FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-01							
Estimated average burden							
hours per response:	0.5						

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

Spencer Jonathan R (Mc			. Date of Event Requiring Staten Month/Day/Year .0/16/2006	nent	3. Issuer Name and Ticker or Trading Symbol SHENANDOAH TELECOMMUNICATIONS CO/VA/ [SHEN]							
(Last) (First) (Middle) PO BOX 459			10,10,2000		Relationship of Reporting Perso (Check all applicable) Director		10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) EDINBURG					X	Officer (give title below) VP & General Co			6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One			
(City)	(State)	(Zip)								Reporting Po	erson	
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) 4. Nature of Indirect Beneficial (Instr. 5)		Beneficial Ownership			
Common Stock												
Common Stock	ζ.					100	D					
Common Stock	ζ	(e. <u>;</u>				100 urities Beneficially Coptions, convertible	Owned	s)				
1. Title of Deriva				is, warra	nts, c	urities Beneficially (Owned securities	4. Conver	cise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Explanation of Responses:

/s/ Jonathan R. Spencer

10/16/2006

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).