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

### FRANKLIN FINANCIAL SERVICES CORP /PA/

Form 4

September 18, 2015

FORM 4 UNITED STATES SECURITIES AN										OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box							OMB Number:	3235-0287			
Check the if no long subject to Section 1 Form 4 configuration for the section 1 See Instruction 1 (b).	ger o ST. 16. or Fil ns Section	ed purs	uant to S	Section 16 Public Ut	SECURI 6(a) of the	TTIES  Securiti ing Com	es Ez pany	xchang Act o	NERSHIP OF the Act of 1934, of 1935 or Section 40	Expires: Estimated a burden hou response	•	
(Print or Type	Responses)											
Cekovich Ronald L Symbo FRAN				Symbol FRANK	ANKLIN FINANCIAL				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
		_			ES CORI	_	'RAI	<u>-[]</u>				
(M				(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 09/16/2015				DirectorX Officer (give below)	e title 07% Owner  Other (specify below)  SVP		
CHAMBER	(Street)	PA 1720	01		ndment, Dat th/Day/Year)	_			6. Individual or Jo Applicable Line) _X_ Form filed by N Person		erson	
(City)	(State)	(	Zip)	Table	e I - Non-De	erivative S	ecuri	ties Acc	quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transact (Month/Da		Execution	med n Date, if Day/Year)	3. Transactio Code (Instr. 8)	on(A) or Di (D) (Instr. 3,	spose 4 and (A) or	d of 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Franklin Financial Services Corp.	09/16/20	15				4	` ′		1,989	D		
Reminder: Rep	oort on a separ	rate line	for each cl	ass of secur	rities benefic	cially own	ed dire	ectly or	indirectly.			
						informa	ation	contai	ond to the collect ned in this form and unless the form	are not	EC 1474 (9-02)	

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		4.	5.	6. Date Exer		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(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		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						LACICISADIC	Date		of		
				Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Cekovich Ronald L							
20 S MAIN STREET			SVP				
CHAMBERSBURG, PA 17201							

## **Signatures**

Ronald L. Cekovich by Amanda M. Ducey, Corporate 09/18/2015 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).

#### **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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