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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

Check this box to indicate that a

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

		Table I - Non-I	Derivative Securities Acquired, Disposed of, or Bene	eficially Owned
(City)	(State)	(Zip)		
DOUGLAS	Y8	IM1 1AH	_	
(Street)				X Form filed by More than One Reporting Person
C/O CROWE N 8 ST. GEORG			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/15/2023	Officer (give title Other (specify below) below)
1. Name and Addr <u>Eight Corp I</u>	ess of Reporting Pers	son*	2. Issuer Name and Ticker or Trading Symbol <u>VOLITIONRX LTD</u> [ VNRX ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner
transaction was contract, instruct purchase or sale issuer that is interest	made pursuant to a tion or written plan for th e of equity securities of t ended to satisfy the nse conditions of Rule instruction 10.			

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	12/15/2023	12/19/2023	S		20,000	D	\$0.75	318,419	I	By Hever Investments Limited
Common Stock								11,706,913	I	By Cotterford Company Limited

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)		5. Num Derivat Securit Acquire or Disp (D) (Ins and 5)	ive ies ed (A) osed of	6. Date Exerce Expiration Da (Month/Day/)	ate	7. Title and A Securities U Derivative S (Instr. 3 and	nderlying ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

1. Name and Address of Reporting Person\*

Eight Corp Ltd

(Last)	(First)	(Middle)
C/O CROWE	MORGAN	
8 ST. GEORG	E'S STREET	
(Street)		

DOUGLAS	Y8	IM1 1AH
(City)	(State)	(Zip)

1. Name and Addres <u>Hever Investr</u>	ss of Reporting Person* <u>nents Ltd</u>		
(Last)	(First)	(Middle)	
C/O CROWE M	ORGAN, 8 ST. GEO	ORGE'S STREET	
(Street)			
DOUGLAS	Y8	IM1 1AH	
(City)	(State)	(Zip)	

Explanation of Responses:

 

 /s/ Amy Slee, Director of Eight Corporation Limited
 12/19/2023

 /s/ Amy Slee, Director of Eight Corporation Limited, Director of Hever Investments Limited
 12/19/2023

 \*\* Signature of Reporting Person
 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

\* 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.