Edgar Filing: FRANKLIN FINANCIAL SERVICES CORP /PA/ - Form 4

FRANKLIN FINANCIAL SERVICES CORP /PA/

Form 4

September 04, 2015

FORM	1 /1								OMB AF	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check this box if no longer white to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							NERSHIP OF	Expires:	January 31, 2005		
subject to Section 1 Form 4 of Form 5	SECURITIES Section 16(a) of the Securities Exchange						Estimated average burden hours per response 0				
obligatio may con See Instr 1(b).	ns section	17(a) of the	Public Ut		ling Con	npany	y Act of	1935 or Section	1		
(Print or Type	Responses)										
1. Name and Address of Reporting Person * Hanks Patricia A			2. Issuer Name and Ticker or Trading Symbol FRANKLIN FINANCIAL				ng	5. Relationship of Reporting Person(s) to Issuer			
			SERVICES CORP /PA/ [FRAF]					(Check all applicable)			
(Last) (First) (Middle) 20 SOUTH MAIN STREET, PO			3. Date of Earliest Transaction (Month/Day/Year) 09/02/2015					Director 10% Owner X Officer (give title Other (specify below)			
BOX 6010	MAIN STREI	L1, FO	09/02/2	013					SVP		
			4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CHAMBER	RSBURG, PA	17201						Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	any		med on Date, if Day/Year)	3. Transaction Code (Instr. 8)	ransaction(A) or Disposed of (D) ode (Instr. 3, 4 and 5) nstr. 8)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Franklin				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Financial Services Corp.	09/02/2015			P	2	A	\$ 23.91	1,504 (1)	D		
Reminder: Rep	oort on a separate	line for each c	lass of secu	rities benefi	icially owr	ned din	rectly or i	ndirectly.			

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) 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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration D	ate	Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration	Title N			
						Exercisable	Date		tle Number of		
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

CHAMBERSBURG, PA 17201

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Hanks Patricia A							
20 SOUTH MAIN STREET			SVP				
PO BOX 6010			SVP				

Signatures

Patricia A. Hanks by Amanda M. Ducey, Corporate 09/04/2015 Secretary

> **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).
- Includes shares purchased through Dividend Reinvestment Plan

Remarks:

POA on file with corporation.

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.

Reporting Owners 2