000029905	-			X Corpo	oration
Name of Issue	r			-	ed Partnership
DOVER CORP					ed Liability Company
Jurisdiction o					ral Partnership
Incorporation/Organ	nization				ness Trust
DELAWARE Vear of Incorpora	tion/Organization			Other	c (Specify)
-	tion/Organization				
X Over Five Years Ago Within Last Five Years (S Yet to Be Formed	Specify Year)				
2. Principal Place of Busines	s and Contact Inform	mation			
	of Issuer				
DOVER CORP	Address 1			Streat A JJ	,
280 PARK AVE	Address 1		Floor 34-W	Street Address 2	
City	State/Province/	Country		ostalCode Phone	Number of Issuer
NEW YORK	NY	uiiti y	10017	2129221	
3. Related Persons					
Last Name		Firs	st Name	Midd	le Name
Livingston	Robert	-		А	
Street Address 1		Street	Address 2		
280 Park Avenue	Floor 34	-W			
City		tate/Prov	/ince/Country		ostalCode
New York	NY			10017	
Relationship: X Executive	Officer X Director	Promote	er		
Clarification of Response (if	Necessary):				
Last Name		Firs	st Name	Midd	le Name
Giacomini	Thomas	-		W	
Street Address 1		Street	Address 2		

280 Park Avenue Floor 34-W **ZIP/PostalCode** City State/Province/Country New York NY 10017 Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Goldberg	Paul	E
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	7ID/DestalCade
City New York	State/Province/Country NY	ZIP/PostalCode 10017
		10017
Relationship: X Executive Office	I Director Promoter	
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
Hoglund	Raymond	
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017
Relationship: X Executive Office	r Director Promoter	
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
Kloosterboer	Jay	
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017
Relationship: X Executive Office	r Director Promoter	
Clarification of Response (if Neces	ssary):	
Last Name	First Name	Middle Name
Cerepak	Brad	М
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017
Relationship: X Executive Office	r Director Promoter	
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
McKay	Raymond	Т
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017
Relationship: X Executive Office	r Director Promoter	
Clarification of Response (if Neces	sary):	
Last Name	First Name	Middle Name
Schmidt	Joseph	W
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017

Relationship: X Executive Officer Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name		Middle Name
Sellhausen	Stephen	R	
Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
City	State/Province/Country		ZIP/PostalCode
New York	NY	10017	
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necessa	ary):		
Last Name	First Name		Middle Name
Somasundaram	Sivasankaran		
Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
City	State/Province/Country		ZIP/PostalCode
New York	NY	10017	
Relationship: X Executive Officer	Director Promoter		
Clarification of Response (if Necessa	ary):		
Last Name	First Name		Middle Name
Van Loan	David		
Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
City	State/Province/Country		ZIP/PostalCode
New York	NY	10017	
Relationship: X Executive Officer	Director Promoter		
_			
Clarification of Response (if Necessa	11y):		
Last Name	First Name		Middle Name
Cremin	Robert	W	
Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
	State/Province/Country		ZIP/PostalCode
City	5		
City New York	NY	10017	
c c	NY	10017	
New York	NY X Director Promoter	10017	
New York Relationship: Executive Officer ≯ Clarification of Response (if Necessa	NY X Director Promoter ary):	10017	Middle Name
New York Relationship: Executive Officer 3 Clarification of Response (if Necessa Last Name	NY X Director Promoter ary): First Name		Middle Name
New York Relationship: Executive Officer Clarification of Response (if Necessa Last Name Benson	NY K Director Promoter ary): First Name David	10017 H	Middle Name
New York Relationship: Executive Officer 3 Clarification of Response (if Necessa Last Name Benson Street Address 1	NY X Director Promoter ary): First Name David Street Address 2		Middle Name
New York Relationship: Executive Officer Clarification of Response (if Necessa Last Name Benson Street Address 1 280 Park Avenue	NY K Director Promoter ary): First Name David Street Address 2 Floor 34-W		
New York Relationship: Executive Officer 3 Clarification of Response (if Necessa Last Name Benson Street Address 1 280 Park Avenue City	NY X Director Promoter ary): First Name David Street Address 2 Floor 34-W State/Province/Country	Н	Middle Name ZIP/PostalCode
New York Relationship: Executive Officer 3 Clarification of Response (if Necessa Last Name Benson Street Address 1 280 Park Avenue City New York	NY K Director Promoter ary): First Name David Street Address 2 Floor 34-W		

Clarification of Response (if Necessary):

	Last Name		First Name		Middle Name
Derosa		Thomas		J	

Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
City	State/Province/Country		ZIP/PostalCode
New York	NY	10017	
Relationship: Executive Office	r X Director Promoter		
Clarification of Response (if Nece	ssary):		
Last Name	First Name		Middle Name
Ergas	Jean-Pierre	Μ	
Street Address 1	Street Address 2		
280 Park Avenue	Floor 34-W		
City New York	State/Province/Country NY	10017	ZIP/PostalCode
		10017	
Relationship: Executive Office			
Clarification of Response (if Nece	ssary):		
Last Name	First Name		Middle Name
Francis	Peter	Т	
Street Address 1	Street Address 2 Floor 34-W		
280 Park Avenue City	Floor 34-W State/Province/Country		ZIP/PostalCode
New York	NY	10017	
		1001/	
Relationship: Executive Office	r X Director Promoter		
-			
Relationship: Executive Office Clarification of Response (if Nece Last Name	ssary): First Name		Middle Name
Clarification of Response (if Nece Last Name Graham	ssary): First Name Kristiane	С	Middle Name
Clarification of Response (if Nece Last Name Graham Street Address 1	ssary): First Name Kristiane Street Address 2	С	Middle Name
Clarification of Response (if Nece Last Name Graham Street Address 1 280 Park Avenue	ssary): First Name Kristiane Street Address 2 Floor 34-W	С	
Clarification of Response (if Nece Last Name Graham Street Address 1 280 Park Avenue City	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country		Middle Name ZIP/PostalCode
Clarification of Response (if Nece Last Name Graham Street Address 1 280 Park Avenue City New York	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY	C 10017	
Clarification of Response (if Neces Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter		
Clarification of Response (if Neces Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary):		ZIP/PostalCode
Clarification of Response (if Necest Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest Last Name	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name	10017	
Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Last Name Koley	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James		ZIP/PostalCode
Clarification of Response (if Nece Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Nece Last Name Koley Street Address 1	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name	10017	ZIP/PostalCode
Clarification of Response (if Nece Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Nece Last Name Koley Street Address 1	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2	10017	ZIP/PostalCode
Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Last Name Koley Street Address 1 280 Park Avenue City	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2 Floor 34-W	10017	ZIP/PostalCode Middle Name
Clarification of Response (if Necest Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest Last Name Koley Street Address 1 280 Park Avenue City New York	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2 Floor 34-W State/Province/Country	10017 L	ZIP/PostalCode Middle Name
Clarification of Response (if Necest Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest Last Name Koley Street Address 1 280 Park Avenue City New York Relationship: Executive Office	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter	10017 L	ZIP/PostalCode Middle Name
Clarification of Response (if Necest Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest Last Name Koley Street Address 1 280 Park Avenue City New York	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter	10017 L	ZIP/PostalCode Middle Name
Clarification of Response (if Necest Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest Last Name Koley Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Necest	ssary):	10017 L	ZIP/PostalCode Middle Name ZIP/PostalCode
Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Nece Last Name Koley Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Nece Last Name Lochridge Street Address 1	ssary): First Name Kristiane Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name James Street Address 2 Floor 34-W State/Province/Country NY r X Director Promoter ssary): First Name Kichard Street Address 2	10017 L 10017	ZIP/PostalCode Middle Name ZIP/PostalCode
Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Last Name Koley Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Clarification of Response (if Neces	ssary):	10017 L 10017	ZIP/PostalCode Middle Name ZIP/PostalCode Middle Name
Last Name Graham Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Last Name Koley Street Address 1 280 Park Avenue City New York Relationship: Executive Office Clarification of Response (if Neces Last Name Lochridge	ssary):	10017 L 10017	ZIP/PostalCode Middle Name ZIP/PostalCode

Last Name	First Name	Middle Name
Rethore Street Address 1	Bernard Street Address 2	G
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY	10017
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Stubbs	Michael	В
Street Address 1	Street Address 2	
280 Park Avenue	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
New York	NY NY	10017
Relationship: Executive Officer 2	X Director Promoter	
Clarification of Response (if Necess	ary):	
Last Name	First Name	Middle Name
Winston	Mary	А
Street Address 1	Street Address 2	
DOO Daula Assassa	Eleon 24 W/	
	Floor 34-W	
City	State/Province/Country	ZIP/PostalCode
City New York	State/Province/Country NY	ZIP/PostalCode 10017
City New York	State/Province/Country NY	
City New York Relationship: Executive Officer 2	State/Province/Country NY & Director Promoter	
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name	State/Province/Country NY X Director Promoter ary): First Name	10017 Middle Name
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon	State/Province/Country NY X Director Promoter ary): First Name William	10017
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1	State/Province/Country NY X Director Promoter ary): First Name William Street Address 2	10017 Middle Name
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue	State/Province/Country NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W	10017 Middle Name W
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City	State/Province/Country NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country	10017 Middle Name W ZIP/PostalCode
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York	State/Province/Country NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY	10017 Middle Name W
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer	State/Province/Country NY NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer	State/Province/Country NY NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer Clarification of Response (if Necess	State/Province/Country NY NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer Clarification of Response (if Necess	State/Province/Country NY NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer Clarification of Response (if Necess 4. Industry Group	State/Province/Country NY NY X Director Promoter ary): First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter ary):	10017 Middle Name W ZIP/PostalCode 10017
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer Clarification of Response (if Necess 4. Industry Group Agriculture	State/Province/Country NY NY X Director Promoter ary): Floor 34-W State/Province/Country NY Director Promoter ary):	10017 Middle Name W ZIP/PostalCode 10017
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon	State/Province/Country NY NY Director Promoter William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode 10017 Retailing Retailing Restaurants Technology
City New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon	NY NY NY Director First Name William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode 10017
New York Relationship: Executive Officer 2 Clarification of Response (if Necess Last Name Spurgeon Street Address 1 280 Park Avenue City New York Relationship: X Executive Officer Clarification of Response (if Necess 4. Industry Group Agriculture Banking & Financial Services Commercial Banking Insurance	State/Province/Country NY NY Director Promoter William Street Address 2 Floor 34-W State/Province/Country NY Director Promoter	10017 Middle Name W ZIP/PostalCode 10017

Is the issuer registered as an investment company under the Investment Company Act of 1940?

Yes No

Pharmaceuticals Other Health Care Manufacturing Real Estate Commercial Construction Technology Computers Telecommunications Other Technology Travel Airlines & Airports Lodging & Conventions Tourism & Travel Services Other Banking & Financial ServicesREITS & FinanceOther TravelBusiness ServicesResidentialX OtherEnergyOther Real EstateOther Real EstateCoal MiningElectric UtilitiesEnergy ConservationEnergy ConservationEnvironmental ServicesImage: ConservationOil & GasOther EnergyOther EnergyImage: Conservation

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
X Over \$100,000,000		Over \$100,000,000
Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

Rule 504(b)(1) (not (i), (ii) or (iii))		Rule 505	
Rule 504 (b)(1)(i)	Х	Rule 506	
Rule 504 (b)(1)(ii)		Securities Act Section 4(5)
Rule 504 (b)(1)(iii)		Investment Company Ac	t Section 3(c)
		Section 3(c)(1)	Section 3(c)(9)
		Section 3(c)(2)	Section 3(c)(10)
		Section 3(c)(3)	Section 3(c)(11)
		Section 3(c)(4)	Section 3(c)(12)
		Section 3(c)(5)	Section 3(c)(13)
		Section 3(c)(6)	Section 3(c)(14)
		Section 3(c)(7)	

7. Type of Filing

X New Notice Date of First Sale 2009-12-30 First Sale Yet to Occur Amendment

8. Duration of Offering

Does the Issuer intend this offering to last more than one year? Yes X No

9. Type(s) of Securities Offered (select all that apply)

- X Equity
 - Debt

Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security Pooled Investment Fund Interests Tenant-in-Common Securities Mineral Property Securities Other (describe) 10. Business Combination Transaction

Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?

Clarification of Response (if Necessary):

Partial consideration for acquisition of assets of privately held company

11. Minimum Investment

Minimum investment accepted from any outside investor \$0 USD

12. Sales Compensation

Recipient	Recipient CRD Number X None	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X No	ne
Street Address 1	Street Address 2	
City	State/Province/Country	ZIP/Postal Code
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	All States Foreign/non-US	

13. Offering and Sales Amounts

Total Offering Amount\$6,368,800 USDorIndefiniteTotal Amount Sold\$6,368,800 USDTotal Remaining to be Sold\$0 USDorIndefinite

Clarification of Response (if Necessary):

Based on closing price of the common stock on 12/30/2009

14. Investors

Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$0 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

3

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on Rule 505 for one of the reasons stated in Rule 505(b)(2)(iii).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
DOVER CORP	/s/ Ivonne M. Cabrera	Ivonne M. Cabrera	Deputy General Counsel	2010-01-13

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.