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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

longer subject to Section 16. Form 4 or Form 5 obligations

Options

Vest @

Options

Vest @

Options

Vest @

400 shares/year

300 shares/year Employee Stock

200 shares/year Employee Stock

\$ 20.125

\$

12.8125

\$ 16

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

Instruction	on 1(b).			Inv	estm	ent	Com	pany A	ct of	1940)								
(Print or Type	Responses)																		
1. Name and Address of Reporting Person *- PEAY D ANTHONY				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) P O BOX 446				3. Date of Earliest Transaction (Month/Day/Year) 05/22/2006									To Officer (give title below) EVP & CFO						
(Street) BOWLING GREEN, VA 22427				4. If Amendment, Date Original Filed(Month/Day/Year)								_X_ Fo	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person						
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui								uired, I	ired. Disposed of, or Beneficially Owned						
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if r) any (Month/Day/Year)		e, if		nsaction 8)	4. S (A) (Ins	A) or Disposed of Instr. 3, 4 and 5)		quired of (D)	5. An Owne Trans	Amount of Securities Beneficially wned Following Reported ansaction(s) sstr. 3 and 4)		neficially	6. Ownershi Form: Direct (D or Indirec (I) (Instr. 4)	p of l Be	Nature Indirect neficial vnership str. 4)	
Common s	tock, \$2 pa	r value	05/22/2006				P		3	nount	(D)	\$ 39.74 (1)	4,20	3			D		
Reminder. Re	port on a sept	arate line for each o		- Derivati	ve Se	curiti	ies Ac	Per in t a co	sons his fo urren Dispos	orm a itly va sed of	re not alid OM	require MB cont	ed to re trol nu	spond ι mber.		on containe form displa		C 147	4 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year		r, if Transaction N Code o ear) (Instr. 8) E S A (A E		5. Num of Deri Secu Acq (A) Disp of (I (Inst	nber evative urities uired or posed O)	6. Date Expiration	Exercion Da	Exercisable and		7. Ti of U Secu	itle and Inderlyicurities tr. 3 and	Securit (Instr.		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form of Derivat Securit Direct or India	of ative ity: (D) irect	Ownersh (Instr. 4) D) ect
				Code	V	(A)	(D)	Date Exercis	able	Exp Dat	oiration e	Title	e	or Number of Shares					
Employee Stock												Cor	mmon						

01/22/1999 01/22/2008 Stock, \$2

01/25/2002 01/25/2011

01/02/2003 01/02/2012

2,000

1,500

2,000

par value

Common

stock, \$2

par value

Common

stock, \$2

par value

2,000

3,500

5,500

D

D

D

Employee Stock Options Vest @ 400 shares/year	\$ 27.87				01/23/2004	01/23/2013	Common stock, \$2 par value	2,000	7,500	D	
Employee Stock Options Vest @ 400 shares/year	\$ 33.98				01/29/2005	01/29/2014	Common stock, \$2 par value	2,500	10,000	D	

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
PEAY D ANTHONY								
P O BOX 446			EVP & CFO					
BOWLING GREEN, VA 22427								

Signatures

D. Anthony Peay	05/24/2006
**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 the DRP/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.