UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden 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).

300

shares/year

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type l	Responses)																			
1. Name and Address of Reporting Person * NEAL JOHN C				2. Issuer Name and Ticker or Trading Symbol UNION BANKSHARES CORP [UBSH]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner								
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/22/2004								X Officer (give title below) Other (specify below) Executive Vice President								
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)								_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting PersonForm filed by More than One Reporting Person							
(City)		(State)	(Zip)					Table	I - Noi	n-Deriv	ativ	e Securiti	es Acc	quired, I	Disposed (of, or Benef	icially Ow	ned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		if ((Instr. 8)		(A)	or D	ities Acqu Disposed of , 4 and 5)		Owne Transa	Amount of Securities Beneficially Owned Following Reported Fransaction(s) Instr. 3 and 4)		Ownership Ind Form: Ber		Nature of irect neficial vnership			
				= 1,5 = 3,41			Code		V Am	ount	(A) or (D)	Price							tr. 4)	
Common St	tock, \$2 Pa	ar Value	11/22/2004	Р			4.1 (1)	222		6.88	1 10,4	0,414.084			D					
Common Stock, \$2 Par Value												423.6	6951			Ι	for	stodian ildren		
Reminder: Rep	port on a sepa	arate line for each o							Pe in a	ersons this fo curren	orm Itly v	are not r valid OM	equir B con	ed to re itrol nu	espond ι mber.	f information				74 (9-02)
			Table II									of, or Bend tible secur		ly Owne	ed					
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,) any (Month/Day/Ye	C	Fransac Code	tion	of Deri Secu Acqı (A) o	vative prities uired or posed D) er. 3,	Expira (Mont	te Exerc ation D th/Day/	ate		of I Sec	7. Title and Amount of Underlying Securities		8. Price of Derivative Security (Instr. 5)		e lly	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
					Code	V	(A)	(D)	Date Exerc	isable	Ex Da	xpiration ate	Tit	le	Amount or Number of Shares					
Employee Stock Options @ 800 shares/year	\$ 20.125								01/22	2/1999	9 01	1/22/200	8 Sto	ommon ock, \$2 Par Value			4,000	0	D	
Employee Stock Options Vest @ 234 shares/year	\$ 13								02/20	0/2003	1 02	2/20/201	o Sto	ommon ock, \$2 Par Value			5,170	0	D	
Employee Stock Options Vest @	\$ 12.8125								01/2:	5/2002	2 01	1/25/201	C+	ommon ock, \$2 Par			6,670	0	D	

Value

Employee Stock Options Vest @ 500 shares/year	\$ 16			01/02/2003	Common Stock, \$2 Par Value		9,170	D	
Employee Stock Options Vest @ 500 shares/year	\$ 27.87			01/23/2004	Common Stock, \$2 Par Value		11,670	D	
Employee Stock Options Vest @ 500 shares/year	\$ 33.98			01/29/2005	Common Stock, \$2 Par Value		14,170	D	

Reporting Owners

B 41 0 N 1	Relationships									
Reporting Owner Name / Address	Director	10% Owner	Officer	Other						
NEAL JOHN C			Executive Vice President							

Signatures

John C. Neal	12/09/2004
**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).
- (1) Voluntary purchase by Administrator of DRIP/SPP.

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.