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EAGLE FINANCIAL SERVICES INC

Form 4

January 04, 2008

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 4 or Form 5 obligations may continue.

Check this box

if no longer

subject to

Section 16.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

2. Issuer Name and Ticker or Trading

EAGLE FINANCIAL SERVICES

30(h) of the Investment Company Act of 1940 See Instruction

Symbol

1(b).

(Print or Type Responses)

MILLESON JOHN R

1. Name and Address of Reporting Person *

			INC [EFSI]			(Check all applicable)					
(Mc			(Month/D	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2008				X Director 10% Owner X Officer (give title Other (specify below) President/CEO			
BERRYVII	(Street) LLE, VA 22611	(Street) 4. If Ame Filed(Mor			Amendment, Date Original Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting		
(City)		(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	Person equired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3) Common Stock, \$2.50 Par	2. Transaction Dat (Month/Day/Year) 01/02/2008	Execution any		3. Transaction Code (Instr. 8)	4. SecurionAcquirec Disposec (Instr. 3, Amount	ties l (A) of l of (D 4 and (A) or	or O)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Value Common Stock, \$2.50 Par Value								54.781 <u>(1)</u>	I	BY SPOUSE	
Common Stock, \$2.50 Par Value								303.568 <u>(1)</u>	I	BY SON	

OMB APPROVAL

3235-0287

January 31,

2005

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OMB

Number:

Expires:

response...

5. Relationship of Reporting Person(s) to

(Classia all annil: a his)

Issuer

Estimated average

burden hours per

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Common Stock, \$2.50 Par Value						303.568 (1)	I	BY SON
Common Stock, \$2.50 Par Value	01/03/2008	D <u>(3)</u>	446	D	\$ 0	53,278.431 (1)	D D	

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

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 control number.

SEC 1474

(9-02)

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

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. Transact Code (Instr. 8)	5. ionNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		te	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Prio Deriv Secur (Instr.
				Code V	' (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Options	\$ 21.63					10/01/2003	10/01/2013	Common Stock, \$2.50 Par Value	4,000	
Stock Options	\$ 21.55					10/01/2004	10/01/2014	Common Stock, \$2.50 Par Value	4,000	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
MILLESON JOHN R P. O. BOX 391	X		President/CEO					

Reporting Owners 2

BERRYVILLE, VA 22611

Signatures

John R. 01/04/2008 Milleson

**Signature of Date
Reporting Person

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) Includes shares of common stock which have been acquired through the Company's Dividend Investment Plan.
- (2) This transaction reflects shares issued under the Company's Stock Incentive Plan.
- (3) This transaction reflects a disposition under the Company's Stock Incentive Plan.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *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.

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