

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Erie Indemnity Company PAC - Federal

ADDRESS (number and street) 100 Erie Insurance Place
 Check if different than previously reported. (ACC)
Erie PA 16530

2. **FEC IDENTIFICATION NUMBER** C00153577
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Gary D. Veshecco

Signature of Treasurer Electronically Filed by Gary D. Veshecco Date 10 01 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Erie Indemnity Company PAC - Federal

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		43906.91
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	68524.02									
(c) Total Receipts (from Line 19)	15831.57	49848.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84355.59	93755.59								
7. Total Disbursements (from Line 31)	9450.00	18850.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	74905.59	74905.59								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Erie Indemnity Company PAC - Federal

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	13396.27	38086.38
(ii) Unitemized	1935.30	11262.30
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15331.57	49348.68
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15331.57	49348.68
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	500.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15831.57	49848.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15831.57	49848.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7700.00	10100.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1750.00	8750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	9450.00	18850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9450.00	18850.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	15331.57	49348.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15331.57	49348.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Mark K. Banks

Mailing Address 5123 Flintlock Ln.

City State Zip Code
Roanoke VA 24018

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7127

Amount of Each Receipt this Period 80.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Mark K. Banks

Mailing Address 5123 Flintlock Ln.

City State Zip Code
Roanoke VA 24018

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7200

Amount of Each Receipt this Period 80.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Mark K. Banks

Mailing Address 5123 Flintlock Ln.

City State Zip Code
Roanoke VA 24018

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7295

Amount of Each Receipt this Period 120.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) 280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Michael A. Bova

Mailing Address 5913 Beacon Hill Lane

City State Zip Code
Erie PA 16509

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 23 / 2010
Transaction ID: SA11AI.7202

Amount of Each Receipt this Period 30.00

PAC Contribution

B. Full Name (Last, First, Middle Initial)
Michael A. Bova

Mailing Address 5913 Beacon Hill Lane

City State Zip Code
Erie PA 16509

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 09 / 28 / 2010
Transaction ID: SA11AI.7297

Amount of Each Receipt this Period 45.00

PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey W. Brinling

Mailing Address 5603 Stoneridge Drive

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group Senior VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 23 / 2010
Transaction ID: SA11AI.7130

Amount of Each Receipt this Period 80.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) 155.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey W. Brinling
Mailing Address 5603 Stoneridge Drive
City State Zip Code
Fairview PA 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Senior VP
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 680.00
Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0
Transaction ID: SA11AI.7203
Amount of Each Receipt this Period
80.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey W. Brinling
Mailing Address 5603 Stoneridge Drive
City State Zip Code
Fairview PA 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Senior VP
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00
Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0
Transaction ID: SA11AI.7298
Amount of Each Receipt this Period
120.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
Patrick Burns
Mailing Address 23840 State Road 213
City State Zip Code
Noblesville IN 46060
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Claims Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00
Date of Receipt
M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0
Transaction ID: SA11AI.7131
Amount of Each Receipt this Period
50.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 250.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Patrick Burns

Mailing Address 23840 State Road 213

City Noblesville State IN Zip Code 46060

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11AI.7204

Amount of Each Receipt this Period 50.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Patrick Burns

Mailing Address 23840 State Road 213

City Noblesville State IN Zip Code 46060

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Claims Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2010

Transaction ID: SA11AI.7299

Amount of Each Receipt this Period 75.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Raymond T. Cogan

Mailing Address 1694 Barrister Ct

City Crofton State MD Zip Code 21114-2602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.05

Date of Receipt 09 / 28 / 2010

Transaction ID: SA11AI.7301

Amount of Each Receipt this Period 31.02

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 156.02

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Marcia A. Dall		Date of Receipt
	Mailing Address 4891 Equestrian Drive		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7134
Name of Employer Erie Insurance Group		Occupation Executive VP & CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="157.70"/>
		<input type="text" value="1173.10"/>	PAC Contribution

B.	Full Name (Last, First, Middle Initial) Marcia A. Dall		Date of Receipt
	Mailing Address 4891 Equestrian Drive		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7207
Name of Employer Erie Insurance Group		Occupation Executive VP & CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="307.70"/>
		<input type="text" value="1480.80"/>	PAC Contribution

C.	Full Name (Last, First, Middle Initial) Marcia A. Dall		Date of Receipt
	Mailing Address 4891 Equestrian Drive		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7302
Name of Employer Erie Insurance Group		Occupation Executive VP & CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="461.55"/>
		<input type="text" value="1942.35"/>	PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="926.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial) Mark Dombrowski		Date of Receipt MM / DD / YYYY 07 / 23 / 2010
Mailing Address 4361 Cooper Road		Transaction ID: SA11AI.7136
City Erie	State PA	Zip Code 16510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Erie Insurance Group	Occupation Department Manager	PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.

Full Name (Last, First, Middle Initial) Mark Dombrowski		Date of Receipt MM / DD / YYYY 08 / 23 / 2010
Mailing Address 4361 Cooper Road		Transaction ID: SA11AI.7209
City Erie	State PA	Zip Code 16510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Erie Insurance Group	Occupation Department Manager	PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C.

Full Name (Last, First, Middle Initial) Mark Dombrowski		Date of Receipt MM / DD / YYYY 09 / 28 / 2010
Mailing Address 4361 Cooper Road		Transaction ID: SA11AI.7304
City Erie	State PA	Zip Code 16510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Erie Insurance Group	Occupation Department Manager	PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	175.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
George Dufala

Mailing Address 4896 Thoroughbred Loop

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Division Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 23 / 2010

Transaction ID: SA11AI.7137

Amount of Each Receipt this Period
 40.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
George Dufala

Mailing Address 4896 Thoroughbred Loop

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Division Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 23 / 2010

Transaction ID: SA11AI.7210

Amount of Each Receipt this Period
 80.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
George Dufala

Mailing Address 4896 Thoroughbred Loop

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Division Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 28 / 2010

Transaction ID: SA11AI.7305

Amount of Each Receipt this Period
 120.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **240.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Lorianne Feltz-Upperman

Mailing Address 6418 Field Valley Lane

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Sr VP & Division Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7308

Amount of Each Receipt this Period
120.00

PAC Contribution

B. Full Name (Last, First, Middle Initial)
Mr. Douglas N. Fitzgerald

Mailing Address 2311 Wedgewood Way

City State Zip Code
York PA 17404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.75

Date of Receipt
MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7140

Amount of Each Receipt this Period
38.50

PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Douglas N. Fitzgerald

Mailing Address 2311 Wedgewood Way

City State Zip Code
York PA 17404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Regional Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.25

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7213

Amount of Each Receipt this Period
38.50

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 197.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Mr. Douglas N. Fitzgerald

Mailing Address 2311 Wedgewood Way

City York State PA Zip Code 17404

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Regional Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt 09 / 28 / 2010

Transaction ID: SA11AI.7309

Amount of Each Receipt this Period 57.75

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Theresa M. Gamble

Mailing Address 1049 W 24th Street

City Erie State PA Zip Code 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 23 / 2010

Transaction ID: SA11AI.7142

Amount of Each Receipt this Period 30.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Theresa M. Gamble

Mailing Address 1049 W 24th Street

City Erie State PA Zip Code 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11AI.7215

Amount of Each Receipt this Period 30.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **117.75**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Theresa M. Gamble

Mailing Address 1049 W 24th Street

City State Zip Code
Erie PA 16502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Supervisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7311

Amount of Each Receipt this Period

45.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
William D. Gheres

Mailing Address 120 Madeline Dr.

City State Zip Code
Edinboro PA 16412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 211.67

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.7218

Amount of Each Receipt this Period

25.12

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
William D. Gheres

Mailing Address 120 Madeline Dr.

City State Zip Code
Edinboro PA 16412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 249.35

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7314

Amount of Each Receipt this Period

37.68

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶

107.80

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) David R. Glod		Date of Receipt
	Mailing Address 4902 Reese Road		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7146
Name of Employer Erie Insurance Group		Occupation Fixed Income Portfolio Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="225.00"/>	<input type="text" value="50.00"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) David R. Glod		Date of Receipt
	Mailing Address 4902 Reese Road		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7219
Name of Employer Erie Insurance Group		Occupation Fixed Income Portfolio Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="275.00"/>	<input type="text" value="50.00"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) David R. Glod		Date of Receipt
	Mailing Address 4902 Reese Road		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7315
Name of Employer Erie Insurance Group		Occupation Fixed Income Portfolio Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	<input type="text" value="75.00"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Gregory J. Gutting

Mailing Address 529 Sybil Dr.

City State Zip Code
Erie PA 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Division Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1197.05

Date of Receipt

M M / D D / Y Y Y Y
07 23 2010

Transaction ID: SA11AI.7147

Amount of Each Receipt this Period

161.68

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Gregory J. Gutting

Mailing Address 529 Sybil Dr.

City State Zip Code
Erie PA 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Division Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1358.73

Date of Receipt

M M / D D / Y Y Y Y
08 23 2010

Transaction ID: SA11AI.7220

Amount of Each Receipt this Period

161.68

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Gregory J. Gutting

Mailing Address 529 Sybil Dr.

City State Zip Code
Erie PA 16505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Division Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1601.25

Date of Receipt

M M / D D / Y Y Y Y
09 28 2010

Transaction ID: SA11AI.7316

Amount of Each Receipt this Period

242.52

PAC Contribution

SUBTOTAL of Receipts This Page (optional)

565.88

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
John F. Kearns
Mailing Address 5804 Wind Chime Ln.
City Fairview State PA Zip Code 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Division Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1155.00
Date of Receipt 07 / 23 / 2010
Transaction ID: SA11AI.7154
Amount of Each Receipt this Period 154.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
John F. Kearns
Mailing Address 5804 Wind Chime Ln.
City Fairview State PA Zip Code 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Division Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1309.00
Date of Receipt 08 / 23 / 2010
Transaction ID: SA11AI.7228
Amount of Each Receipt this Period 154.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
John F. Kearns
Mailing Address 5804 Wind Chime Ln.
City Fairview State PA Zip Code 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Division Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1540.00
Date of Receipt 09 / 28 / 2010
Transaction ID: SA11AI.7323
Amount of Each Receipt this Period 231.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 539.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Christine L. Lucas

Mailing Address 2152 Lorwood Dr.

City Erie State PA Zip Code 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Regional Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 07 / 23 / 2010
Transaction ID: SA11AI.7158

Amount of Each Receipt this Period: 30.00

PAC Contribution

B. Full Name (Last, First, Middle Initial)
Christine L. Lucas

Mailing Address 2152 Lorwood Dr.

City Erie State PA Zip Code 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Regional Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 08 / 23 / 2010
Transaction ID: SA11AI.7232

Amount of Each Receipt this Period: 30.00

PAC Contribution

C. Full Name (Last, First, Middle Initial)
Christine L. Lucas

Mailing Address 2152 Lorwood Dr.

City Erie State PA Zip Code 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Regional Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 28 / 2010
Transaction ID: SA11AI.7327

Amount of Each Receipt this Period: 45.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 105.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 39
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Christina M. Marsh	Date of Receipt MM / DD / YYYY 07 / 23 / 2010
	Mailing Address 2805 Ash St., Apt. 2	Transaction ID: SA11AI.7161
	City Erie State PA Zip Code 16504	Amount of Each Receipt this Period 84.46
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer: Erie Insurance Group Occupation: Division Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 502.69	

B.	Full Name (Last, First, Middle Initial) Christina M. Marsh	Date of Receipt MM / DD / YYYY 08 / 23 / 2010
	Mailing Address 2805 Ash St., Apt. 2	Transaction ID: SA11AI.7235
	City Erie State PA Zip Code 16504	Amount of Each Receipt this Period 84.46
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer: Erie Insurance Group Occupation: Division Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 587.15	

C.	Full Name (Last, First, Middle Initial) Christina M. Marsh	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 2805 Ash St., Apt. 2	Transaction ID: SA11AI.7330
	City Erie State PA Zip Code 16504	Amount of Each Receipt this Period 126.69
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer: Erie Insurance Group Occupation: Division Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 713.84	

SUBTOTAL of Receipts This Page (optional)	295.61
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Patrick J. McMichael

Mailing Address 601 Valley Hill Ln.

City State Zip Code
Knoxville TN 37922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Branch Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 347.25

Date of Receipt
MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7162

Amount of Each Receipt this Period
38.50

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Patrick J. McMichael

Mailing Address 601 Valley Hill Ln.

City State Zip Code
Knoxville TN 37922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Branch Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.75

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7236

Amount of Each Receipt this Period
38.50

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Patrick J. McMichael

Mailing Address 601 Valley Hill Ln.

City State Zip Code
Knoxville TN 37922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Branch Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 443.50

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7331

Amount of Each Receipt this Period
57.75

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **134.75**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
David J. Miller

Mailing Address 4852 Appaloosa Ct.

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.05

Date of Receipt 07 / 23 / 2010

Transaction ID: SA11AI.7164

Amount of Each Receipt this Period 45.78

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
David J. Miller

Mailing Address 4852 Appaloosa Ct.

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 385.83

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11AI.7238

Amount of Each Receipt this Period 45.78

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
David J. Miller

Mailing Address 4852 Appaloosa Ct.

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 454.50

Date of Receipt 09 / 28 / 2010

Transaction ID: SA11AI.7333

Amount of Each Receipt this Period 68.67

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 160.23

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Matthew W. Myers		Date of Receipt
	Mailing Address 6515 Honey Ln.		<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7167
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	<input type="text" value="100.00"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Matthew W. Myers		Date of Receipt
	Mailing Address 6515 Honey Ln.		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7241
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="850.00"/>	<input type="text" value="100.00"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Matthew W. Myers		Date of Receipt
	Mailing Address 6515 Honey Ln.		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7336
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	<input type="text" value="150.00"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="350.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Timothy NeCastro

Mailing Address 6146 Scioto Court

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7168

Amount of Each Receipt this Period
50.00

PAC Contribution

B. Full Name (Last, First, Middle Initial)
Timothy NeCastro

Mailing Address 6146 Scioto Court

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7242

Amount of Each Receipt this Period
50.00

PAC Contribution

C. Full Name (Last, First, Middle Initial)
Timothy NeCastro

Mailing Address 6146 Scioto Court

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7337

Amount of Each Receipt this Period
75.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **175.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Sue Pfadt

Mailing Address 5811 Southland Drive

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer: Erie Insurance Group Occupation: Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 07 / 23 / 2010

Transaction ID: SA11AI.7170

Amount of Each Receipt this Period: 40.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Sue Pfadt

Mailing Address 5811 Southland Drive

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer: Erie Insurance Group Occupation: Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 08 / 23 / 2010

Transaction ID: SA11AI.7244

Amount of Each Receipt this Period: 40.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Sue Pfadt

Mailing Address 5811 Southland Drive

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer: Erie Insurance Group Occupation: Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 28 / 2010

Transaction ID: SA11AI.7339

Amount of Each Receipt this Period: 60.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **140.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Michael A. Plazony

Mailing Address 5500 Stoneridge Drive

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 263.05

Date of Receipt
MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7171

Amount of Each Receipt this Period
35.30

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Michael A. Plazony

Mailing Address 5500 Stoneridge Drive

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.35

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7245

Amount of Each Receipt this Period
35.30

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Michael A. Plazony

Mailing Address 5500 Stoneridge Drive

City State Zip Code
Fairview PA 16415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.30

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7340

Amount of Each Receipt this Period
52.95

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **123.55**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Mr. Eric D. Root	Date of Receipt MM / DD / YYYY 07 / 23 / 2010
	Mailing Address 6775 Manchester Beach Rd	Transaction ID: SA11AI.7173
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 97.14
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 728.55	

B.	Full Name (Last, First, Middle Initial) Mr. Eric D. Root	Date of Receipt MM / DD / YYYY 08 / 23 / 2010
	Mailing Address 6775 Manchester Beach Rd	Transaction ID: SA11AI.7247
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 97.14
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.69	

C.	Full Name (Last, First, Middle Initial) Mr. Eric D. Root	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 6775 Manchester Beach Rd	Transaction ID: SA11AI.7342
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 145.71
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Branch Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 971.40	

SUBTOTAL of Receipts This Page (optional)	▶	339.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Sheryl A. Rucker

Mailing Address 3500 Dunn Valley Rd.

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 23 / 2010

Transaction ID: SA11AI.7175

Amount of Each Receipt this Period 50.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Sheryl A. Rucker

Mailing Address 3500 Dunn Valley Rd.

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 23 / 2010

Transaction ID: SA11AI.7249

Amount of Each Receipt this Period 50.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Sheryl A. Rucker

Mailing Address 3500 Dunn Valley Rd.

City Erie State PA Zip Code 16509

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2010

Transaction ID: SA11AI.7344

Amount of Each Receipt this Period 75.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 175.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 39
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Karen A. Skarupski

Mailing Address 3014 Morning Sun Court

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Senior Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2010

Transaction ID: SA11AI.7177

Amount of Each Receipt this Period
60.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Karen A. Skarupski

Mailing Address 3014 Morning Sun Court

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Senior Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
08 / 23 / 2010

Transaction ID: SA11AI.7251

Amount of Each Receipt this Period
60.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Karen A. Skarupski

Mailing Address 3014 Morning Sun Court

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Senior Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11AI.7346

Amount of Each Receipt this Period
90.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **210.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A. Full Name (Last, First, Middle Initial)
Gary Veshecco
 Mailing Address 845 Townhall Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 07 / 23 / 2010
Transaction ID: SA11AI.7185
 Amount of Each Receipt this Period 200.00
 PAC Contribution
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation Division Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

B. Full Name (Last, First, Middle Initial)
Gary Veshecco
 Mailing Address 845 Townhall Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 08 / 23 / 2010
Transaction ID: SA11AI.7259
 Amount of Each Receipt this Period 200.00
 PAC Contribution
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation Division Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

C. Full Name (Last, First, Middle Initial)
Gary Veshecco
 Mailing Address 845 Townhall Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 09 / 28 / 2010
Transaction ID: SA11AI.7354
 Amount of Each Receipt this Period 300.00
 PAC Contribution
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation Division Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

SUBTOTAL of Receipts This Page (optional) ▶ 700.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Elizabeth A. Vorsheck

Mailing Address 9293 Winfield Court

City State Zip Code
Weeki Wachee FL 34613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Board of Directors

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.7269

Amount of Each Receipt this Period

5000.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Jack W. Wood

Mailing Address 4167 Mountain Laurel Dr.

City State Zip Code
Erie PA 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.7188

Amount of Each Receipt this Period

40.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Jack W. Wood

Mailing Address 4167 Mountain Laurel Dr.

City State Zip Code
Erie PA 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 3 / 2 0 1 0

Transaction ID: SA11AI.7262

Amount of Each Receipt this Period

40.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional)

5080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)

Jack W. Wood

Mailing Address 4167 Mountain Laurel Dr.

City State Zip Code
Erie PA 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7292

Amount of Each Receipt this Period

20.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)

Jack W. Wood

Mailing Address 4167 Mountain Laurel Dr.

City State Zip Code
Erie PA 16510

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Department Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7357

Amount of Each Receipt this Period

40.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)

Christy Yousefnejad

Mailing Address 1022 W Sterlington Place

City State Zip Code
Apex NC 27502

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Claims Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Transaction ID: SA11AI.7359

Amount of Each Receipt this Period

60.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 39
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Michael S Zavasky

Mailing Address 4156 Vassar Drive

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Executive VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1078.00

Date of Receipt: 07 / 23 / 2010
Transaction ID: SA11AI.7191
 Amount of Each Receipt this Period: 308.00
 PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Michael S Zavasky

Mailing Address 4156 Vassar Drive

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Executive VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1386.00

Date of Receipt: 08 / 23 / 2010
Transaction ID: SA11AI.7265
 Amount of Each Receipt this Period: 308.00
 PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Michael S Zavasky

Mailing Address 4156 Vassar Drive

City Erie State PA Zip Code 16506

FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group Occupation Executive VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1848.00

Date of Receipt: 09 / 28 / 2010
Transaction ID: SA11AI.7360
 Amount of Each Receipt this Period: 462.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 1078.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
Christopher J. Zimmer

Mailing Address 9262 Hamot Road

City State Zip Code
Waterford PA 16441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Director - Claims Field Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.12

Date of Receipt

M M / D D / Y Y Y Y
07 / 23 / 2010

Transaction ID: SA11AI.7193

Amount of Each Receipt this Period

83.36

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Christopher J. Zimmer

Mailing Address 9262 Hamot Road

City State Zip Code
Waterford PA 16441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Director - Claims Field Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 458.48

Date of Receipt

M M / D D / Y Y Y Y
08 / 23 / 2010

Transaction ID: SA11AI.7267

Amount of Each Receipt this Period

83.36

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Christopher J. Zimmer

Mailing Address 9262 Hamot Road

City State Zip Code
Waterford PA 16441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Erie Insurance Group Director - Claims Field Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 583.52

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11AI.7362

Amount of Each Receipt this Period

125.04

PAC Contribution

SUBTOTAL of Receipts This Page (optional)

291.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 39	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Kathy L. Zonna		Date of Receipt	
	Mailing Address 5135 Roslindale Ave.		M M / D D / Y Y Y Y 09 / 28 / 2010	
	City	State	Zip Code	Transaction ID: SA11AI.7363
	Erie	PA	16509	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		31.98	
Name of Employer Erie Insurance Group		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.15		
				PAC Contribution

SUBTOTAL of Receipts This Page (optional)	▶	31.98
TOTAL This Period (last page this line number only)	▶	13396.27

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 39
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Committee to Re-Elect Assemblyman Joe Morelle		Date of Receipt MM / DD / YYYY 08 / 11 / 2010
	Mailing Address 130 Washington Avenue		Transaction ID: SA16.7195
	City Albany	State NY	Zip Code 12210
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer	Occupation	Originally issued 5/25/10. Reported in Thirty Day Post Primary Report.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) Friends of Senator Breslin		Date of Receipt MM / DD / YYYY 08 / 11 / 2010
	Mailing Address 130 Washington Avenue		Transaction ID: SA16.7196
	City Albany	State NY	Zip Code 12210
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer	Occupation	Originally issued 5/25/10. Reported in Thirty Day Post Primary Report.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Manchin for West Virginia</p> <p>Mailing Address PO Box 5202</p> <p>City Charleston State WV Zip Code 25361</p> <p>Purpose of Disbursement PAC Expenditure</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7281</p> <p>Date of Disbursement 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mike Kelly for Congress</p> <p>Mailing Address PO BOX 476</p> <p>City LYNDORA State PA Zip Code 16045</p> <p>Purpose of Disbursement PAC Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7287</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PIAPAC</p> <p>Mailing Address 400 N Washington Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement PAC Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.7289</p> <p>Date of Disbursement 09 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5300.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.

Full Name (Last, First, Middle Initial)
TOOMEY FOR SENATE COMMITTEE

Transaction ID: SB23.7274

Date of Disbursement

Mailing Address 3440 Hamilton Blvd.

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

City Allentown State PA Zip Code 18103

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement
PAC Expenditure

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 00

SUBTOTAL of Disbursements This Page (optional) ►

2400.00

TOTAL This Period (last page this line number only) ►

7700.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC - Federal

A.	Full Name (Last, First, Middle Initial) Bill Ketron for State Senate 2010 <hr/> Mailing Address 805 Church Street #12 <hr/> City Murfreesboro State TN Zip Code 37130 <hr/> Purpose of Disbursement PAC Expenditure Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7282 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Citizens for Brian Feldman <hr/> Mailing Address P.O. Box 34408 <hr/> City Bethesda State MD Zip Code 20827 <hr/> Purpose of Disbursement PAC Expenditure Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7286 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) Friends of Mary Ann Love <hr/> Mailing Address 17 W Cortland Street, Ste 210 <hr/> City Bel Air State MD Zip Code 21014 <hr/> Purpose of Disbursement PAC Expenditure Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7284 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	1750.00