## Edgar Filing: OHIO VALLEY BANC CORP - Form 4

### OHIO VALLEY BANC CORP

#### Form 4

# August 30, 2002

- Name and Address of Reporting Person Bostic, Sue A.
   134 Portsmouth Road Gallipolis, OH 45631
- Issuer Name and Ticker or Trading Symbol Ohio Valley Banc Corp. (OVBC)
- 3. IRS or Social Security Number of Reporting Person (Voluntary)
- 4. Statement for Month/Year 8/2002
- 5. If Amendment, Date of Original (Month/Day/Year)
- 6. Relationship of Reporting Person(s) to Issuer (Check all applicable)
  - ( ) Director ( ) 10% Owner
  - (X) Officer (give title below) ( ) Other (specify below) Vice President of OVBC  $\,$
- 7. Individual or Joint/Group Filing (Check Applicable Line)
  - (X) Form filed by One Reporting Person
  - ( ) Form filed by More than One Reporting Person

TABLE I -- Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

+	+	+		+			+	
	2. Trans-   action   Date   (Month/	action action		4. Securition     or Dispose   	_		Secu   Secu   Bene   Owne   End	
 	Day/   Year) +	Code 	V     V	Amount 	A/D  +	Price 	+ Mont   +	
Common Stock - with Husband	08/10/2002 08/10/2002 08/10/2002 08/10/2002 08/10/2002 08/10/2002	R R R	V V V V V	0.3449 0.1672 0.1672 0.322 0.159 26.2457	A A A A	\$23.9770 \$23.9770 \$23.9770 \$23.9770 \$23.9770 \$23.9770	3547.25 48.949 23.7686 23.7686 45.7519 22.6243 3728.08	

TABLE II -- Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.	2.	3.	4.	15.		16.		7 <b>.</b>		18
			l			1				
			l			1		Title ar	nd Amount	
			l	1		1		of Under	rlying	
	Conver-			Number of	:	1		Securiti	ies	
	sion or		l	Derivativ	re	Date Exerc	isable -	+	+	+
	Exercise		l	Securitie	S	and Expirat	tion Date		Amount	
	Price of	Transac-	Transac-	Acquired(	A)	(Month/Day)	/Year)		or	
Title of	Deriv-	tion Date	tion Code	Disposed(	D) -	+	+	+	Number	P
Derivative	ative	(Month/ -	+	+		+Date Exer-	Expira-		of	Ι.
Security	Security	Day/Year)	Code  V	(A)  (D)		cisable	tion Date	Title	Shares	5
++	++	+	+	+		+	+	+	+	+-

# Edgar Filing: OHIO VALLEY BANC CORP - Form 4

Explanation of Responses:

SIGNATURE OF REPORTING PERSON /s/ Sue A. Bostic

DATE 08/19/2002