# FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### 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	Responses)														
1. Name and Address of Reporting Person * PEAY D ANTHONY				2. Issuer Name a UNION BANI		~ .		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
P O BOX	446	3. Date of Earliest 06/21/2007	Mont	h/Day/Ye	ar)	_X_ Officer (give	X Officer (give title below) Other (specify below)  EVP & CFO								
(Street) BOWLING GREEN, VA 22427				4. If Amendment,	Filed	(Month/Day	/Year)	_X_ Form filed by 0	6. Individual or Joint/Group FilingCheck Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person						
(City)	o GILLEIN,	(State)	(Zip)		Table	I - N	on-D	erivative	Securit	ties Acq	l uired, Disposed	of, or Benef	icially Owi	ned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		e, if Code (Instr. 8		ode		ties Accisposed 4 and 5	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Form:	7. Nature of Indirect Beneficial		
				(Month/Day/Yea	Coc	de	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	(IIISTI: 5 and 4)		or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common S	Stock, \$1.33	3 par value	06/21/2007(1)		P			4	A	\$ 23.29	7,480			D	
Common S	Stock, \$1.33	3 par value									100			I	Spouse
Common S	Stock, \$1.33	3 par value									35			I	As custodian for children
Reminder: Re	eport on a sepa	arate line for each	class of securities b	eneficially owned	directly o			•							
						i	n thi	s form a	re not	require	he collection of ed to respond ι trol number.				2 1474 (9-02)
			Table II	- Derivative Secu (e.g., puts, calls,							y Owned				
1. Title of Derivative	1. Title of 2. 3. Transaction 3A. Deemed Execution Date, i			4. 5 if Transaction N	Jumber	Expi	ratio	xercisable		of U	itle and Amount	8. Price of Derivative	Derivative	Owner	11. Natu

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. I ransaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	tion	Num of Deriv Secur Acqu (A) of Disper of (D (Instr	vative rities sired or cosed () : 3,	6. Date Exerci Expiration Dat (Month/Day/Y	te	of Underlying Securities (Instr. 3 and 4)		Security (Instr. 5) Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficial
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee stock options vest @ 200 shares/year	\$ 13.42							01/22/1999	01/22/2008	Common stock, \$1.33 par value	3,000		3,000	D	
Employee stock options vest @ 300 shares/year	\$ 8.54							01/25/2002	01/25/2011	Common stock, \$1.33 par value	750		3,750	D	
Employee stock options vest @ 400 shares/year	\$ 10.67							01/02/2003	01/02/2012	Common stock, \$1.33 par value	3,000		6,750	D	

Employee stock options vest @ 500 shares/year	\$ 18.58			0	01/23/2004	01/23/2013	Common stock, \$1.33 par value		9,750	D	
Employee stock options vest @ 500 shares/year	\$ 22.65			0	01/29/2005	01/29/2014	Common stock, \$1.33 par value		13,500	D	

### **Reporting Owners**

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	06/27/2007
**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 DRSPP shares were credited to Owner's account on 6/26/07.

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.