## Edgar Filing: WILKINS JAMES R JR - Form 4

WILKINS J Form 4	AMES R JR											
November 2	28, 2011											
FORM	14 UNITED	STATE	SECU	DITIES A	ND FY	СЦ	NCE	COMMISSIO	NT	APPROVAL		
	UNITED	SIAIE		shington			INGE	COMINISSIO	IN OMB Number:	3235-0287		
Check the if no lon		C	-				Expires:	January 31,				
subject to	o SIAIE	MENT O	F CHAN			<b>ICI</b>	VNERSHIP O	F ·	ated average 2005			
Section 1 Form 4 c			SECU	<b>KITIES</b>				burden h response	ours per e 0.5			
Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 193								ge Act of 1934	•	0.0		
obligations may continue. See InstructionSection 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 19401(b).30(h) of the Investment Company Act of 1940												
(Print or Type	Responses)											
1. Name and Address of Reporting Person *2. IsWILKINS JAMES R JRSymb				er Name <b>an</b> o	l Ticker o	r Trad	ing	5. Relationship of Reporting Person(s) to Issuer				
			EAGLE FINANCIAL SERVICES INC [EFSI]					(Check all applicable)				
(Last)	(First) (	Middle)		of Earliest T	ransaction			_X_ Director		10% Owner		
			(Month/I 11/28/2	Day/Year) 2011				Difficer (give titleOther (specify below) below)				
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	d(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
BERRYVII	LLE, VA 22611							Person		c Reporting		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Secu	rities A	cquired, Disposed	of, or Benefi	cially Owned		
1.Title of	2. Transaction Date (Month/Day/Year)	· · · · · · · · · · · · · · · · · · ·					5. Amount of Securities	6. Ownership	7. Nature of Indirect			
Security (Instr. 3)	(Month/Day/Tear)	any		Code	Code (D)			Beneficially H	Form: Direct	Beneficial		
	(Month/I	Day/Year)	(Instr. 8) (Instr. 3, 4 and 5)			5)	Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)			
					(A)			Reported	(Instr. 4)	(		
				Code V	A	or	D=:	Transaction(s) (Instr. 3 and 4)				
Common				Code v	Amount	(D)	Price					
Stock,	11/28/2011			Р	1,408	А	\$ 17.5	109,906	D			
\$2.50 Par Value	11120/2011			-	1,.00		17.5	10,,,00	2			
Common Stock,								50.064	T	Wilkins		
\$2.50 Par								59,064	Ι	Investments LP		
Value										Li		
Common Stock								36,000	Ι	Wilkins ShooContor		
Stock, \$2.50 Par										ShoeCenter Profit		
Value										Sharing		

									Trust, Truste	e	
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.											
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. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Tit Amou Unde: Secur (Instr	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Addr	ess	Relationships							
Reporting O when I tunic / I turi	Director	10% Owner	Officer	Other					
WILKINS JAMES R JR P. O. BOX 391 BERRYVILLE, VA 22611	Х								
Signatures									
James R. Wilkins, Jr.	11/28/2011								
**Signature of Reporting Person	Date								

## **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).

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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