

FRANKLIN FINANCIAL SERVICES CORP /PA/  
 Form 4  
 July 17, 2015

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2015  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 Hanks Patricia A

2. Issuer Name and Ticker or Trading Symbol  
 FRANKLIN FINANCIAL SERVICES CORP /PA/ [FRAF]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Date of Earliest Transaction (Month/Day/Year)  
 03/04/2015

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
 SVP

20 SOUTH MAIN STREET, PO BOX 6010

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

CHAMBERSBURG, PA 17201

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 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)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount or Price		
Franklin Financial Services Corp.	03/04/2015		J		2 <sup>(1)</sup> A \$ 21.73	1,196	D
Franklin Financial Services Corp.	04/01/2015		J		2 <sup>(1)</sup> A \$ 23.7	1,198	D
Franklin Financial Services	04/29/2015		J		2 <sup>(1)</sup> A \$ 25.35	1,200	D

Corp.

Franklin  
Financial  
Services  
Corp.

05/04/2015

X

50 <sup>(2)</sup>

A

\$  
18.91

1,250

D

Franklin  
Financial  
Services  
Corp.

06/03/2015

J

2 <sup>(1)</sup>

A

\$ 25.1

1,261 <sup>(3)</sup>

D

Franklin  
Financial  
Services  
Corp.

06/18/2015

X

228 <sup>(2)</sup>

A

\$  
18.91

1,489

D

Franklin  
Financial  
Services  
Corp.

07/01/2015

J

2 <sup>(1)</sup>

A

\$  
24.83

1,491

D

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

**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 control number.**

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(9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
Franklin Financial Services Corp.	\$ 18.91	05/04/2015		X		50	07/01/2014 06/30/2015	Franklin Financial Services Corporation	50
Franklin Financial Services	\$ 18.91	06/18/2015		X		228	07/01/2014 06/30/2015	Franklin Financial Services	228

Corp.								Corporation	
Franklin Financial Services Corp.	\$ 23.42	07/01/2015	A	261	07/01/2015	06/30/2016		Franklin Financial Services Corporation	261

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Hanks Patricia A 20 SOUTH MAIN STREET PO BOX 6010 CHAMBERSBURG, PA 17201			SVP	

## Signatures

Patricia A. Hanks by Amanda Ducey, Corporate Secretary 07/17/2015

\*\*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).
- (1) Purchased through Franklin Financial's Stock Purchase Plan
- (2) Shares purchased through Franklin Financial's Employee Stock Purchase Program
- (3) Balance includes shares purchased through Franklin Financial's Dividend Reinvestment Plan

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.