Edgar Filing: Edgemond John W IV - Form 4

| Edgemond Form 4 | l John W IV | | | | | | | | | | | | |
|--|--|--|---|--|---|--------|------------------------|--|----------------------|--|--|---|-----|
| September | 16, 2005 | | | | | | | | | | | | |
| FOR | M 4 | | GEGI | | | | | | | O | MB AP | PROVA | AL. |
| | UNITE | SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Numb | er: | 3235 | -0287 | |
| Check if no lo subjec Sectio Form Form obliga | t to STATE n 16. 4 or 5 Filed pu | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | | | burde | ires: January 31, 2005 mated average den hours per ponse 0.5 | | |
| may co <i>See</i> In 1(b). | Section 17 struction we Responses) | | | Utility H Investme | • | - | • | of 1935 or Sec 940 | ction | | | | |
| | - | - D * | | | | _ | | 5 Deletionali | | | - D | | |
| 1. Name and Address of Reporting Person <u>*</u> Edgemond John W IV | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | | |
| | | ACCESS NATIONAL CORP [ANCX] | | | | | (Check all applicable) | | | | | | |
| (Last) (First) (Middle) | | | | e of Earliest n/Day/Year | Officer (give title Other (specify below) below) | | | | | | | | |
| CORPOR | ESS NATIONAL ATION, 1800 RC DRIVE, SUITE 3 | DBERT | 09/14 | /2005 | | | | below) | | Delo | w) | | |
| (Street) | | | | mendment, ⁄Ionth/Day/Y | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | | | | |
| RESTON | , VA 20191 | | | | | | | Form filed Person | | | | | |
| (City) | (State) | (Zip) | Ta | able I - Nor | n-Derivati | ive Se | curities A | cquired, Dispose | ed of, | or Ben | eficiall | y Owne | d |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | ate, if | 3. 4. Securities Acquired te, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (A) or | | | | Beneficially Owned Following Reported Transaction(s) | Own Form Direc | nership Ba m: O ect (D) (In ndirect | Benef Owne | . Nature of Indirec Beneficial Ownership Instr. 4) | |
| common | | | | Code V | Amount | | Price ¢ | (Instr. 3 and 4) | | | | | |
| common stock | 09/14/2005 | | | Р | 500 | А | پ 18.55 | 181,756 | D | | | | |
| common stock | 09/14/2005 | | | Р | 1,000 | А | \$ 19 | 182,756 | D | | | | |
| common stock | 09/15/2005 | | | Р | 250 | А | \$ 18.75 | 183,006 | D | | | | |
| common stock | | | | | | | | 1,365 | Ι | | By sj | pouse. | |
| | | | | | | | | 7,123 | Ι | | | | |

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| common stock common stock | | | | | | 4,800 | Ι | | By minor children. By self a Owner/P of Green Landscap Inc. | s resident works | | |
|--|-----------------|--------------------------------|--------------------|--|---|---------------------|--------------------|---|---|---|---|--|
| Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number. | | | | | | | | | | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | or Exercise any | | Execution Date, if | 4. Transactic Code (Instr. 8) | 5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr | |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | |
| Repor | ting O | wners | | | | | | | | | | |
| Reporting Owner Name / Address Director 10% Owner Officer Other | | | | | | | | | | | | |
| C/O ACC 1800 ROE | | ONAL CORPORA TON DRIVE, SUI | X | | | | | | | | | |
| Signa | tures | | | | | | | | | | | |
| Sheila M Edgemond | d | attorney-in-fact for | | | 09/16/20 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).

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.