## Edgar Filing: FLORY DONNA D - Form 4

FLORY DON	NNA D										
Form 4	010										
August 02, 2018 FORM 4 LINITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL				
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. Form 4 or						COMMISSION	Number:	3235-0287 January 31,		
subject to Section 10							NERSHIP OF	Expires: Estimated a burden hou response	2005 average rs per		
Form 5 obligation may conti <i>See</i> Instru 1(b).	Is Section 1	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 30(h) of the Investment Company Act of 1940									
(Print or Type R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> FLORY DONNA D			2. Issuer Name <b>and</b> Ticker or Trading Symbol FAUQUIER BANKSHARES, INC. [FBSS]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
WARRENT	ON, VA 2018	6						Form filed by M Person	More than One Re	porting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	(Month/Day/Year) Execution Date,			Code (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				Securities Beneficially Owned Eollowing Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	07/31/2018			Code V P	Amount 62	or (D) A	Price \$	(Instr. 3 and 4) 4,041	D		
Stock	0115112010			1	02	11	22.1	1,071	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo
				of (D)						Trans (Instr
				(Instr. 3, 4, and 5)						
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

RelationshipReporting Owner Name / AddressRelationshipDirector10% OwnerOfficerOtherFLORY DONNA D<br/>10 COURTHOUSE SQUAREXVVWARRENTON, VA 20186XVVVSignaturesSignaturesFact for Donna D.<br/>Flory08/02/2018

## **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.