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

| FRANKLIN Form 4 April 07, 20 | N FINANCIAL SI)15 | ERVICES | CORP | /PA/ | | | | | | | |
|---|---|---|---|---|---|---|--|--|--|-----|--|
| FORM | | | | | | | | OMB A | PPROVA | L | |
| | UNITED | STATES | SECURITIES AND EXCHANGE Co Washington, D.C. 20549 | | | | COMMISSIO | N OMB Number: | 3235-0287 January 31 2005 | | |
| Check t if no loi | laer | | | | | | | Expires: | | | |
| subject Section Form 4 | to SIAIE N 16. | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI SECURITIES | | | | | | | average urs per | 0.5 | |
| Form 5 obligati may co <i>See</i> Inst 1(b). | ons ntinue. Section 17(| (a) of the l | Public U | Jtility Hol | response 0 a) of the Securities Exchange Act of 1934, ty Holding Company Act of 1935 or Section stment Company Act of 1940 | | | | | | |
| (Print or Type | Responses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> Hollar Mark R | | | 2. Issuer Name and Ticker or Trading Symbol FRANKLIN FINANCIAL | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | |
| | | | SERVICES CORP /PA/ [FRAF] | | | | | | | | |
| (Last) | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015 | | | Director 10% Owner X_ Officer (give title Other (specify below) below) CFO/SVP | | | | | | | |
| (Street) | | | 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 | | | | | |
| CHAMBE | RSBURG, PA 172 | 201 | | | | | | More than One R | | | |
| (City) | (State) | (Zip) | Tał | ole I - Non-l | Derivative | Securities A | cquired, Disposed | of, or Beneficia | lly Owned | 1 | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution any | Date, if | 3. Transactio Code (Instr. 8) Code V | | (A) or of (D) | 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 Indirect Beneficia Ownershi (Instr. 4) | 1 | |
| Reminder: Re | port on a separate line | e for each cl | ass of sec | urities bene | ficially own | ned directly (| or indirectly | | | | |
| Kenninger, Ke | | | | | Perso inform requir | ns who rest nation cont ed to respo ys a curre | spond to the colle ained in this forn ond unless the fo ntly valid OMB co | n are not rm | SEC 1474 (9-02) | | |

 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. Number of | 6. Date Exercisable and | 7. Title and Amount of |
|-------------|-------------|---------------------|--------------------|-----------|--------------|-------------------------|------------------------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transacti | orDerivative | Expiration Date | Underlying Securities |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) |

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| (Instr. 3) | Price of Derivative Security | | (Month/Day/Year) | (Instr. 8) | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | | | |
|---|------------------------------------|------------|------------------|------------|--|-----|---------------------|--------------------|-------------------------------|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Franklin Financial Services Corp | \$ 27.42 | 02/10/2015 | | E | | 750 | 02/10/2004 | 02/10/2015 | Incentive Stock Options | 750 |
| Franklin Financial Services Corp | \$ 22.05 | 02/26/2015 | | A | 2,500 | | 08/26/2015 | 02/26/2025 | Incentive Stock Options | 2,500 |

Reporting Owners

| Reporting Owner Name / Addre | SS | Relationships | | | | | | |
|---|------------|---------------|---------|-------|--|--|--|--|
| | | 10% Owner | Officer | Other | | | | |
| Hollar Mark R 20 SOUTH MAIN STREET CHAMBERSBURG, PA 172 | 01 | | CFO/SVP | | | | | |
| Signatures | | | | | | | | |
| Mark R. Hollar | 04/07/2015 | | | | | | | |

<u>**</u>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).

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.