### Edgar Filing: FIRST COMMUNITY BANCSHARES INC /NV/ - Form 4

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FIRST COMN Form 4 May 16, 2005	AUNITY BANC	SHARE	S INC /N	IV/							
FORM	4								APPROVAL		
Washington, D.C. 20549							N OMB Number:	3235-0287			
Check this if no longe subject to Section 16. Form 4 or		F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					Estimated burden ho response	Expires: January 31, 2005 Estimated average burden hours per response 0.5			
Form 5 obligations may contin <i>See</i> Instruc 1(b).	Section 17(a	a) of the H	Public Ut	ility Hold	ing Con		age Act of 1934, of 1935 or Secti 940				
(Print or Type Re	esponses)										
1. Name and Address of Reporting Person <u>*</u> LAMBERT DELPHIE E			2. Issuer Name and Ticker or Trading Symbol FIRST COMMUNITY BANCSHARES INC /NV/ [FCBC]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			BANCS	HARES I	NC /N V	/ [FCBC]					
(Last) P.O. BOX 98	(Mo				B. Date of Earliest Transaction Month/Day/Year) 05/16/2005			Director       10% Owner         Officer (give title       _X Other (specify below)         Financial Accountant			
BLUEFIELD	(Street) , VA 24605-098	9		ndment, Dat th/Day/Year)	-	I			Person		
(City)		(Zip)	Tabl	. I. Nor D	<b>:</b>	S	Person	of on Donoffe	aller Oran ad		
		-					cquired, Disposed		•		
	2. Transaction Date (Month/Day/Year)	Execution any	n Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or of (D) 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect		
Common Stock							297.3202	D			
Common Stock							394.436	I	By Employee Stock Ownership and Savings Plan		

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)

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# 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Titl Amou Under Securi (Instr.	int of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
LAMBERT DELPHIE E							
P.O. BOX 989				Financial Accountant			
BLUEFIELD, VA 24605-0989							
Signatures							

Delphie E. Lambert By: /s/ Robert L. Schumacher (Her Attorney-in-Fact)

\*\*Signature of Reporting Person

# **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).

#### **Remarks:**

\* A Form 3 was filed in error. Ms Lambert is not considered a Section 16 reporting person.

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.

05/16/2005 Date