### FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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

Ì	pe Response			1										
1. Name and Address of Reporting Person * Slaughter Raymond L				2. Issuer Name and Ticker or Trading Symbol UNION FIRST MARKET BANKSHARES CORP [ubsh]					S	_X_ Direc		eck all appl		
(Last) (First) (Middle) PO BOX 608				3. Date of Earliest Transaction (Month/Day/Year) 08/21/2013										
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)  _X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
BOWLING GREEN, VA 22427 (City) (State) (Zip)			Table I Non Positive Securities Ages						ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i	3. Transa Code (Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownershi Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Year	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)		
Common	Stock		08/21/2013		P		5 (1)		\$ 21.85	1,537			D	
Common Stock									9,426		I	By Trustee of Non- Qualified Plan.		
Reminder:	Report on a s	separate line f		rities beneficially of the control o	ties Acqui	Person the	sons wh tained in form dis	o respo n this fo splays a	rm are curre neficial	not requesting ntly valid	ction of inf uired to res OMB conf	spond unl	ess	C 1474 (9-02)
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day)	on 3A. Deemed Execution Da any	4.	5.	6. I and (Mo	Date Exerc Expiratic onth/Day/	cisable on Date	7. T Amo Und Sect (Ins: 4)	Amount or Number of		9. Number Derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form Deriv Secur Direc or Inc	of Beneficial Ownersh (Instr. 4) irect

## **Reporting Owners**

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

#### **Signatures**

/s/ Raymond L. Slaughter	08/21/2013
**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.

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.