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						

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

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

Name and Address of Reporting Person* Plummer Nicholas					2. Issuer Name and Ticker or Trading Symbol VOLITIONRX LTD [VNRX]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)	(First)	(Mi	ddle)			3. Date of Earliest Transaction (Month/Day/Year) 10/13/2022							X	Officer (g below)			Other (s	specify		
1489 WEST WARM SPRINGS ROAD															GC - Volition Diagnostics					
SUITE 110					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)														X	X Form filed by One Reporting Person Form filed by More than One Reporting Person					
HENDERSON	NV	89	014												Form file	а ву моге	tnan O	пе керопіп	g Person	
(City)	(State)	(Zi _l	p)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					e E		2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or I Of (D) (Instr. 3, 4 ar			Securities Beneficially Following	Beneficially Owned Following Reported		nership Direct (D) irect (I) 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Price	Transactio (Instr. 3 and				(Instr. 4)	
Common Stock 10/1						2			A		9,100 ⁽¹⁾ A		\$0	56,1	56,100		D			
	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)	vative Conversion Date Execution Date,			ate, 1	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable an Expiration Date (Month/Day/Year)		e	7. Title and Am Securities Unde Derivative Secu (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)			Expiration Date	Title		Amount or Number of Shares		(Instr. 4)	on(s)			

Explanation of Responses:

1. On October 4, 2022, the reporting person was awarded 52,000 restricted stock units under the Issuer's 2015 Stock Incentive Plan, subject to vesting upon the achievement of certain corporate performance goals on or prior to December 31, 2022 and June 30, 2023 and also subject to time-based vesting. Certain of the performance goals were met, resulting in the rights with respect to 9,100 restricted stock units vesting. The restricted stock units are further subject to a 3-year time-based vesting schedule, vesting in three installments of 3,034 units, and 3,033 units on each of October 4, 2023, October 4, 2024 and October 4, 2025, respectively. Upon vesting and settlement, the reporting person will receive a number of shares of common stock equal to the number of restricted stock units that have vested.

Remarks:

/s/ Nicholas Plummer

10/14/2022

** 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.