

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="149874.48"/>	<input type="text" value="149874.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="164192.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="24369.59"/>	<input type="text" value="49837.77"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="188562.25"/>	<input type="text" value="199712.25"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="39000.00"/>	<input type="text" value="50150.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="149562.25"/>	<input type="text" value="149562.25"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

Report Covering the Period: From: / / To: / /

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).....	20541.59	39382.95
(ii) Unitemized	3828.00	10454.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	24369.59	49837.77
(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)	24369.59	49837.77
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.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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))..... ▶	24369.59	49837.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24369.59	49837.77

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	22000.00	29000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	17000.00	21150.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	39000.00	50150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39000.00	50150.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	24369.59	49837.77
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24369.59	49837.77
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 OF 41
(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

Full Name (Last, First, Middle Initial)
A. James Horvat Jr.

Mailing Address 5403 HEIDT AVE

City State Zip Code
 ERIE PA 16509-3032

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

Name of Employer Occupation
 Erie Insurance Group VP, Field Claims Srvc & Sprt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : 6016485

Amount of Each Receipt this Period
 250.00

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

Mailing Address 1203 Deering Bay Court

City State Zip Code
 Gibsonia PA 15044

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

Name of Employer Occupation
 Erie Insurance Group Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2014

Transaction ID : 6016486

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
C. Ralph Borneman

Mailing Address PO Box 552

City State Zip Code
 Boyertown PA 19512

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

Name of Employer Occupation
 Erie Insurance Group Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : 6044591

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 41
(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

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

Mailing Address 110 Washington Ave
 Apt 1711

City State Zip Code
 Miami Beach FL 33139

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

Name of Employer Occupation
 Erie Insurance Group Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2014

Transaction ID : 6044592

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
B. Nancy M Sennett

Mailing Address 4037 WESTBURY RDG

City State Zip Code
 ERIE PA 16506-4621

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

Name of Employer Occupation
 Erie Insurance Group Counsel III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2014

Transaction ID : 6048334

Amount of Each Receipt this Period
 250.00

Full Name (Last, First, Middle Initial)
c. Claude Lilly

Mailing Address PO Box 311

City State Zip Code
 Clemson SC 29633

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : 6052929

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 8 OF 41
	<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. Marc Cipriani
Full Name (Last, First, Middle Initial)

Mailing Address 5235 ABINGTON WAY

City State Zip Code
ERIE PA 16506-4647

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

Name of Employer Occupation
Erie Insurance Group SVP, Commercial Lines

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2014

Transaction ID : 6101326

Amount of Each Receipt this Period
2000.00

B. Brian W. Bolash
Full Name (Last, First, Middle Initial)

Mailing Address 6215 BRANDY RUN

City State Zip Code
FAIRVIEW PA 16415-3307

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

Name of Employer Occupation
Erie Insurance Group Asst Secy & Sr Counsel-Corp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.40

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR39009289469

Amount of Each Receipt this Period
118.86

P/R Deduction (\$39.62 Monthly)

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

Mailing Address 141 E 37TH ST

City State Zip Code
ERIE PA 16504-1521

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

Name of Employer Occupation
Erie Insurance Group VP, Strategic Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR39010249469

Amount of Each Receipt this Period
180.00

P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	2298.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
<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. James P. Stoik
Full Name (Last, First, Middle Initial)
Mailing Address 7 NIAGARA PIER
City ERIE State PA Zip Code 16507-2305
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Internal Audit
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 523.76

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39010429469
Amount of Each Receipt this Period 264.00
P/R Deduction (\$88.00 Monthly)

B. Sean D. Dugan
Full Name (Last, First, Middle Initial)
Mailing Address 4204 TRASK AVE
City ERIE State PA Zip Code 16508-3142
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Recruiting & Comm Outreach
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39010949469
Amount of Each Receipt this Period 108.00
P/R Deduction (\$36.00 Monthly)

C. Andrew G. Putnam
Full Name (Last, First, Middle Initial)
Mailing Address 1722 GRIST MILL DR
City NORTH EAST State PA Zip Code 16428-2940
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SM-Technology Deployment
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.12

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39018119469
Amount of Each Receipt this Period 166.14
P/R Deduction (\$55.38 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 538.14
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<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

Full Name (Last, First, Middle Initial)
A. Robert W McNutt

Mailing Address 5452 MYSTIC RDG

City	State	Zip Code
ERIE	PA	16506-7036

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

Name of Employer	Occupation
Erie Insurance Group	VP & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39018209469

Amount of Each Receipt this Period

360.00

P/R Deduction (\$120.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Joseph M. Vahey

Mailing Address 7065 SANDY TRL

City	State	Zip Code
ERIE	PA	16510-5963

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

Name of Employer	Occupation
Erie Insurance Group	VP & Product Manager (Prsl)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39018459469

Amount of Each Receipt this Period

360.00

P/R Deduction (\$120.00 Monthly)

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

Mailing Address 3500 DUNN VALLEY RD

City	State	Zip Code
ERIE	PA	16509-4310

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

Name of Employer	Occupation
Erie Insurance Group	Sr Counsel-Insurance Oprs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **923.72**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39018539469

Amount of Each Receipt this Period

466.38

P/R Deduction (\$155.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1186.38
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 11 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Belinda J Rogers
 Full Name (Last, First, Middle Initial)
 Mailing Address 658 W 6TH ST
 City State Zip Code
 ERIE PA 16507-1173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Counsel I
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39019059469
 Amount of Each Receipt this Period
 128.88
 P/R Deduction (\$42.96 Monthly)

B. Sue A. Pfadt
 Full Name (Last, First, Middle Initial)
 Mailing Address 5811 SOUTHLAND DR
 City State Zip Code
 ERIE PA 16509-7817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Counsel II
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39019129469
 Amount of Each Receipt this Period
 120.00
 P/R Deduction (\$40.00 Monthly)

C. Bridget H. Schoenig
 Full Name (Last, First, Middle Initial)
 Mailing Address 5122 ROBINHOOD LN
 City State Zip Code
 ERIE PA 16509-2561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Sr Counsel-Insurance Oprs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39019139469
 Amount of Each Receipt this Period
 150.00
 P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	398.88
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
<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

Full Name (Last, First, Middle Initial) A. David R Glod		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : PR39020509469
Mailing Address 4902 REESE RD		Amount of Each Receipt this Period 270.00
City ERIE	State PA	Zip Code 16510-4304
FEC ID number of contributing federal political committee. C	Name of Employer Erie Insurance Group	Occupation VP & Sr Portfolio Mgr, Fxd Inc
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	P/R Deduction (\$90.00 Monthly)

Full Name (Last, First, Middle Initial) B. Melvin L. Hirst		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : PR39020759469
Mailing Address 5820 FOREST XING		Amount of Each Receipt this Period 240.00
City ERIE	State PA	Zip Code 16506-7004
FEC ID number of contributing federal political committee. C	Name of Employer Erie Insurance Group	Occupation VP, Sales Promotion & Agcy Rel
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial) C. Deborah S. Masi		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : PR39020809469
Mailing Address 3012 MADEIRA DR		Amount of Each Receipt this Period 160.38
City ERIE	State PA	Zip Code 16506-1732
FEC ID number of contributing federal political committee. C	Name of Employer Erie Insurance Group	Occupation VP & Branch Manager IV
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.16	P/R Deduction (\$53.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	670.38
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 13 OF 41
	<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. Diane M Stamatelatos
 Full Name (Last, First, Middle Initial)
 Mailing Address 12147 JAMES JACK LN
 City CHARLOTTE State NC Zip Code 28277-3752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP, Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39021589469
 Amount of Each Receipt this Period 210.00
 P/R Deduction (\$70.00 Monthly)

B. David L Bauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 2081 MAJESTY CT
 City AKRON State OH Zip Code 44333-1282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP, Field Life Sales Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39023119469
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Monthly)

C. Gary D. Veshecco
 Full Name (Last, First, Middle Initial)
 Mailing Address 845 W TOWNHALL RD
 City WATERFORD State PA Zip Code 16441-4131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP, Law & Privacy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 30 / 2014
Transaction ID : PR39023229469
 Amount of Each Receipt this Period 600.00
 P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1110.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 41
	(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"/> 12
		<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. James K Harvey
Full Name (Last, First, Middle Initial)

Mailing Address 3917 BEECH AVE

City State Zip Code
ERIE PA 16508-3114

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

Name of Employer Occupation
Erie Insurance Group Sr Talent Management Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
278.92

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : PR39023429469

Amount of Each Receipt this Period
140.70

P/R Deduction (\$46.90 Monthly)

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

Mailing Address 9262 HAMOT RD

City State Zip Code
WATERFORD PA 16441-2706

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

Name of Employer Occupation
Erie Insurance Group SVP, Field Claims

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
567.12

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : PR39024249469

Amount of Each Receipt this Period
286.56

P/R Deduction (\$95.52 Monthly)

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

Mailing Address 4361 COOPER RD

City State Zip Code
ERIE PA 16510-6621

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

Name of Employer Occupation
Erie Insurance Group VP, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : PR39024339469

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 577.26

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 OF 41
	<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. Karen A. Kraus Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 VIRGINIA AVE
 City State Zip Code
 ERIE PA 16505-4611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP, Corporate Marketing Svcs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 455.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39024499469
 Amount of Each Receipt this Period
 229.74
 P/R Deduction (\$76.58 Monthly)

B. Shawn C Cummings
 Full Name (Last, First, Middle Initial)
 Mailing Address 1844 BUXTON WAY
 City State Zip Code
 BURLINGTON NC 27215-9435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir, Strategic Agency Invstmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 562.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39024509469
 Amount of Each Receipt this Period
 283.32
 P/R Deduction (\$94.44 Monthly)

C. David C Katovich
 Full Name (Last, First, Middle Initial)
 Mailing Address 4325 STONE CREEK DR
 City State Zip Code
 ERIE PA 16506-7041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP, Life Undw & Product Admn
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 211.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39024579469
 Amount of Each Receipt this Period
 90.00
 P/R Deduction (\$30.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	603.06
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<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. Jeffrey W. Brinling
Full Name (Last, First, Middle Initial)

Mailing Address 5603 STONERIDGE DR

City FAIRVIEW	State PA	Zip Code 16415-2243
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Corporate Services
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025099469

Amount of Each Receipt this Period
294.00

P/R Deduction (\$98.00 Monthly)

B. Richard F Burt Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 3710 VOLKMAN RD

City ERIE	State PA	Zip Code 16506-4759
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation EVP, Products
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1846.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025159469

Amount of Each Receipt this Period
923.10

P/R Deduction (\$307.70 Monthly)

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

Mailing Address 245 GATEWAY DR

City FAIRVIEW	State PA	Zip Code 16415-1639
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Services
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025169469

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1517.10
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 17 OF 41
(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. Michael A Plazony
Full Name (Last, First, Middle Initial)
Mailing Address 5500 STONERIDGE DR
City FAIRVIEW State PA Zip Code 16415-2240
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SVP, Life
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **624.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025179469
Amount of Each Receipt this Period **312.00**
P/R Deduction (\$104.00 Monthly)

B. Lorianne Feltz
Full Name (Last, First, Middle Initial)
Mailing Address 6418 FIELD VALLEY LN
City FAIRVIEW State PA Zip Code 16415-1725
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SVP, Customer Service
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **550.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025189469
Amount of Each Receipt this Period **300.00**
P/R Deduction (\$100.00 Monthly)

C. Gregory J. Gutting
Full Name (Last, First, Middle Initial)
Mailing Address 529 SYBIL DR
City ERIE State PA Zip Code 16505-2151
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SVP, Controller
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1186.04**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025229469
Amount of Each Receipt this Period **600.72**
P/R Deduction (\$200.24 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **1212.72**
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 18 OF 41
	<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

Full Name (Last, First, Middle Initial)
A. George D. Dufala

Mailing Address 289 NIAGARA POINT DR

City ERIE	State PA	Zip Code 16507-2321
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation EVP, Services
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1076.95

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025269469

Amount of Each Receipt this Period
923.10

P/R Deduction (\$307.70 Monthly)

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

Mailing Address 6146 SCIOTO CT

City FAIRVIEW	State PA	Zip Code 16415-3276
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Regional Officer
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025349469

Amount of Each Receipt this Period
150.00

P/R Deduction (\$50.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Ann H Zaprazny

Mailing Address 93 JACOBS CREEK DR

City HERSHEY	State PA	Zip Code 17033-8915
-----------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Regional Officer
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR39025379469

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1373.10
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: (check only one)	PAGE 19 OF 41
	<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. Marcia A Dall
Full Name (Last, First, Middle Initial)
Mailing Address 4891 EQUESTRIAN DR
City ERIE State PA Zip Code 16506-6617
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation EVP & Chief Financial Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1846.20**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025429469
Amount of Each Receipt this Period **923.10**
P/R Deduction (\$307.70 Monthly)

B. John F Kearns
Full Name (Last, First, Middle Initial)
Mailing Address 5804 WIND CHIME LN
City FAIRVIEW State PA Zip Code 16415-3249
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation EVP, Sales & Marketing
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1848.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025439469
Amount of Each Receipt this Period **924.00**
P/R Deduction (\$308.00 Monthly)

C. Gregory C. Page
Full Name (Last, First, Middle Initial)
Mailing Address 8780 MARTHA WAY
City WATERFORD State PA Zip Code 16441-4066
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Regional Claims Officer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **06 / 30 / 2014**
Transaction ID : PR39025539469
Amount of Each Receipt this Period **180.00**
P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **2027.10**
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: (check only one)	PAGE 20 OF 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Patrick J. Burns
 Full Name (Last, First, Middle Initial)
 Mailing Address 8391 SUN LAKE DR
 City State Zip Code
 GIRARD PA 16417-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP & Regional Claims Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 840.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025549469
 Amount of Each Receipt this Period
 420.00
 P/R Deduction (\$140.00 Monthly)

B. Matthew W. Myers
 Full Name (Last, First, Middle Initial)
 Mailing Address 6515 HONEY LN
 City State Zip Code
 ERIE PA 16509-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP, Corporate Claims
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025559469
 Amount of Each Receipt this Period
 450.00
 P/R Deduction (\$150.00 Monthly)

C. Richard Holmgren
 Full Name (Last, First, Middle Initial)
 Mailing Address 162 E 35TH ST
 City State Zip Code
 ERIE PA 16504-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP, Creative Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025579469
 Amount of Each Receipt this Period
 120.00
 P/R Deduction (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	990.00
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 21 OF 41
	<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. Mark K. Banks
Full Name (Last, First, Middle Initial)

Mailing Address 5123 FLINTLOCK LN

City ROANOKE State VA Zip Code 24018-8711

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

Name of Employer Erie Insurance Group Occupation VP & Branch Manager IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025729469

Amount of Each Receipt this Period
 240.00

P/R Deduction (\$80.00 Monthly)

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

Mailing Address 2311 WEDGEWOOD WAY

City YORK State PA Zip Code 17408-9464

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

Name of Employer Erie Insurance Group Occupation VP & Branch Manager IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025749469

Amount of Each Receipt this Period
 115.50

P/R Deduction (\$38.50 Monthly)

C. Charles M. Fletcher
Full Name (Last, First, Middle Initial)

Mailing Address 181 FREEDOM DR

City PARKERSBURG State WV Zip Code 26101-8505

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

Name of Employer Erie Insurance Group Occupation VP & Branch Manager IV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : PR39025779469

Amount of Each Receipt this Period
 211.55

P/R Deduction (\$84.62 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 567.05

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 OF 41
(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

Full Name (Last, First, Middle Initial)
A. Christy S. Yousefnejad

Mailing Address 1022 W STERLINGTON PL

City State Zip Code
 APEX NC 27502-8938

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

Name of Employer Occupation
 Erie Insurance Group VP & Claims Manager I

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR39025879469

Amount of Each Receipt this Period
240.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Cheryl L. Mitchell

Mailing Address 4315 ALISON AVE

City State Zip Code
 ERIE PA 16506-6165

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

Name of Employer Occupation
 Erie Insurance Group VP, Workplace Services

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR39026499469

Amount of Each Receipt this Period
216.00

P/R Deduction (\$72.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Ryszard Krysiak

Mailing Address 903 LONG POINT DR

City State Zip Code
 ERIE PA 16505-5417

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

Name of Employer Occupation
 Erie Insurance Group Project Manager I (IT)

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **253.20**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR39029499469

Amount of Each Receipt this Period
126.60

P/R Deduction (\$42.20 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ► **582.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 41
	<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

Full Name (Last, First, Middle Initial) A. Andrew M Eрман			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : PR42910809469		
Mailing Address 3693 VOLKMAN RD			Amount of Each Receipt this Period 300.00		
City ERIE	State PA	Zip Code 16506-4767	P/R Deduction (\$100.00 Monthly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 600.00			
Name of Employer Erie Insurance Group		Occupation VP & Chief Life Actuary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) B. William N Herr Jr.			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : PR43125489469		
Mailing Address 3450 TANAGER DR			Amount of Each Receipt this Period 433.02		
City ERIE	State PA	Zip Code 16506-1156	P/R Deduction (\$144.34 Monthly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 862.88			
Name of Employer Erie Insurance Group		Occupation VP, Corporate Actuarial			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

Full Name (Last, First, Middle Initial) C. Bradley G Postema			Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 30 / 2014 Transaction ID : PR44411599469		
Mailing Address 5701 DOBLER RD			Amount of Each Receipt this Period 692.64		
City GIRARD	State PA	Zip Code 16417-8768	P/R Deduction (\$230.88 Monthly)		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1367.52			
Name of Employer Erie Insurance Group		Occupation SVP & Chief Investment Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	1425.66
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 24 OF 41
	<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. Robert C Ingram III
Full Name (Last, First, Middle Initial)

Mailing Address 1324 S SHORE DR APT 707

City ERIE	State PA	Zip Code 16505-2540
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation EVP & Chief Information Ofcr
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1846.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR49164869469

Amount of Each Receipt this Period
923.10

P/R Deduction (\$307.70 Monthly)

B. Bradley C. Eastwood
Full Name (Last, First, Middle Initial)

Mailing Address 600 RIDGEVIEW DR

City ERIE	State PA	Zip Code 16505-1056
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Actuarial & Chief Actuary
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR56879919469

Amount of Each Receipt this Period
178.68

P/R Deduction (\$59.56 Monthly)

C. Ruben F. Fechner III
Full Name (Last, First, Middle Initial)

Mailing Address 6045 FOSSILWOOD CT

City ERIE	State PA	Zip Code 16506-7013
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation SVP, Information Technology
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1199.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : PR56879929469

Amount of Each Receipt this Period
611.52

P/R Deduction (\$203.84 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1713.30
TOTAL This Period (last page this line number only).....▶	20541.59

**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

Full Name (Last, First, Middle Initial)

A. Shelley Moore Capito For Congress

Mailing Address P.O. Box 11519

City Charleston State WV Zip Code 25339

Purpose of Disbursement

011

Candidate Name
Rep. Shelley Capito

Category/
Type

Office Sought: House
 Senate
 President
State: WV District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	1	4

Transaction ID : 5990198

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Boehner for Speaker Joint Fundraising Committee

Mailing Address 320 First Street, S. E.

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	1	4

Transaction ID : 6022063

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Citizens For Rothfus Inc.

Mailing Address PO Box 435

City Sewickley State PA Zip Code 15143

Purpose of Disbursement

011

Candidate Name
Mr. Keith Rothfus

Category/
Type

Office Sought: House
 Senate
 President
State: PA District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166749

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5	5	0	0	0	0	0	0	0	0

5	5	0	0	0	0	0	0	0	0

**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

Full Name (Last, First, Middle Initial)

A. Rodney For Congress

Mailing Address PO Box 344

City Taylorville State IL Zip Code 62568

Purpose of Disbursement

011

Candidate Name

Rep. Rodney Davis

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166751

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Roskam For Congress Committee

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

011

Candidate Name

Rep. Peter Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166752

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Luke Messer For Congress

Mailing Address 345 W Broadway

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement

011

Candidate Name

Mr. Allen Messer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166753

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

**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

Full Name (Last, First, Middle Initial)

A. Stutzman For Congress

Mailing Address 0250 W 600 N

City State Zip Code
Howe IN 46746

Purpose of Disbursement

011

Candidate Name

Rep. Marlin Stutzman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166754

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Hoyer For Congress

Mailing Address 700 13th Street, Nw
Suite 600

City State Zip Code
Washington DC 20005

Purpose of Disbursement

011

Candidate Name

Rep. Steny Hoyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166756

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Hudson For Congress

Mailing Address PO Box 5053

City State Zip Code
Concord NC 28027

Purpose of Disbursement

011

Candidate Name

Rep. Richard Hudson Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166769

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

**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

Full Name (Last, First, Middle Initial)

A. Mchenry For Congress

Mailing Address PO Box 1406

City State Zip Code
Hickory NC 28603

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Patrick McHenry

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6166833

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Friends For Gregory Meeks

Mailing Address 153-01 Jamaica Ave. Suite 535

City State Zip Code
Jamaica NY 11432

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Gregory Meeks

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6167146

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Moore For Congress

Mailing Address PO Box 16646

City State Zip Code
Milwaukee WI 53216

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Gwendolynne Moore

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6167157

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

**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

Full Name (Last, First, Middle Initial)

A. Ryan For Congress

Mailing Address P. O. Box 1488

City State Zip Code
Janesville WI 53547

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Paul Ryan

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6167158

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Duffy For Congress

Mailing Address PO Box 538

City State Zip Code
Wausau WI 54402

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Sean Duffy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6167159

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Kirk For Senate

Mailing Address P.O. Box 8

City State Zip Code
Winnetka IL 60093

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Mark Kirk

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	1	4

Transaction ID : 6167161

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

SUBTOTAL of Disbursements This Page (optional)..... ▶

3	0	0	0	0	0	0	0	0	0

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

3	0	0	0	0	0	0	0	0	0

**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

Full Name (Last, First, Middle Initial)

A. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement

011

Candidate Name

Rep. Joseph Donnelly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : 6167163

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ron Johnson For Senate Inc

Mailing Address 219 E Washington Ave
Suite 101

City Oshkosh State WI Zip Code 54901

Purpose of Disbursement

011

Candidate Name

Sen. Ron Johnson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : 6167164

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Boehner for Speaker Joint Fundraising Committee

Mailing Address 320 First Street, S. E.

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : 6167166

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

22000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Citizens for Hottinger

Mailing Address 2135 Horns Hill Road

City Newark State OH Zip Code 43055

Purpose of Disbursement
, STATE HOUSE OH

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 5990199

Amount of Each Disbursement this Period

, STATE HOUSE OH

Full Name (Last, First, Middle Initial)

B. Brad White for House Committee

Mailing Address Post Office Box 4779

City Charleston State WV Zip Code 25364

Purpose of Disbursement
, STATE HOUSE WV

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 6016487

Amount of Each Disbursement this Period

, STATE HOUSE WV

Full Name (Last, First, Middle Initial)

C. The Committee to Elect Garland Pierce

Mailing Address 21981 Buie Street

City Wagram State NC Zip Code 28396

Purpose of Disbursement
Garland Pierce, STATE HOUSE 48th NC

Candidate Name

NC Rep. Garland Pierce

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : 6060571

Amount of Each Disbursement this Period

Garland Pierce, STATE HOUSE 48th NC

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial) A. Julia C. Howard for House Committee		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address 330 S. Salisbury Street		Transaction ID : 6060573
City Mocksville State NC Zip Code 27028	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement , STATE HOUSE NC	Candidate Name Julia C. Howard	, STATE HOUSE NC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011	

Full Name (Last, First, Middle Initial) B. Justin Burr for NC House		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address P.O. Box 1966		Transaction ID : 6060727
City Albemarle State NC Zip Code 28002	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Justin Burr, STATE HOUSE 67th NC	Candidate Name Justin Burr	Justin Burr, STATE HOUSE 67th NC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011	

Full Name (Last, First, Middle Initial) C. Susi Hamilton for NC State House		Date of Disbursement MM / DD / YYYY 05 / 14 / 2014
Mailing Address P.O. Box 637		Transaction ID : 6060728
City Wilmington State NC Zip Code 28402	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Susi Hamilton, STATE HOUSE 18th NC	Candidate Name Susi Hamilton	Susi Hamilton, STATE HOUSE 18th NC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 011	

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. Committee to Elect Jeff Collins

Mailing Address P.O. Box 8078

City Rocky Mount State NC Zip Code 27804

Purpose of Disbursement
, STATE HOUSE NC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Transaction ID : 6060744

Amount of Each Disbursement this Period

500.00

, STATE HOUSE NC

Full Name (Last, First, Middle Initial)

B. North Carolina Healthy Leadership Committee

Mailing Address P.O. Box 1054

City Morrisville State NC Zip Code 27560

Purpose of Disbursement
, STATE HOUSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Transaction ID : 6060745

Amount of Each Disbursement this Period

500.00

, STATE HOUSE

Full Name (Last, First, Middle Initial)

C. McKissick for NC Senate

Mailing Address P.O. Box 51608

City Durham State NC Zip Code 27717

Purpose of Disbursement
, STATE SENATE NC

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

011

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Transaction ID : 6060746

Amount of Each Disbursement this Period

500.00

, STATE SENATE NC

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Wesley Meredith for Senate

Mailing Address P.O. Box 27398

City Fayetteville State NC Zip Code 28314

Purpose of Disbursement
, STATE SENATE NC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6060755

Amount of Each Disbursement this Period

, STATE SENATE NC

Full Name (Last, First, Middle Initial)

B. Richard Saslaw for Senate

Mailing Address P.O. Box 1856

City Springfield State VA Zip Code 22151

Purpose of Disbursement
Richard Saslaw, STATE SENATE 35th VA

Candidate Name

Senator Richard Saslaw

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6073651

Amount of Each Disbursement this Period

Richard Saslaw, STATE SENATE 35th VA

Full Name (Last, First, Middle Initial)

C. Committee to Elect Paul Tine

Mailing Address P.O. Box 12

City Kitty Hawk State NC Zip Code 27949

Purpose of Disbursement
Paul Tine, STATE HOUSE 6th NC

Candidate Name

NC Rep. Paul Tine

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 6073652

Amount of Each Disbursement this Period

Paul Tine, STATE HOUSE 6th NC

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. Dollar for House

Mailing Address P.O. Box 1369

City Cary State NC Zip Code 27512

Purpose of Disbursement
Nelson Dollar, STATE HOUSE 36th NC

011

Candidate Name

NC Rep. Nelson Dollar

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : 6073653

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Nelson Dollar, STATE HOUSE 36th NC

Full Name (Last, First, Middle Initial)

B. Gene McLaurin for NC Senate

Mailing Address 905 Fayetteville Road

City Rockingham State NC Zip Code 28379

Purpose of Disbursement
Gene McLaurin, STATE SENATE 25th NC

011

Candidate Name

NC Sen. Gene McLaurin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : 6073658

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Gene McLaurin, STATE SENATE 25th NC

Full Name (Last, First, Middle Initial)

C. Ralph Hise for NC Senate

Mailing Address P.O. Box 86

City Spruce Pine State NC Zip Code 28777

Purpose of Disbursement
Ralph Hise, STATE SENATE 47th NC

011

Candidate Name

NC Sen. Ralph Hise Jr

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	4

Transaction ID : 6073696

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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Ralph Hise, STATE SENATE 47th NC

SUBTOTAL of Disbursements This Page (optional)..... ▶

1	5	0	0	0	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

1	5	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Gunn for NC Senate

Mailing Address 300 N. Salisbury Street
P.O. box 308

City Burlington State NC Zip Code 27216

Purpose of Disbursement
Rick Gunn, STATE SENATE 24th NC

011

Candidate Name
NC Sen. Rick Gunn Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : 6073702

Amount of Each Disbursement this Period

500.00

Rick Gunn, STATE SENATE 24th NC

Full Name (Last, First, Middle Initial)

B. Committee to Elect Norman Sanderson NC Senate

Mailing Address 405 Two Lakes Trail

City New Bern State NC Zip Code 28560

Purpose of Disbursement
Norman Sanderson, STATE SENATE 2nd NC

011

Candidate Name
NC Sen. Norman Sanderson Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : 6073704

Amount of Each Disbursement this Period

1000.00

Norman Sanderson, STATE SENATE 2nd NC

Full Name (Last, First, Middle Initial)

C. Committee to Elect Mike Green

Mailing Address P.O. Box 274

City Daniels State WV Zip Code 25832

Purpose of Disbursement
Mike Green, STATE SENATE 9th WV

011

Candidate Name
WV Sen. Mike Green

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104670

Amount of Each Disbursement this Period

500.00

Mike Green, STATE SENATE 9th WV

SUBTOTAL of Disbursements This Page (optional)..... ▶

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. Ronald F. Miller

Mailing Address HC 34
Boxx 359

City Lewisburg State WV Zip Code 24901

Purpose of Disbursement
Ronald Miller, STATE SENATE 10th WV

Candidate Name
WV Sen. Ronald Miller

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104672

Amount of Each Disbursement this Period
500.00

Ronald Miller, STATE SENATE 10th WV

Full Name (Last, First, Middle Initial)

B. Bob Beach for Senate

Mailing Address 21 Maple Lake Road

City Morgantown State WV Zip Code 26501

Purpose of Disbursement
Robert Beach, STATE SENATE 13th WV

Candidate Name
WV Sen. Robert Beach

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104673

Amount of Each Disbursement this Period
1000.00

Robert Beach, STATE SENATE 13th WV

Full Name (Last, First, Middle Initial)

C. John O'Neal

Mailing Address 8 Oriole Place

City Beckley State WV Zip Code 25801

Purpose of Disbursement
John O'Neal, STATE HOUSE 28th WV

Candidate Name
WV Del. John O'Neal IV

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104690

Amount of Each Disbursement this Period
250.00

John O'Neal, STATE HOUSE 28th WV

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1750.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Stagers for HOUse of Delegates

Mailing Address 33 Barrington Hill Road

City Fayetteville State WV Zip Code 25840

Purpose of Disbursement
Margaret Stagers, STATE HOUSE 32nd WV

Candidate Name
WV Del. Margaret Stagers

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104692

Amount of Each Disbursement this Period

250.00

Margaret Stagers, STATE HOUSE 32nd WV

Full Name (Last, First, Middle Initial)

B. Committee to Elect Perry

Mailing Address 330 East Martin Ave

City Oakhill State WV Zip Code 25901

Purpose of Disbursement
David Perry, STATE HOUSE 32nd WV

Candidate Name
Delegate David Perry

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104693

Amount of Each Disbursement this Period

250.00

David Perry, STATE HOUSE 32nd WV

Full Name (Last, First, Middle Initial)

C. McCuskey for West Virginia

Mailing Address P.O. Box 11359

City Charleston State WV Zip Code 25339

Purpose of Disbursement
John McCuskey, STATE HOUSE 35th WV

Candidate Name
WV Del. John McCuskey

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104694

Amount of Each Disbursement this Period

500.00

John McCuskey, STATE HOUSE 35th WV

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Eric Nelson

Mailing Address P.O. Box 186

City Charleston State WV Zip Code 25314

Purpose of Disbursement
Eric Nelson, STATE HOUSE 35th WV

011

Candidate Name

WV Del. Eric Nelson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104696

Amount of Each Disbursement this Period

250.00

Eric Nelson, STATE HOUSE 35th WV

Full Name (Last, First, Middle Initial)

B. Citizens for Nancy Guthrie

Mailing Address 5300 Kanawha Ave

City Charleston State WV Zip Code 25304

Purpose of Disbursement
Nancy Guthrie, STATE HOUSE 36th WV

011

Candidate Name

WV Del. Nancy Guthrie

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104698

Amount of Each Disbursement this Period

500.00

Nancy Guthrie, STATE HOUSE 36th WV

Full Name (Last, First, Middle Initial)

C. Committee to Elect Tim Miley

Mailing Address 23 Valley View Road

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement
Tim Miley, STATE HOUSE 48th WV

011

Candidate Name

WV Del. Tim Miley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104700

Amount of Each Disbursement this Period

500.00

Tim Miley, STATE HOUSE 48th WV

SUBTOTAL of Disbursements This Page (optional)..... ▶

1250.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial) A. Committee to Elect Tim Manchin		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 1543 Fairmont Ave		Transaction ID : 6104702
City Fairmont	State WV	
Zip Code 265547	Purpose of Disbursement STATE HOUSE WV	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/Type 011	STATE HOUSE WV
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Committee to Elect Bill Hartman		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address P.O. Box 243		Transaction ID : 6104704
City Elkins	State WV	
Zip Code 26241	Purpose of Disbursement William Hartman, STATE HOUSE 43rd WV	Amount of Each Disbursement this Period 250.00
Candidate Name WV Del. William Hartman	Category/Type 011	William Hartman, STATE HOUSE 43rd WV
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Westfall for the House		Date of Disbursement MM / DD / YYYY 05 / 23 / 2014
Mailing Address 450 S. Church Street		Transaction ID : 6104716
City Ripley	State WV	
Zip Code 25271	Purpose of Disbursement Steve Westfall, STATE HOUSE 12th WV	Amount of Each Disbursement this Period 500.00
Candidate Name WV Del. Steve Westfall	Category/Type 011	Steve Westfall, STATE HOUSE 12th WV
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<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

Full Name (Last, First, Middle Initial)

A. Committee to Elect Charles Trump

Mailing Address 171 South Washington Street

City Berkley Springs State WV Zip Code 25411

Purpose of Disbursement
Charles Trump, STATE SENATE WV

Candidate Name
Charles Trump

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
05 / 23 / 2014

Transaction ID : 6104719
Amount of Each Disbursement this Period
500.00

Charles Trump, STATE SENATE WV

Full Name (Last, First, Middle Initial)

B. NYIAPAC

Mailing Address 130 Washington Ave

City Albany State NY Zip Code 12210

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 19 / 2014

Transaction ID : 6167168
Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Sandy Voss

Mailing Address 1364 Parkview Dr

City Hubertus State WI Zip Code 53033

Purpose of Disbursement
, STATE HOUSE WI

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
06 / 19 / 2014

Transaction ID : 6167172
Amount of Each Disbursement this Period
500.00

, STATE HOUSE WI

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2000.00
17000.00