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

#### FRANKLIN FINANCIAL SERVICES CORP /PA/

Form 4

November 20, 2015

<b>FORM</b>	14								OMB AF	PPROVAL	
Washington, D.C. 20549									OMB Number:	3235-0287	
Check the if no long subject to Section 1 Form 4 or Form 5 obligation may com See Instruction 1 (b).	ger STATI 16. or Filed p ns Section 1	oursuant to S 7(a) of the	F CHAN Section 19 Public Ut	GES IN I SECUR	BENEF ITIES  Securit ling Con	ICIA ies E	xchange y Act of	NERSHIP OF e Act of 1934, f 1935 or Section	Expires: Estimated a burden hour response		
(Print or Type	Responses)										
Cekovich Ronald L Symbol			. Issuer Name <b>and</b> Ticker or Trading mbol RANKLIN FINANCIAL ERVICES CORP /PA/ [FRAF]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
SERV							(Chock an applicable)				
				of Earliest Transaction /Day/Year) 2015				Director _X_ Officer (give below)	e title Other (specify below) svp		
CHAMBEF	(Street)	7201		ndment, Danth/Day/Year)	_	I		6. Individual or Jo Applicable Line) _X_ Form filed by C Form filed by M Person	One Reporting Pe	rson	
(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)	Title of 2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price				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.	11/18/2015				4			2,006	D		
Reminder: Rep	oort on a separate l	ine for each cl	lass of secu	rities benefi	cially owr	ned din	rectly or i	ndirectly.			
					inform	ation	n contair	ond to the collect ned in this form a d unless the forn	are not	EC 1474 (9-02)	

displays a currently valid OMB control

number.

**OMB APPROVAL** 

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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		
							Date	Title	Number		
						Excicisable	Date		of		
				Code V	(A) (D)				Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
·L	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
Secretary

11/20/2015

\*\*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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