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

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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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person* Gaetan Michel				2. Issuer Name and Ticker or Trading Symbol VOLITIONRX LTD [VNRX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 13215 BEE CAVE PARKWAY, SUITE 125 GALLERIA OAKS B				3. Date of Earliest Transaction (Month/Day/Year) 08/17/2020							Officer (give title below) X Other (specify below) Manager-Belgian Volition SPRL							
(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							
AUSTIN, TX 78738 (City) (State) (Zip)																		
Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beheniciany											1							
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		if Coc (Ins	Code (Instr. 8)		4. Secur (A) or D (Instr. 3,	of (D)					6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
							C	ode	V	Amount	(A) or (D)	Price					or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock			08/17/2020					M		2,500	A	\$ 2.50	2,50	0			D	
Common Stock			08/17/2020					F		1,786 (<u>1)</u>	D	\$ 3.50	714				D	
Common	Stock		08/17/2020				M		2,500	A	\$ 3	3,214			D			
Common Stock 0			08/17/2020				F		2,143 (1)	D	\$ 3.50	1,071			D			
Reminder:	Report on a s	separate line for each	Table II -	· Derivat	tive S	Secui	rities Ac	P ir d	ersor this isplay	ns who form a ys a cu osed of,	re not re rrently v	equire valid O ficially	d to r	espond control n	unless the	tion contair form	ed SEC	2 1474 (9-02)
4 5711 0	I.	la m			ıts, c						le securi	1 /			l. n		0 140	44.37
1. Title of Derivative Security (Instr. 3) 2. Conversion Date (Month/Day/Y Price of Derivative Security		Date	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction of Code (Instr. 8) Sec Ac (A) Dis		of Deri Secu Acq (A) Disp of (I	oosed D) cr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		ng 4)	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	Ownersh (Instr. 4) D) ect		
				Code	V	(A)	(D)	Date Exerci	sable	Expir Date	ation	Title		Amount or Number of Shares				
Stock Option (Right to Buy)	\$ 2.50	08/17/2020		М			2,500	02/18	3/201	5 08/1	8/2020	Com		2,500	\$ 0	0	D	
Stock Option (Right to Buy)	\$ 3	08/17/2020		М			2,500	02/18	3/201	6 08/1	8/2020	Com		2,500	\$ 0	0	D	
Repor	ting O	wners																

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

13215 BEE CAVE PARKWAY SUITE 125 GALLERIA OAKS B AUSTIN, TX 78738	nager-Belgian Volition SPRL
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Signatures

/s/ Gaetan Michel	08/19/2020
Signature of Reporting Person	Date

Explanation of Responses:

- \star 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) Represents the aggregate number of shares of common stock retained by VolitionRx for cancellation as payment of the exercise price in a cashless exercise by the Reporting Person. No shares were sold by the Reporting Person or VolitionRx in such cashless exercise transaction.

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.