FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ı	OMB APPROVAL									
I	OMB Number:	3235-0287								
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	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).

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

Name and Address of Reporting Person* DURIK MICHAEL L						2. Issuer Name and Ticker or Trading Symbol KELLY SERVICES INC [kelya]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) 999 WES	•	irst) AVER ROAD	(Middle)			Date of / <mark>08/2</mark> (est Trans	action (I	Month	/Day/Year)		X Officer (give title String (Special Special						
(Street) TROY MI 48084							ndme	nt, Date o	of Origina	al File	d (Month/Da	Lin	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting						
(City) (State) (Zip)													Person						
		Tab	le I - No	on-Deri	vative	Sec	curit	ies Ac	quired	l, Di	sposed o	f, or Be	neficial	ly Owned					
Date				Date	nnsaction th/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)				(A) or 3, 4 and 5	Securitie Benefici Owned F Reporte	5. Amount of Securities Beneficially Owned Following Reported		n: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Class A (Common Sto	ock, Par Value \$	1	12/08/	12/08/2004				M		26,000	A	\$24	53	3,048		D		
		ock, Par Value \$		12/08/2004		_			M		2,501	A	\$22.4		55,549		D		
		ock, Par Value \$		12/08/2004				M		4,000	A	\$24		59,549		D			
		ock, Par Value \$			12/08/2004				S		32,501	D	\$29.63		,048	D			
		ock, Par Value \$]	2/09/2004		<u> </u>		M		1,499	A	\$22.4		28,547		D		
		ock, Par Value \$				╁			M M		935 233	A	\$22.4 \$22.4		,482		D D		
Class A Common Stock, Par Value \$1 12/09/20 Class A Common Stock, Par Value \$1 12/09/20									M		4,833	A	\$22.4			D			
		ock, Par Value \$		12/09/					S		7,500	D	\$29.20	_	,048	D			
				- Deriva	ative	Secu	ıritie	es Acq	uired,	Disp	osed of,	or Ben							
				(e.g., ı			s, Wa	arrants	, optic	ns,	convertil	ole secu	rities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise (Month/Day/Year) ce of rivative		Execution Date,		ction Instr.			6. Date Exercisab Expiration Date (Month/Day/Year)		e of Securities		ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Incentive Stock Option, (right-to- buy)	\$22.4	12/09/2004			М			2,667	02/12/2	003	02/12/2012	Class A Common Stock, Par Value \$1	2,667	\$0	1,333	,333 D			
Incentive Stock Option, (right-to- buy)	\$24	12/08/2004			М			4,000	03/14/2	001	03/14/2010	Class A Common Stock, Par Value \$1	4,000	\$0	0		D		
Non- qualified Stock Option, (right-to- buy)	\$22.4	12/08/2004			M			7,334	02/12/2	003	02/12/2012	Class A Common Stock, Par Value \$1	7,334	\$0	3,666	5	D		
Non- qualified Stock Option, (right-to- buy)	\$24	12/08/2004			M			26,000	03/14/2	001	03/14/2010	Class A Common Stock, Par Value \$1	26,000	\$0	0		D		

Explanation of Responses:

Michael L. Durik by James M. Polehna, Attorney-in-fact

12/10/2004

12/10/2004

** 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.