VOLITIONRX LTD Form 3 August 17, 2015 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> KRATOCHVIL DAVID MATTHEW			2. Date of Event Requiring Statement (Month/Day/Year) 08/17/2015	vOLITIONKA LID [vNKA] /Day/Year)			
(Last)	(First)	(Middle)		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
1 SCOTTS I SHAW CEN		#24-05		(Check	k all applicable))	
(Street) SINGAPORE, U0 228208				Director10% Owner XOfficerOther (give title below) (specify below) Chief Financial Officer		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 - I	Non-Deriva	tive Securiti	ies Be	neficially Owned
1.Title of Secur (Instr. 4)	ity		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	-
No securities	s are bene	ficially own	ed. 0		D	Â	
Reminder: Repo owned directly	or indirectly Pers	7. ons who resp	ch class of securities benefic bond to the collection of ined in this form are no	F	SEC 1473 (7-02	2)	
			nd unless the form disp /IB control number.	lays a			
Т	able II - Do	erivative Secur	ities Beneficially Owned (e.g., puts, calls	, warrants, opt	tions, c	onvertible securities)

1. Title of Derivative Security 2. Date Exercisable and 3. Title and Amount of 6. Nature of Indirect 4. 5. (Instr. 4) **Expiration Date** Securities Underlying Conversion Ownership **Beneficial Ownership** (Month/Day/Year) **Derivative Security** or Exercise Form of (Instr. 5) (Instr. 4) Price of Derivative

Derivative

Security:

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Date	Expiration	Title	Amount or	Security	Direct (D)
Exercisable	Date		Number of		or Indirect
			Shares		(I)
					(Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships					
		rector	10% Owner	Officer	Other		
KRATOCHVIL DAVID MATTI 1 SCOTTS ROAD #24-05 SHAW CENTRE SINGAPORE, U0 228208	HEW	Â	Â	Chief Financial Officer	Â		
Signatures							
/s/ David Matthew Kratochvil	08/17/2015						

**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.