

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 (12G)
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 01 01 2011 through 06 30 2011

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 07 11 2011

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 **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: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2011"/>		82172.19
(b) Cash on Hand at Beginning of Reporting Period	82172.19	
(c) Total Receipts (from Line 19)	45905.52	45905.52
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	128077.71	128077.71
7. Total Disbursements (from Line 31)	8900.00	8900.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	119177.71	119177.71
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Erie Indemnity Company PAC - Federal

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	33265.41	33265.41
(ii) Unitemized	11236.21	11236.21
(iii) TOTAL (add Lines 11(a)(i) and (ii)	44501.62	44501.62
(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)	44501.62	44501.62
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	1403.90	1403.90
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))	45905.52	45905.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45905.52	45905.52

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.....	7000.00	7000.00
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.....	1900.00	1900.00
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))..	8900.00	8900.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8900.00	8900.00

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	44501.62	44501.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44501.62	44501.62
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 / 47
(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 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2011

Transaction ID: SA11AI.7763

Amount of Each Receipt this Period
120.00

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 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2011

Transaction ID: SA11AI.7866

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 Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.7977

Amount of Each Receipt this Period
80.00

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: (check only one)	PAGE 7 / 47
	<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 K. Banks		Date of Receipt
	Mailing Address 5123 Flintlock Ln.		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Roanoke	VA	24018
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8081
Name of Employer Erie Insurance Group		Occupation Vice President	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="520.00"/>	<input type="text" value="80.00"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Richard Bengel		Date of Receipt
	Mailing Address 359 E 41st Street		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16504
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7744
Name of Employer Erie Insurance Group		Occupation Department 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="250.00"/>	<input type="text" value="250.00"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) J. Ralph Jr. Borneman		Date of Receipt
	Mailing Address PO Box 552		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Boyertown	PA	19512
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7861
Name of Employer Erie Insurance Group		Occupation Board of Directors	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="250.00"/>	<input type="text" value="250.00"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="580.00"/>
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: (check only one)	PAGE 8 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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. Bova		Date of Receipt
	Mailing Address 5913 Beacon Hill Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 3 1 / 2 0 1 1
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7982
Name of Employer Erie Insurance Group		Occupation Vice President	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 ▼ 215.00	<input type="text"/> 50.00
PAC Contribution			

B.	Full Name (Last, First, Middle Initial) Michael A. Bova		Date of Receipt
	Mailing Address 5913 Beacon Hill Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Erie	PA	16509
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8085
Name of Employer Erie Insurance Group		Occupation Vice President	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 ▼ 265.00	<input type="text"/> 50.00
PAC Contribution			

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey W. Brinling		Date of Receipt
	Mailing Address 5603 Stoneridge Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 2 9 / 2 0 1 1
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7767
Name of Employer Erie Insurance Group		Occupation Senior VP	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 ▼ 280.00	<input type="text"/> 120.00
PAC Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 220.00
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: (check only one)	PAGE 9 / 47
	<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. Jeffrey W. Brinling	Date of Receipt MM / DD / YYYY 04 / 26 / 2011
	Mailing Address 5603 Stoneridge Drive	Transaction ID: SA11AI.7871
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 98.00
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Senior VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey W. Brinling	Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 5603 Stoneridge Drive	Transaction ID: SA11AI.7983
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 98.00
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Senior VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey W. Brinling	Date of Receipt MM / DD / YYYY 06 / 28 / 2011
	Mailing Address 5603 Stoneridge Drive	Transaction ID: SA11AI.8086
	City State Zip Code Fairview PA 16415	Amount of Each Receipt this Period 98.00
	FEC ID number of contributing federal political committee. C	PAC Contribution
	Name of Employer Occupation Erie Insurance Group Senior VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 574.00	

SUBTOTAL of Receipts This Page (optional)	▶	294.00
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 10 / 47
(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 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 ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.7872

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 ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.7984

Amount of Each Receipt this Period 50.00

PAC Contribution

C.

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 ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.8087

Amount of Each Receipt this Period 50.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 11 / 47
	(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) Terrence W Cavanaugh		Date of Receipt
	Mailing Address 6300 Lake Shore Drive		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7746
Name of Employer Erie Insurance Group		Occupation President & CEO	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="5000.00"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Marc Cipriani		Date of Receipt
	Mailing Address 5235 Abington Way		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7755
Name of Employer Erie Insurance Group		Occupation Chief Underwriting 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"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Louis F. Colaizzo		Date of Receipt
	Mailing Address 6297 Stonebridge Drive		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7741
Name of Employer Erie Insurance Group		Occupation Senior VP	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="2000.00"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="8000.00"/>
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 12 / 47
(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)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.70

Date of Receipt 01 / 26 / 2011
Transaction ID: SA11AI.7609
 Amount of Each Receipt this Period 307.70
 PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 615.40

Date of Receipt 02 / 28 / 2011
Transaction ID: SA11AI.7682
 Amount of Each Receipt this Period 307.70
 PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1076.95

Date of Receipt 03 / 29 / 2011
Transaction ID: SA11AI.7777
 Amount of Each Receipt this Period 461.55
 PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 1076.95

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 13 / 47
(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)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1384.65

Date of Receipt 04 / 26 / 2011

Transaction ID: SA11AI.7876

Amount of Each Receipt this Period 307.70

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1692.35

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.7988

Amount of Each Receipt this Period 307.70

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Marcia A. Dall

Mailing Address 4891 Equestrian 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 & CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.05

Date of Receipt 06 / 28 / 2011

Transaction ID: SA11AI.8091

Amount of Each Receipt this Period 307.70

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 923.10

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 / 47
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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 Dombrowski

Mailing Address 4361 Cooper Road

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Department Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 04 / 26 / 2011
Transaction ID: SA11AI.7878
 Amount of Each Receipt this Period: 50.00
 PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Mark Dombrowski

Mailing Address 4361 Cooper Road

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Department Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 05 / 31 / 2011
Transaction ID: SA11AI.7990
 Amount of Each Receipt this Period: 50.00
 PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Mark Dombrowski

Mailing Address 4361 Cooper Road

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Department Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 06 / 28 / 2011
Transaction ID: SA11AI.8093
 Amount of Each Receipt this Period: 50.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 15 / 47
	<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		Date of Receipt
	Mailing Address 4896 Thoroughbred Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7780
Name of Employer Erie Insurance Group		Occupation Executive Vice President	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"/> 157.00
		<input type="text"/> 317.00	PAC Contribution

B.	Full Name (Last, First, Middle Initial) George Dufala		Date of Receipt
	Mailing Address 4896 Thoroughbred Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7879
Name of Employer Erie Insurance Group		Occupation Executive Vice President	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"/> 154.00
		<input type="text"/> 471.00	PAC Contribution

C.	Full Name (Last, First, Middle Initial) George Dufala		Date of Receipt
	Mailing Address 4896 Thoroughbred Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7991
Name of Employer Erie Insurance Group		Occupation Executive Vice President	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"/> 154.00
		<input type="text"/> 625.00	PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 465.00
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: (check only one)	PAGE 16 / 47
	<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		Date of Receipt
	Mailing Address 4896 Thoroughbred Loop		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8094
Name of Employer Erie Insurance Group		Occupation Executive Vice President	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 ▼ 779.00	<input type="text"/> 154.00
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Lorianne Feltz-Upperman		Date of Receipt
	Mailing Address 6418 Field Valley Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7782
Name of Employer Erie Insurance Group		Occupation Sr VP & 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 ▼ 280.00	<input type="text"/> 120.00
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Lorianne Feltz-Upperman		Date of Receipt
	Mailing Address 6418 Field Valley Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7883
Name of Employer Erie Insurance Group		Occupation Sr VP & 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 ▼ 360.00	<input type="text"/> 80.00
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 354.00
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 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 440.00
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1
Transaction ID: SA11AI.7996
Amount of Each Receipt this Period
80.00
PAC Contribution

B. 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 520.00
Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1
Transaction ID: SA11AI.8098
Amount of Each Receipt this Period
80.00
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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 211.75
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1
Transaction ID: SA11AI.7997
Amount of Each Receipt this Period
38.50
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 198.50
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 / 47
(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 ▼ 250.25

Date of Receipt 06 / 28 / 2011

Transaction ID: SA11AI.8099

Amount of Each Receipt this Period 38.50

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
David R. Glod

Mailing Address 4902 Reese Road

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Fixed Income Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 04 / 26 / 2011

Transaction ID: SA11AI.7892

Amount of Each Receipt this Period 50.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
David R. Glod

Mailing Address 4902 Reese Road

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Fixed Income Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.8004

Amount of Each Receipt this Period 50.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 138.50

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 19 / 47
	<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="06"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8106
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="325.00"/>	<input type="text" value="50.00"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Gregory J. Gutting		Date of Receipt
	Mailing Address 529 Sybil Dr.		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7695
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="323.36"/>	<input type="text" value="161.68"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Gregory J. Gutting		Date of Receipt
	Mailing Address 529 Sybil Dr.		<input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16505
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7790
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="577.20"/>	<input type="text" value="253.84"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="465.52"/>
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 20 / 47
(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)
Gregory J. Gutting

Mailing Address 529 Sybil Dr.

City Erie State PA Zip Code 16505

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 ▼ 750.20

Date of Receipt 04 / 26 / 2011

Transaction ID: SA11AI.7893

Amount of Each Receipt this Period 173.00

PAC Contribution

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

Mailing Address 529 Sybil Dr.

City Erie State PA Zip Code 16505

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 ▼ 923.20

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.8005

Amount of Each Receipt this Period 173.00

PAC Contribution

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

Mailing Address 529 Sybil Dr.

City Erie State PA Zip Code 16505

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 ▼ 1096.20

Date of Receipt 06 / 28 / 2011

Transaction ID: SA11AI.8107

Amount of Each Receipt this Period 173.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 519.00

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 21 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Susan H. Hagen

Mailing Address 100 State St.
Suite 440

City Erie State PA Zip Code 16507

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

Name of Employer Erie Insurance Group Occupation Board of Directors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 19 / 2011
Transaction ID: SA11AI.7968
Amount of Each Receipt this Period 1500.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Thomas B. Hagen

Mailing Address 100 State St.
Suite 440

City Erie State PA Zip Code 16507

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

Name of Employer Erie Insurance Group Occupation Chairman of the Board

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 19 / 2011
Transaction ID: SA11AI.7967
Amount of Each Receipt this Period 1500.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
Melvin L. Hirst

Mailing Address 6009 Cobblestone Dr.

City Erie State PA Zip Code 16509

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

Name of Employer Erie Insurance Group Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 06 / 28 / 2011
Transaction ID: SA11AI.8116
Amount of Each Receipt this Period 80.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 3080.00

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 22 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
James Horvat
Mailing Address 5403 Heidt Avenue
City Erie State PA Zip Code 16509
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Department Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2011
Transaction ID: SA11AI.7750
Amount of Each Receipt this Period 250.00
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 Executive Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 308.00
Date of Receipt 02 / 28 / 2011
Transaction ID: SA11AI.7702
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 Executive Vice President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 539.00
Date of Receipt 03 / 29 / 2011
Transaction ID: SA11AI.7797
Amount of Each Receipt this Period 231.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 635.00
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 23 / 47
(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)
John F. Kearns

Mailing Address 5804 Wind Chime Ln.

City State Zip Code
Fairview PA 16415

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

Name of Employer Occupation
Erie Insurance Group Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 693.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2011

Transaction ID: SA11AI.7909

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 State Zip Code
Fairview PA 16415

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

Name of Employer Occupation
Erie Insurance Group Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.8020

Amount of Each Receipt this Period
308.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
John F. Kearns

Mailing Address 5804 Wind Chime Ln.

City State Zip Code
Fairview PA 16415

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

Name of Employer Occupation
Erie Insurance Group Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1309.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2011

Transaction ID: SA11AI.8121

Amount of Each Receipt this Period
308.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **770.00**

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 24 / 47
	(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) Barbara R. Lincoln		Date of Receipt
	Mailing Address 6692 Crane Rd.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 28 / 2011
	City	State	Zip Code
	Edinboro	PA	16412
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8124
Name of Employer PAC Contribution		Occupation Director, Sales Planning	Amount of Each Receipt this Period <input type="text"/> 60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 210.00	PAC Contribution

B.	Full Name (Last, First, Middle Initial) Christina M. Marsh		Date of Receipt
	Mailing Address 2805 Ash St., Apt. 2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 29 / 2011
	City	State	Zip Code
	Erie	PA	16504
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7803
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period <input type="text"/> 131.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.61	PAC Contribution

C.	Full Name (Last, First, Middle Initial) Christina M. Marsh		Date of Receipt
	Mailing Address 2805 Ash St., Apt. 2		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 26 / 2011
	City	State	Zip Code
	Erie	PA	16504
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7920
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period <input type="text"/> 89.46
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 390.07	PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 281.15
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 25 / 47
(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)
Christina M. Marsh

Mailing Address 2805 Ash St., Apt. 2

City State Zip Code
Erie PA 16504

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 ▼ 479.49

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.8029

Amount of Each Receipt this Period
89.42

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Christina M. Marsh

Mailing Address 2805 Ash St., Apt. 2

City State Zip Code
Erie PA 16504

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 ▼ 568.95

Date of Receipt
MM / DD / YYYY
06 / 28 / 2011

Transaction ID: SA11AI.8130

Amount of Each Receipt this Period
89.46

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 ▼ 211.75

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.8030

Amount of Each Receipt this Period
38.50

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **217.38**

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 26 / 47
	<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) Patrick J. McMichael		Date of Receipt
	Mailing Address 601 Valley Hill Ln.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 28 / 2011
	City	State	Zip Code
	Knoxville	TN	37922
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8131
Name of Employer Erie Insurance Group		Occupation Branch 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 ▼ 250.25	<input type="text"/> 38.50
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Robert W. McNutt		Date of Receipt
	Mailing Address 5452 Mystic Rdg		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 28 / 2011
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8132
Name of Employer Erie Insurance Group		Occupation Vice President	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 ▼ 280.00	<input type="text"/> 80.00
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Donald McRae		Date of Receipt
	Mailing Address 4109 Ridgewood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 21 / 2011
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7743
Name of Employer Erie Insurance Group		Occupation 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 ▼ 250.00	<input type="text"/> 250.00
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 368.50
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 27 / 47

(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 State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.41

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.7924

Amount of Each Receipt this Period 46.48

PAC Contribution

B.

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

Mailing Address 4852 Appaloosa Ct.

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 253.89

Date of Receipt M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.8033

Amount of Each Receipt this Period 46.48

PAC Contribution

C.

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

Mailing Address 4852 Appaloosa Ct.

City State Zip Code
Erie PA 16506

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Erie Insurance Group Strategic Risk Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.37

Date of Receipt M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.8134

Amount of Each Receipt this Period 46.48

PAC Contribution

SUBTOTAL of Receipts This Page (optional) 139.44

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 / 47
(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)
Eric A. Miller

Mailing Address 405 Shenley Dr

City State Zip Code
Erie PA 16505

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2011

Transaction ID: SA11AI.7753

Amount of Each Receipt this Period
250.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Lucian Morrison

Mailing Address 2001 Kirby Drive Ste 1300

City State Zip Code
Houston TX 77019

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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 19 / 2011

Transaction ID: SA11AI.7969

Amount of Each Receipt this Period
500.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Matthew W. Myers

Mailing Address 6515 Honey Ln.

City State Zip Code
Erie PA 16509

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 ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2011

Transaction ID: SA11AI.7814

Amount of Each Receipt this Period
150.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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 / 47
(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)
Matthew W. Myers

Mailing Address 6515 Honey Ln.

City Erie State PA Zip Code 16509

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 ▼ 450.00

Date of Receipt 04 / 26 / 2011

Transaction ID: SA11AI.7928

Amount of Each Receipt this Period 100.00

PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Matthew W. Myers

Mailing Address 6515 Honey Ln.

City Erie State PA Zip Code 16509

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 ▼ 550.00

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.8037

Amount of Each Receipt this Period 100.00

PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Matthew W. Myers

Mailing Address 6515 Honey Ln.

City Erie State PA Zip Code 16509

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 ▼ 650.00

Date of Receipt 06 / 28 / 2011

Transaction ID: SA11AI.8138

Amount of Each Receipt this Period 100.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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 / 47
(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 Regional Officer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 275.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 3 / 2 0 1 1
Transaction ID: SA11AI.7757
 Amount of Each Receipt this Period
 100.00
 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 Regional Officer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 325.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 6 / 2 0 1 1
Transaction ID: SA11AI.7929
 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 Regional Officer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 3 1 / 2 0 1 1
Transaction ID: SA11AI.8038
 Amount of Each Receipt this Period
 50.00
 PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 200.00
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 / 47
(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 Regional Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2011

Transaction ID: SA11AI.8139

Amount of Each Receipt this Period
50.00

PAC Contribution

B. Full Name (Last, First, Middle Initial)
Gabriel Oros

Mailing Address 5669 Winthrop Drive

City State Zip Code
Erie PA 16506

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

Name of Employer Occupation
Erie Insurance Group Associate General Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2011

Transaction ID: SA11AI.7754

Amount of Each Receipt this Period
500.00

PAC Contribution

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

Mailing Address 5811 Southland Drive

City State Zip Code
Erie PA 16509

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

Name of Employer Occupation
Erie Insurance Group Associate General Counsel

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

Date of Receipt
M M / D D / Y Y Y Y
05 / 31 / 2011

Transaction ID: SA11AI.8040

Amount of Each Receipt this Period
40.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 590.00

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 / 47
(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)
Sue Pfadt

Mailing Address 5811 Southland Drive

City State Zip Code
Erie PA 16509

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

Name of Employer Occupation
Erie Insurance Group Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.8141

Amount of Each Receipt this Period
40.00

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 Division Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 241.78

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.7932

Amount of Each Receipt this Period
104.00

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 Division Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.78

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA11AI.8041

Amount of Each Receipt this Period
104.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **248.00**

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 / 47
(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. 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 Division Officer
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 449.78
Date of Receipt
M M / D D / Y Y Y Y
06 / 28 / 2011
Transaction ID: SA11AI.8142
Amount of Each Receipt this Period
104.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Marylta Power
Mailing Address 4962 Sir Hue
City State Zip Code
Erie PA 16506
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Department Manager
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 21 / 2011
Transaction ID: SA11AI.7745
Amount of Each Receipt this Period
750.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Eric D. Root
Mailing Address 6775 Manchester Beach Rd
City State Zip Code
Fairview PA 16415
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Division Officer
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 342.43
Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2011
Transaction ID: SA11AI.7830
Amount of Each Receipt this Period
148.15
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 1002.15
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 34 / 47
	<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. Eric D. Root		Date of Receipt
	Mailing Address 6775 Manchester Beach Rd		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7934
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="442.01"/>	<input type="text" value="99.58"/>
			PAC Contribution

B.	Full Name (Last, First, Middle Initial) Mr. Eric D. Root		Date of Receipt
	Mailing Address 6775 Manchester Beach Rd		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8043
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="541.59"/>	<input type="text" value="99.58"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Mr. Eric D. Root		Date of Receipt
	Mailing Address 6775 Manchester Beach Rd		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Fairview	PA	16415
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8144
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="641.17"/>	<input type="text" value="99.58"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="298.74"/>
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 35 / 47
(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 ▼ 305.00

Date of Receipt 04 / 26 / 2011

Transaction ID: SA11AI.7936

Amount of Each Receipt this Period 130.00

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 ▼ 435.00

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.8045

Amount of Each Receipt this Period 130.00

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 ▼ 565.00

Date of Receipt 06 / 28 / 2011

Transaction ID: SA11AI.8146

Amount of Each Receipt this Period 130.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 390.00

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 36 / 47
(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 ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 29 / 2011

Transaction ID: SA11AI.7838

Amount of Each Receipt this Period
90.00

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 ▼ 270.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2011

Transaction ID: SA11AI.7942

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 ▼ 330.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2011

Transaction ID: SA11AI.8050

Amount of Each Receipt this Period
60.00

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 37 / 47
(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 Erie State PA Zip Code 16506

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

Name of Employer: Erie Insurance Group Occupation: Senior Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 06 / 28 / 2011
Transaction ID: SA11AI.8151
Amount of Each Receipt this Period: 60.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Richard L. Stover

Mailing Address 1203 Deering Bay Court

City Gibsonia State PA Zip Code 15044

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

Name of Employer: Erie Insurance Group Occupation: Board of Directors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 04 / 2011
Transaction ID: SA11AI.7860
Amount of Each Receipt this Period: 250.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
James J Tanous

Mailing Address 41 Niagara Pier

City Erie State PA Zip Code 16507

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

Name of Employer: Erie Insurance Group Occupation: Executive VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 03 / 23 / 2011
Transaction ID: SA11AI.7859
Amount of Each Receipt this Period: 4000.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶ **4310.00**

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 38 / 47
	<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) Joseph M. Vahey		Date of Receipt
	Mailing Address 7065 Sandy Trl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 31 / 2011
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8059
Name of Employer Erie Insurance Group		Occupation Vice President	Amount of Each Receipt this Period 120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	PAC Contribution

B.	Full Name (Last, First, Middle Initial) Joseph M. Vahey		Date of Receipt
	Mailing Address 7065 Sandy Trl		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 28 / 2011
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8159
Name of Employer Erie Insurance Group		Occupation Vice President	Amount of Each Receipt this Period 120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	PAC Contribution

C.	Full Name (Last, First, Middle Initial) Gary Veshecco		Date of Receipt
	Mailing Address 845 Townhall Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 28 / 2011
	City	State	Zip Code
	Waterford	PA	16441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7731
Name of Employer Erie Insurance Group		Occupation Division Officer	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	PAC Contribution

SUBTOTAL of Receipts This Page (optional)	440.00
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 39 / 47
(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

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 ▼ 700.00

Date of Receipt 03 / 29 / 2011
Transaction ID: SA11AI.7845
Amount of Each Receipt this Period 300.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Gary Veshecco

Mailing Address 845 Townhall Road

City Waterford State PA Zip Code 16441

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 ▼ 900.00

Date of Receipt 04 / 26 / 2011
Transaction ID: SA11AI.7951
Amount of Each Receipt this Period 200.00
PAC Contribution

C. Full Name (Last, First, Middle Initial)
Gary Veshecco

Mailing Address 845 Townhall Road

City Waterford State PA Zip Code 16441

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 ▼ 1100.00

Date of Receipt 05 / 31 / 2011
Transaction ID: SA11AI.8060
Amount of Each Receipt this Period 200.00
PAC Contribution

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 40 / 47
(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

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 ▼ 1300.00

Date of Receipt 06 / 28 / 2011
Transaction ID: SA11AI.8160
Amount of Each Receipt this Period 200.00
PAC Contribution

B. Full Name (Last, First, Middle Initial)
Robert Wilburn

Mailing Address 11921 Triple Crown Rd

City Reston State VA Zip Code 20191

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

Name of Employer Erie Insurance Group Occupation Board of Directors

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 23 / 2011
Transaction ID: SA11AI.7970
Amount of Each Receipt this Period 1000.00
PAC Contribution

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

Mailing Address 4167 Mountain Laurel Dr.

City Erie State PA Zip Code 16510

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

Name of Employer Erie Insurance Group Occupation Department Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2011
Transaction ID: SA11AI.7973
Amount of Each Receipt this Period 40.00
PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 1240.00

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 41 / 47
	<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		Date of Receipt
	Mailing Address 4167 Mountain Laurel Dr.		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16510
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8173
Name of Employer Erie Insurance Group		Occupation Department 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="260.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Ann H. Zaprazny		Date of Receipt
	Mailing Address 93 Jacobs Creek Dr.		<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Hershey	PA	17033
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8076
Name of Employer Erie Insurance Group		Occupation Senior Vice President	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="700.00"/>	<input type="text" value="700.00"/>
			PAC Contribution

C.	Full Name (Last, First, Middle Initial) Michael S Zavasky		Date of Receipt
	Mailing Address 4156 Vassar Drive		<input type="text" value="01"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7666
Name of Employer Erie Insurance Group		Occupation Executive VP	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="308.00"/>	<input type="text" value="308.00"/>
			PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1048.00"/>
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 42 / 47
(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 ▼ 616.00

Date of Receipt: 02 / 28 / 2011
Transaction ID: SA11AI.7736
 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 ▼ 1078.00

Date of Receipt: 03 / 29 / 2011
Transaction ID: SA11AI.7852
 Amount of Each Receipt this Period: 462.00
 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 ▼ 1386.00

Date of Receipt: 04 / 26 / 2011
Transaction ID: SA11AI.7958
 Amount of Each Receipt this Period: 308.00
 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: (check only one)	PAGE 43 / 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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		Date of Receipt
	Mailing Address 4156 Vassar Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 3 1 / 2 0 1 1
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8068
Name of Employer Erie Insurance Group		Occupation Executive VP	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"/> 308.00
		<input type="text"/> 1694.00	PAC Contribution

B.	Full Name (Last, First, Middle Initial) Michael S Zavasky		Date of Receipt
	Mailing Address 4156 Vassar Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	City	State	Zip Code
	Erie	PA	16506
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8167
Name of Employer Erie Insurance Group		Occupation Executive VP	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"/> 308.00
		<input type="text"/> 2002.00	PAC Contribution

C.	Full Name (Last, First, Middle Initial) Christopher J. Zimmer		Date of Receipt
	Mailing Address 9262 Hamot Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 2 9 / 2 0 1 1
	City	State	Zip Code
	Waterford	PA	16441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.7854
Name of Employer Erie Insurance Group		Occupation Director - Claims Field Operations	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"/> 128.38
		<input type="text"/> 295.10	PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 744.38
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 44 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Christopher J. Zimmer
 Mailing Address 9262 Hamot Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 04 / 26 / 2011
Transaction ID: SA11AI.7960
 Amount of Each Receipt this Period 86.70
 PAC Contribution
 Name of Employer Erie Insurance Group Occupation Director - Claims Field Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 381.80

B. Full Name (Last, First, Middle Initial)
Christopher J. Zimmer
 Mailing Address 9262 Hamot Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 05 / 31 / 2011
Transaction ID: SA11AI.8070
 Amount of Each Receipt this Period 86.70
 PAC Contribution
 Name of Employer Erie Insurance Group Occupation Director - Claims Field Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 468.50

C. Full Name (Last, First, Middle Initial)
Christopher J. Zimmer
 Mailing Address 9262 Hamot Road
 City Waterford State PA Zip Code 16441
 Date of Receipt 06 / 28 / 2011
Transaction ID: SA11AI.8169
 Amount of Each Receipt this Period 86.70
 PAC Contribution
 Name of Employer Erie Insurance Group Occupation Director - Claims Field Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 555.20

SUBTOTAL of Receipts This Page (optional) ► 260.10
TOTAL This Period (last page this line number only) ► 33265.41

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

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

FOR LINE NUMBER: PAGE 45 / 47
(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)
Bill Ketron for State Senate 2010
 Mailing Address 805 Church Street #12
 City State Zip Code
 Murfreesboro TN 37130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 3 / 2 0 1 1
Transaction ID: SA16.8072
 Amount of Each Receipt this Period
 1000.00
 PAC Reimbursement for Check #1421

B.

Full Name (Last, First, Middle Initial)
Committee to Elect Earl Ray Tomblin
 Mailing Address PO Box 11530
 City State Zip Code
 Charleston WV 25339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 403.90

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 1 / 2 0 1 1
Transaction ID: SA16.7749
 Amount of Each Receipt this Period
 403.90
 PAC Refund

SUBTOTAL of Receipts This Page (optional)	▶	1403.90
TOTAL This Period (last page this line number only)	▶	1403.90

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 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) Committee to Elect Earl Ray Tomblin Mailing Address PO Box 11530 City Charleston State WV Zip Code 25339 Purpose of Disbursement PAC Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8073 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 1 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) PCI PAC Mailing Address 2600 South River Road City Des Plaines State IL Zip Code 60018-3286 Purpose of Disbursement PAC Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7772 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1 Amount of Each Disbursement this Period 5000.00
C.	Full Name (Last, First, Middle Initial) TOOMEY FOR SENATE COMMITTEE Mailing Address 3440 Hamilton Blvd. City Allentown State PA Zip Code 18103 Purpose of Disbursement PAC Expenditure Candidate Name Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.7672 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	7000.00

**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 47 / 47

<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)
Batchelder for Representative Committee

Mailing Address 4086 Irvine Oval

City Medina State OH Zip Code 44256

Purpose of Disbursement
PAC Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7773
Date of Disbursement

04 / 11 / 2011

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Committee to Elect Earl Ray Tomblin

Mailing Address PO Box 11530

City Charleston State WV Zip Code 25339

Purpose of Disbursement
PAC Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.7776
Date of Disbursement

04 / 05 / 2011

Amount of Each Disbursement this Period

900.00

SUBTOTAL of Disbursements This Page (optional)

1900.00

TOTAL This Period (last page this line number only)

1900.00