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

### FRANKLIN FINANCIAL SERVICES CORP /PA/

Form 4

September 18, 2015

FURIVI	UNITE	D STAT					NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or Form 5	er STAT: 6. Filed t	Washington, D.C. 20549  STATEMENT OF CHANGES IN BENEFICIAL OWNERSH SECURITIES  Filed pursuant to Section 16(a) of the Securities Exchange Act of							Expires: Estimated a burden hou response	rs per	
obligation may conti <i>See</i> Instru 1(b).	nue.		the Public Ut (h) of the Inv	•	_	_		f 1935 or Sectio 40	n		
(Print or Type R	desponses)										
			Symbol FRANK	FRANKLIN FINANCIAL				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) 20 SOUTH 1	(Last) (First) (Middle)				SERVICES CORP /PA/ [FRAF]  3. Date of Earliest Transaction (Month/Day/Year) 09/16/2015				e title 10% Owner below) SVP		
CHAMBER	(Street) SBURG, PA	17201		ndment, Dat th/Day/Year)	_			6. Individual or Jo Applicable Line) _X_ Form filed by Inc. Person	One Reporting Pe	erson	
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	Securi	ties Acc	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	eurity (Month/Day/Year) Execution any		Deemed cution Date, if onth/Day/Year)	n Date, if Transaction(A) o Code (D)			d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Franklin Financial Services Corp.	09/16/2015			P	1	A	\$ 23.6	209	D		
Reminder: Repo	ort on a separate	line for eac	ch class of secur	ities benefi	Person	s wh	o resp	indirectly.  ond to the collect  ned in this form		EC 1474 (9-02)	

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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		4.	5.	6. Date Exerc		7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	onNumber	Expiration D	ate	Amou	int of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(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)						
									Amount		
									Amount		
						Date	Expiration	Title	Or		
						Exercisable	isable Date				
				C 1 W	(A) (D)				of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Othe			

Carmack Karen K 20 SOUTH MAIN STREET CHAMBERSBURG, PA 17201

**SVP** 

## **Signatures**

Karen K. Carmack by Amanda M. Ducey, Corporate Secretary

09/18/2015

\*\*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).

#### **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.

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