# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL OMB Number: 323 Estimated average burden 3235-0287 Washington, D.C. 20549 hours per response. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

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 *- Reynolds Cameron John				2. Issuer Name and Ticker or Trading Symbol VOLITIONRX LTD [VNRX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner					
	(Last) (First) (Middle) 1 SCOTTS RD #24-05 SHAW CENTRE			3. Date of Earliest Transaction (Month/Day/Year) 04/15/2016					X Officer (give title below) Other (specify below)  President and CEO					
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					_X_ Fc	6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
SINGAPORE, U0 228208 (City) (State) (Zip)			Table I - Non-Derivative Securities Acqu				Acquired, I	uired, Disposed of, or Beneficially Owned						
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	ır) any	eemed ation Date, if	3. Tr Code (Inst	ransaction 4. S	or Disposed of tr. 3, 4 and 5)	red 5. Am Owne Trans	nount of Se	curities Ben ag Reported	deficially 6. Over FC Di or (I)	wnership of Be rect (D) Ov Indirect (In	neficial vnership
D			n class of securities	benencia	ny owned aire	ectiy	or indirectly.							
Reminder:	Report on a	ospanae mie 101 eue					in this for a currentl quired, Disposed	m are not red y valid OMB d of, or Benefic	quired to r control nu	espond u umber.		on contained form display		74 (9-02)
1. Title of	2. Conversion	3. Transaction Date (Month/Day/Year)	Table II  3A. Deemed Execution Date, if	(e.g., pt 4. Transacti Code	5. Number Derivative Securities	er of e s (A)	in this for a currentl	m are not red y valid OMB d of, or Benefic ertible securitiable and	quired to r control nu	respond unber. ed d Amount	8. Price of	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Natur
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	Table II  3A. Deemed Execution Date, if any	(e.g., pt 4. Transacti Code	5. Numbe Derivativ Securities Acquired or Dispos of (D) (Instr. 3, 4 and 5)	er of e s (A)	in this for a currentle quired, Disposed s, options, convote 6. Date Exercise Expiration Date (Month/Day/Ye)  Date Exercisable	m are not red y valid OMB d of, or Benefic ertible securitiable and	cially Owners) 7. Title and of Underly Securities	respond unber. ed d Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi

## **Reporting Owners**

Donation Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Reynolds Cameron John 1 SCOTTS RD #24-05 SHAW CENTRE SINGAPORE, U0 228208	X		President and CEO			

#### **Signatures**

/s/ Cameron Reynolds	04/19/2016
**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) A total of 125,000 Options were granted on April 15, 2016 under the Company's 2015 Stock Incentive Plan. The Options vest in full twelve months from the date of grant.

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.