## Edgar Filing: WARD F STEPHEN - Form 4

WARD F ST	EPHEN										
Form 4	_										
June 02, 200											
<b>FORM 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check thi			( using ton, 2.0. 200 )					Expires:	January 31,		
if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWN						NERSHIP OF	Estimated	2005 average			
Section 16. SECURITIES								burden hou			
Form 4 or Form 5	Form 4 or Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	. 0.5		
obligation	•	a) of the Public U						m			
may cont See Instru	inue.	30(h) of the I	•	•	- ·			/11			
1(b).	iction			<b>r</b>	<i>,</i>						
(Print or Type F	Responses)										
1. Name and A	ddress of Reporting I	Person <sup>*</sup> 2 Issue	r Name <b>and</b>	Ticker or '	Tradin	σ	5. Relationship o	f Reporting Per	Reporting Person(s) to		
WARD F ST	Symbol	2. Issuer Name <b>and</b> Ticker or Trading ymbol				Issuer					
	rst Bancorp, Inc /ME/ [FNLC]				(Check all applicable)						
(Last)	(First) (M	Aiddle) 3. Date of	3. Date of Earliest Transaction				(Che	ek an applicable)			
		(Month/Day/Year) 06/01/2009				Director 10% Owner Officer (give title Other (specify below) below)					
PO BOX 94	06/01/2										
							Treasurer, EVP - CFO				
		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person					
DAMARISCOTTA ME 04543 Form filed by More than One Reporting											
		( <b>7</b> :)					Person				
(City)			le I - Non-D	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date (Month/Day/Year)		3. 4. Securities				5. Amount of Securities	6. Ownership 7. Natu Form: Direct Indirec			
Security (Instr. 3)		Execution Date, if any	TransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)				(D) or	Beneficial			
		(Month/Day/Year				5)	Owned	Indirect (I)			
							Following Reported	(Instr. 4)	(Instr. 4)		
					(A) or		Transaction(s)				
			Code V	Amount		Price	(Instr. 3 and 4)				
Common	06/01/2009		S	1,000	D	\$ 17	28,034	D			
Stock											
Common							0 105 000		Through		
Stock							9,425.092	Ι	401(k) Plan		
									Plan		

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

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 control number.

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 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. Transactio Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Add	dress	Relationships						
	Director	10% Owner	Officer	Other				
WARD F STEPHEN								
PO BOX 940			Treasurer, EVP - CFO					
DAMARISCOTTA, ME 04543								
Signatures								
F. Stephen Ward	06/01/2009							
**Signature of Reporting Person	Date							

## **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).

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.