

(Print or Type Responses)

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

OMB APPROVAL				
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#### INITIAL STATEMENT OF 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

1. Name and Address of Reporting Person* Slaughter Raymond L	Statement (Month/Day/Year) UNI 06/21/2012 4. Re		3. Issuer Name and Ticker or Trading Symbol UNION FIRST MARKET BANKSHARES CORP [UBSH]				
(Last) (First) (Middle) PO BOX 608			Issuer		\ /	5. If Amendment, Date Original Filed(Month/Day/Year)	
BOWLING GREEN, VA 22427		(Check all a _X_ Director Officer (give title below)			ify Applicable I _X_ Form fi	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 Beneficially Owned					
1.Title of Security (Instr. 4)	F	2. Amount of Se Beneficially Own Instr. 4)	ned		4. Nature of Indire (Instr. 5)	ct Beneficial Ownership	
Common Stock	Common Stock 1,452			D			
Common Stock 7,921		7,921		I by Trustee of Directors Deferred Compensation Plan			
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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date	Security (Instr. 4)	nderlying Derivative	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

### **Reporting Owners**

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Slaughter Raymond L					
PO BOX 608	X				
BOWLING GREEN, VA 22427					

#### **Signatures**

/s/ Raymond L. Slaughter	06/21/2012
**Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.