#### Edgar Filing: FRANKLIN FINANCIAL SERVICES CORP /PA/ - Form 3

#### FRANKLIN FINANCIAL SERVICES CORP /PA/

Form 3

August 27, 2015

# FORM 3

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

**OMB APPROVAL** 

**OMB** Number:

response...

3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF Expires: January 31, 2005

0.5

Estimated average burden hours per

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

**SECURITIES** 

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \* 2. Date of Event

Heckman Lorie M.

(Last)

Requiring Statement

(Month/Day/Year) 03/02/2015

(Middle)

3. Issuer Name and Ticker or Trading Symbol

FRANKLIN FINANCIAL SERVICES CORP /PA/

[FRAF]

(First)

4. Relationship of Reporting

Person(s) to Issuer

Director

X\_ Officer

5. If Amendment, Date Original

Filed(Month/Day/Year)

20 S. MAIN STREET

(Street)

(Check all applicable)

**SVP** 

6. Individual or Joint/Group

Filing(Check Applicable Line) 10% Owner \_X\_ Form filed by One Reporting

Other Person (give title below) (specify below)

Form filed by More than One

Reporting Person

CHAMBERSBURG, Â PAÂ 17201

(State) (Zip)

**Table I - Non-Derivative Securities Beneficially Owned** 

1. Title of Security (Instr. 4)

(City)

2. Amount of Securities Beneficially Owned

(Instr. 4)

3. Ownership Form:

4. Nature of Indirect Beneficial Ownership

(Instr. 5)

or Indirect (I) (Instr. 5)

Direct (D)

Reminder: Report on a separate line for each class of securities beneficially

owned directly or indirectly.

SEC 1473 (7-02)

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.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)

2. Date Exercisable and **Expiration Date** (Month/Day/Year)

3. Title and Amount of Securities Underlying **Derivative Security** (Instr. 4)

4 Conversion or Exercise Price of

5. Ownership Form of Derivative

6. Nature of Indirect Beneficial Ownership (Instr. 5)

Date

**Expiration Title** Date

Amount or Number of Derivative Security

Security: Direct (D) or Indirect

Exercisable

Shares

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

Heckman Lorie M.

20 S. MAIN STREET Â Â Â SVP Â

CHAMBERSBURG, PAÂ 17201

# **Signatures**

Lorie M. Heckman, by Amanda M. Ducey, Corporate Secretary

08/27/2015

\*\*Signature of Reporting Person

Date

# **Explanation of Responses:**

No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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#### **Remarks:**

POA on file at 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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