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Form 4	ANCIAL SERVICES I	NC								
March 13, 20									PROVAL	
				TIES AND EXCHANGE COMMISSION ington, D.C. 20549				OMB OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. SECURITIES January 31 2005 Estimated average burden hours per								•		
(Print or Type R	(esponses)									
WILKINS JAMES R JR Symbol			er Name and Ticker or Trading E FINANCIAL SERVICES FSI]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (Middle) 3. Date of (Month/D P. O. BOX 391 03/13/20			-				X_ Director 10% Owner Officer (give title Other (specify below) below)			
			endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BERRYVIL		Form filed by More than One Repo								
(City)	(State) (Zip)	Table	e I - Non-D	Derivative	Secur	ities Aca	uired, Disposed of	. or Beneficial	lv Owned	
1.Title of Security (Instr. 3)	1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)			cquired d of (D)	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock, \$2.50 Par Value	03/13/2017		Code V P	Amount	or (D) A	Price \$ 27.85	(Instr. 3 and 4) 171,431	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.

 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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Under Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	. ,	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Addr	ess	Relationships						
	Director	10% Owner	Officer	Other				
WILKINS JAMES R JR P. O. BOX 391 BERRYVILLE, VA 22611	Х							
Signatures								
James R. Wilkins, Jr.	03/13/2017							
**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.