#### **BONVECHIO LOUISE M**

Form 5

January 24, 2011

#### **OMB APPROVAL** FORM 5 **OMB**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if

no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940

Form 4

1(b).

Transactions Reported

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

1. Name and Address of Reporting Person * BONVECHIO LOUISE M			2. Issuer Name and Ticker or Trading Symbol COMMUNITY BANCORP /VT [CMTV]					5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) 4811 US ROU	, , , , ,	fiddle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010			$\equiv$	Director X Officer (give low)	give title 10% Owner Other (specify below) Treasurer			
4011 US ROC	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			6.	Individual or Joint/Group Reporting  (check applicable line)				
DERBY, VT		(Zip)	Tobla I	- Non-Dariya	tiva Sacur	ritias /	Per	_ Form Filed by C _ Form Filed by M rson ed, Disposed of,	fore than One Re	porting	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	r) Execu- any		3. Transaction Code (Instr. 8)	4. Securit Acquired Disposed (Instr. 3,	ties (A) o of (D	or ))	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct	7. Nature of Indirect	
Community Bancorp.	Â	Â		Â	Â	Â	Â	4,620.1	I	401K Plar	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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.

**SEC 2270** 

(9-02)

3235-0362

January 31,

2005

1.0

Number:

Expires:

response...

Estimated average

burden hours per

#### Edgar Filing: BONVECHIO LOUISE M - Form 5

1. Title of Derivative Security	2. Conversion or Exercise	3. Transaction Date (Month/Day/Year)		4. Transaction Code	5. Number of	6. Date Exerc Expiration Do (Month/Day/	ate	7. Title Amou Under	nt of	8. Price of Derivative Security	
(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	e	. va.,	Securi	, ,	(Instr. 5)	
					(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

of D

Is Fi

# **Reporting Owners**

Reporting Owner Name / Address	Relationships							
<b>FB</b>	Director	10% Owner	Officer	Other				
BONVECHIO LOUISE M 4811 US ROUTE 5 DERBY, VT 05829	Â	Â	Treasurer	Â				

### **Signatures**

Louise
Bonvechio

\*\*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).
- (1) (J) 184.6540 of these shares were purchased by the Trustee of the Company's 401K Plan from 1/1/10 to 12/31/10 and the range of prices paid was \$7.75 to \$11.75.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.

Reporting Owners 2