

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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="2016"/>	<input type="text" value="89098.88"/>	<input type="text" value="89098.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="72785.91"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="39864.84"/>	<input type="text" value="68851.87"/>
(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="112650.75"/>	<input type="text" value="157950.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="27450.00"/>	<input type="text" value="72750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="85200.75"/>	<input type="text" value="85200.75"/>
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

Write or Type Committee Name

Erie Indemnity Company PAC - Federal

Report Covering the Period: From: 04 / 01 / 2016 To: 06 / 30 / 2016

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).....	33728.48	50173.49
(ii) Unitemized	6136.36	18678.38
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	39864.84	68851.87
(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)	39864.84	68851.87
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))..... ▶	39864.84	68851.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39864.84	68851.87

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.....	10000.00	30000.00
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	17450.00	42750.00
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)) ..	27450.00	72750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27450.00	72750.00

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)	39864.84	68851.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39864.84	68851.87
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: (check only one)	PAGE 6 OF 85
	<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. James W Bahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 SHAWNEE DR
 City State Zip Code
 ERIE PA 16505-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Claims Refresh Program Lead
 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
 04 / 22 / 2016
Transaction ID : A2016-684807
 Amount of Each Receipt this Period
 80.00
 Memo Item

B. James W Bahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 SHAWNEE DR
 City State Zip Code
 ERIE PA 16505-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Claims Refresh Program Lead
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909312
 Amount of Each Receipt this Period
 80.00
 Memo Item

C. James W Bahn
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 SHAWNEE DR
 City State Zip Code
 ERIE PA 16505-2432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Claims Refresh Program Lead
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212154
 Amount of Each Receipt this Period
 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:
Transaction ID:

**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 85
	<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. Mark K Banks

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 ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : A2016-684899

Amount of Each Receipt this Period
80.00

Memo Item

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

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 ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2016

Transaction ID : A2016-909410

Amount of Each Receipt this Period
80.00

Memo Item

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

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 ▼ **520.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : A2016-121252

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 85
(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. 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 ▼ 400.00

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684860
 Amount of Each Receipt this Period 100.00
 Memo Item

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 ▼ 500.00

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909371
 Amount of Each Receipt this Period 100.00
 Memo Item

C. 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 ▼ 650.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212213
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 10 OF 85
	<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. David L Bednar
 Full Name (Last, First, Middle Initial)
 Mailing Address 8019 W LAKE RD
 City FAIRVIEW State PA Zip Code 16415-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP Executive Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684799
 Amount of Each Receipt this Period
 61.60
 Memo Item

B. David L Bednar
 Full Name (Last, First, Middle Initial)
 Mailing Address 8019 W LAKE RD
 City FAIRVIEW State PA Zip Code 16415-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP Executive Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 302.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909305
 Amount of Each Receipt this Period
 61.60
 Memo Item

C. David L Bednar
 Full Name (Last, First, Middle Initial)
 Mailing Address 8019 W LAKE RD
 City FAIRVIEW State PA Zip Code 16415-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP Executive Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.36

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212147
 Amount of Each Receipt this Period
 92.40
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	215.60
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 11 OF 85
	<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. Richard J Bengel			Date of Receipt MM / DD / YYYY 05 / 05 / 2016 Transaction ID : A2016-801984
Mailing Address 359 E 41ST ST			Amount of Each Receipt this Period 250.00
City ERIE	State PA	Zip Code 16504-2073	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation Dir Strategic Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Jon P Bloom			Date of Receipt MM / DD / YYYY 04 / 22 / 2016 Transaction ID : A2016-684843
Mailing Address 740 RIDGEVIEW DR			Amount of Each Receipt this Period 93.00
City ERIE	State PA	Zip Code 16505-1059	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation Dir EPMO Performance Tracking		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.78		

Full Name (Last, First, Middle Initial) C. Jon P Bloom			Date of Receipt MM / DD / YYYY 05 / 24 / 2016 Transaction ID : A2016-909349
Mailing Address 740 RIDGEVIEW DR			Amount of Each Receipt this Period 93.00
City ERIE	State PA	Zip Code 16505-1059	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation Dir EPMO Performance Tracking		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.78		

SUBTOTAL of Receipts This Page (optional).....▶	436.00
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 12 OF 85
	<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. Jon P Bloom
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RIDGEVIEW DR
 City State Zip Code
 ERIE PA 16505-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir EPMO Performance Tracking
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 464.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212191
 Amount of Each Receipt this Period
 139.50
 Memo Item

B. Jeffrey W Brinling
 Full Name (Last, First, Middle Initial)
 Mailing Address 5603 STONERIDGE DR
 City State Zip Code
 FAIRVIEW PA 16415-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP Corporate Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 686.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684788
 Amount of Each Receipt this Period
 196.00
 Memo Item

C. Jeffrey W Brinling
 Full Name (Last, First, Middle Initial)
 Mailing Address 5603 STONERIDGE DR
 City State Zip Code
 FAIRVIEW PA 16415-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP Corporate Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 882.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909293
 Amount of Each Receipt this Period
 196.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	531.50
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 13 OF 85
	<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. Jeffrey W Brinling		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2016 Transaction ID : A2016-1212135
Mailing Address 5603 STONERIDGE DR		Amount of Each Receipt this Period 294.00
City FAIRVIEW	State PA	Zip Code 16415-2243
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation SVP Corporate Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1176.00	

Full Name (Last, First, Middle Initial) B. Patrick J Burns		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2016 Transaction ID : A2016-684864
Mailing Address 8391 SUN LAKE DR		Amount of Each Receipt this Period 140.00
City GIRARD	State PA	Zip Code 16417-7013
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation VP Corporate Claims Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	

Full Name (Last, First, Middle Initial) C. Patrick J Burns		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 Transaction ID : A2016-909375
Mailing Address 8391 SUN LAKE DR		Amount of Each Receipt this Period 140.00
City GIRARD	State PA	Zip Code 16417-7013
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation VP Corporate Claims Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

SUBTOTAL of Receipts This Page (optional).....▶	574.00
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 14 OF 85
	<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. Patrick J Burns
Full Name (Last, First, Middle Initial)

Mailing Address 8391 SUN LAKE DR

City GIRARD State PA Zip Code 16417-7013

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

Name of Employer Erie Insurance Group Occupation VP Corporate Claims Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016

Transaction ID : A2016-1212217

Amount of Each Receipt this Period
210.00

Memo Item

B. Terrence W Cavanaugh
Full Name (Last, First, Middle Initial)

Mailing Address 6300 LAKE SHORE DR

City ERIE State PA Zip Code 16505-1015

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

Name of Employer Erie Insurance Group Occupation Pres & Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 11 / 2016

Transaction ID : A2016-647462

Amount of Each Receipt this Period
2500.00

Memo Item

c. Marc Cipriani
Full Name (Last, First, Middle Initial)

Mailing Address 5235 ABINGTON WAY

City ERIE State PA Zip Code 16506-4647

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

Name of Employer Erie Insurance Group Occupation SVP Commercial Lines

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : A2016-1149194

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4210.00
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 OF 85
	<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. Shawn C Cummings

Mailing Address 1844 BUXTON WAY

City BURLINGTON	State NC	Zip Code 27215-9435
--------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Dir Strategic Agency Invstmt
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
393.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684781

Amount of Each Receipt this Period
 99.46

Memo Item

Full Name (Last, First, Middle Initial)
B. Shawn C Cummings

Mailing Address 1844 BUXTON WAY

City BURLINGTON	State NC	Zip Code 27215-9435
--------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Dir Strategic Agency Invstmt
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
493.38

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909340

Amount of Each Receipt this Period
 99.46

Memo Item

Full Name (Last, First, Middle Initial)
C. Shawn C Cummings

Mailing Address 1844 BUXTON WAY

City BURLINGTON	State NC	Zip Code 27215-9435
--------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Dir Strategic Agency Invstmt
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
642.57

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212182

Amount of Each Receipt this Period
 149.19

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	348.11
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 85
	<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. Mark Dombrowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 4361 COOPER RD
 City ERIE State PA Zip Code 16510-6621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909314
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Mark Dombrowski
 Full Name (Last, First, Middle Initial)
 Mailing Address 4361 COOPER RD
 City ERIE State PA Zip Code 16510-6621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212156
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Brian R Dorio
 Full Name (Last, First, Middle Initial)
 Mailing Address 344 E 5TH ST
 City ERIE State PA Zip Code 16507-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation Project Manager II (IT)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684916
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 17 OF 85
	<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. Brian R Dorio
Full Name (Last, First, Middle Initial)

Mailing Address 344 E 5TH ST

City ERIE State PA Zip Code 16507-1608

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909426

Amount of Each Receipt this Period
 100.00

Memo Item

B. Brian R Dorio
Full Name (Last, First, Middle Initial)

Mailing Address 344 E 5TH ST

City ERIE State PA Zip Code 16507-1608

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

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

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 / 27 / 2016
Transaction ID : A2016-1212266

Amount of Each Receipt this Period
 150.00

Memo Item

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

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 ▼ 1230.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684815

Amount of Each Receipt this Period
 307.70

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 557.70

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 85
	<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. 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 ▼
1538.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909320

Amount of Each Receipt this Period
307.70

Memo Item

Full Name (Last, First, Middle Initial)
B. 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 ▼
2000.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212162

Amount of Each Receipt this Period
461.55

Memo Item

Full Name (Last, First, Middle Initial)
C. Sean D Dugan

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 ▼
234.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212157

Amount of Each Receipt this Period
54.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	823.25
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 85
	<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. 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 ▼ 243.04

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684919
 Amount of Each Receipt this Period 60.76
 Memo Item

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 ▼ 303.80

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909429
 Amount of Each Receipt this Period 60.76
 Memo Item

C. 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 ▼ 394.94

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-121269
 Amount of Each Receipt this Period 91.14
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	212.66
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 20 OF 85
	<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. Andrew M Eрман

Mailing Address 3693 VOLKMAN RD

City ERIE	State PA	Zip Code 16506-4767
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP & Chief Life Actuary
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		22		2016

Transaction ID : A2016-684911

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Andrew M Eрман

Mailing Address 3693 VOLKMAN RD

City ERIE	State PA	Zip Code 16506-4767
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP & Chief Life Actuary
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		24		2016

Transaction ID : A2016-909422

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Sandra A Estes

Mailing Address 11204 PHILLIPSVILLE RD

City WATTSBURG	State PA	Zip Code 16442-1614
-------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Dir Program Mgmt
--	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		27		2016

Transaction ID : A2016-1212158

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 85
	<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. 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) Memo Item
 Aggregate Year-to-Date **859.24**

Date of Receipt **04 / 22 / 2016**
Transaction ID : A2016-684920
 Amount of Each Receipt this Period **218.08**
 Memo Item

B. 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) Memo Item
 Aggregate Year-to-Date **1077.32**

Date of Receipt **05 / 24 / 2016**
Transaction ID : A2016-909430
 Amount of Each Receipt this Period **218.08**
 Memo Item

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) Memo Item
 Aggregate Year-to-Date **1404.44**

Date of Receipt **06 / 27 / 2016**
Transaction ID : A2016-1212270
 Amount of Each Receipt this Period **327.12**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **763.28**
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 22 OF 85
	<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. Lorianne Feltz

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 ▼
700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684797

Amount of Each Receipt this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Lorianne Feltz

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 ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909303

Amount of Each Receipt this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Lorianne Feltz

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 ▼
1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212145

Amount of Each Receipt this Period
300.00

Memo Item

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: (check only one)	PAGE 23 OF 85
	<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. 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 ▼ 274.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684894
 Amount of Each Receipt this Period
 78.50
 Memo Item

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 ▼ 352.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909405
 Amount of Each Receipt this Period
 78.50
 Memo Item

C. 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 ▼ 470.25

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212247
 Amount of Each Receipt this Period
 117.75
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	274.75
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 85
	<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. 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 ▼ 351.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016

Transaction ID : A2016-684841

Amount of Each Receipt this Period
 87.44

Memo Item

B. 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 ▼ 439.12

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016

Transaction ID : A2016-909347

Amount of Each Receipt this Period
 87.44

Memo Item

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 ▼ 570.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016

Transaction ID : A2016-1212189

Amount of Each Receipt this Period
 131.16

Memo Item

SUBTOTAL of Receipts This Page (optional).....	306.04
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 25 OF 85
	<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. Theresa M Gamble
 Full Name (Last, First, Middle Initial)
 Mailing Address 1049 W 24TH ST
 City State Zip Code
 ERIE PA 16502-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir Compliance Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909307
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Theresa M Gamble
 Full Name (Last, First, Middle Initial)
 Mailing Address 1049 W 24TH ST
 City State Zip Code
 ERIE PA 16502-2424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir Compliance Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 295.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212149
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. David R Glod
 Full Name (Last, First, Middle Initial)
 Mailing Address 4902 REESE RD
 City State Zip Code
 ERIE PA 16510-4304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP & Sr Portfolio Mgr Fxd Inc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684862
 Amount of Each Receipt this Period
 180.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 26 OF 85
	<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. David R Glod
 Full Name (Last, First, Middle Initial)
 Mailing Address 4902 REESE RD
 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: Primary General Other (specify)
 Aggregate Year-to-Date **810.00**

Date of Receipt **05 / 24 / 2016**
Transaction ID : A2016-909373
 Amount of Each Receipt this Period **180.00**
 Memo Item

B. David R Glod
 Full Name (Last, First, Middle Initial)
 Mailing Address 4902 REESE RD
 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: Primary General Other (specify)
 Aggregate Year-to-Date **1080.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : A2016-121215
 Amount of Each Receipt this Period **270.00**
 Memo Item

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 **1215.36**

Date of Receipt **04 / 22 / 2016**
Transaction ID : A2016-684780
 Amount of Each Receipt this Period **303.84**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	753.84
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 85
	<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. Gregory J Gutting

Mailing Address 529 SYBIL DR

City State Zip Code
ERIE PA 16505-2151

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

Name of Employer Occupation
Erie Insurance Group SVP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1519.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909299

Amount of Each Receipt this Period
303.84

Memo Item

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

Mailing Address 529 SYBIL DR

City State Zip Code
ERIE PA 16505-2151

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

Name of Employer Occupation
Erie Insurance Group SVP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1974.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212141

Amount of Each Receipt this Period
455.76

Memo Item

Full Name (Last, First, Middle Initial)
C. James K Harvey

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 ▼
245.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909384

Amount of Each Receipt this Period
49.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	809.10
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 28 OF 85
	<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	

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 ▼
319.35

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016
Transaction ID : A2016-1212226

Amount of Each Receipt this Period
74.25

Memo Item

B. Leo J Heintz
Full Name (Last, First, Middle Initial)

Mailing Address 6175 BRANDY RUN

City State Zip Code
FAIRVIEW PA 16415-3305

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 27 / 2016
Transaction ID : A2016-1212179

Amount of Each Receipt this Period
60.00

Memo Item

C. William N Herr Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 3450 TANAGER DR

City State Zip Code
ERIE PA 16506-1156

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

Name of Employer Occupation
Erie Insurance Group VP Corporate Actuarial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
583.12

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016
Transaction ID : A2016-684912

Amount of Each Receipt this Period
147.22

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 281.47

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 29 OF 85
	<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. William N Herr Jr.			Date of Receipt MM / DD / YYYY 05 / 24 / 2016 Transaction ID : A2016-909423		
Mailing Address 3450 TANAGER DR			Amount of Each Receipt this Period 147.22		
City ERIE	State PA	Zip Code 16506-1156	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 730.34			
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) B. William N Herr Jr.			Date of Receipt MM / DD / YYYY 06 / 27 / 2016 Transaction ID : A2016-1212263		
Mailing Address 3450 TANAGER DR			Amount of Each Receipt this Period 220.83		
City ERIE	State PA	Zip Code 16506-1156	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 951.17			
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. Patrick D Hesidence			Date of Receipt MM / DD / YYYY 06 / 27 / 2016 Transaction ID : A2016-1212230		
Mailing Address 2400 GLORY DR			Amount of Each Receipt this Period 50.22		
City WATERFORD	State PA	Zip Code 16441-5404	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 215.98			
Name of Employer Erie Insurance Group		Occupation VP Billing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional).....▶	418.27
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 OF 85
(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. Melvin L Hirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 FOREST XING
 City State Zip Code
 ERIE PA 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP Sales Promotion & Agcy Rel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684785
 Amount of Each Receipt this Period
 80.00
 Memo Item

B. Melvin L Hirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 FOREST XING
 City State Zip Code
 ERIE PA 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP Sales Promotion & Agcy Rel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909367
 Amount of Each Receipt this Period
 80.00
 Memo Item

C. Melvin L Hirst
 Full Name (Last, First, Middle Initial)
 Mailing Address 5820 FOREST XING
 City State Zip Code
 ERIE PA 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP Sales Promotion & Agcy Rel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-121209
 Amount of Each Receipt this Period
 120.00
 Memo Item

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 31 OF 85
	<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. Richard Holmgren
 Full Name (Last, First, Middle Initial)
 Mailing Address 162 E 35TH ST
 City ERIE State PA Zip Code 16504-1514
 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 260.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212139
 Amount of Each Receipt this Period 60.00
 Memo Item

B. 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 1230.80

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684917
 Amount of Each Receipt this Period 307.70
 Memo Item

c. 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 1538.50

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909427
 Amount of Each Receipt this Period 307.70
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.40
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 32 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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

Full Name (Last, First, Middle Initial)
A. Robert C Ingram III

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 ▼
2000.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212267

Amount of Each Receipt this Period
461.55

Memo Item

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

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
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1232.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684859

Amount of Each Receipt this Period
308.00

Memo Item

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

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 ▼
1540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909370

Amount of Each Receipt this Period
308.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1077.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 85
	<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. 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 ▼
2002.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-1212212

Amount of Each Receipt this Period
462.00

Memo Item

B. Keith E Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 971 DUTCH RD

City FAIRVIEW	State PA	Zip Code 16415-1628
------------------	-------------	------------------------

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 ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

Transaction ID : A2016-684909

Amount of Each Receipt this Period
200.00

Memo Item

C. Keith E Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 971 DUTCH RD

City FAIRVIEW	State PA	Zip Code 16415-1628
------------------	-------------	------------------------

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 ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2016

Transaction ID : A2016-909420

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	862.00
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 34 OF 85
	<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. Keith E Kennedy		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2016 Transaction ID : A2016-1212261
Mailing Address 971 DUTCH RD		Amount of Each Receipt this Period 300.00
City FAIRVIEW	State PA	Zip Code 16415-1628
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation SVP Information Technology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. Karen A Kraus Phillips		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 22 / 2016 Transaction ID : A2016-684833
Mailing Address 611 VIRGINIA AVE		Amount of Each Receipt this Period 78.12
City ERIE	State PA	Zip Code 16505-4611
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation VP Strategic Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 309.40	

Full Name (Last, First, Middle Initial) C. Karen A Kraus Phillips		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 24 / 2016 Transaction ID : A2016-909338
Mailing Address 611 VIRGINIA AVE		Amount of Each Receipt this Period 78.12
City ERIE	State PA	Zip Code 16505-4611
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Erie Insurance Group	Occupation VP Strategic Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 387.52	

SUBTOTAL of Receipts This Page (optional).....▶	456.24
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 35 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. Karen A Kraus Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 VIRGINIA AVE
 City ERIE State PA Zip Code 16505-4611
 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 504.70

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212180
 Amount of Each Receipt this Period 117.18
 Memo Item

B. Claude Lilly
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 311
 City Clemson State SC Zip Code 29633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Provided Occupation None Provided
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 05 / 05 / 2016
Transaction ID : A2016-1147923
 Amount of Each Receipt this Period 500.00
 Memo Item

C. George R Lucore
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Fieldstone Way
 City Erie State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Indemnity Company Occupation Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 05 / 2016
Transaction ID : A2016-1147924
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	867.18
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 36 OF 85
	<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. Debra A Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3560 KANE HILL RD
 City ERIE State PA Zip Code 16510-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation Dir Sales & Agy Bsn Prcs/Plng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 338.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684871
 Amount of Each Receipt this Period
 85.22
 Memo Item

B. Debra A Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3560 KANE HILL RD
 City ERIE State PA Zip Code 16510-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation Dir Sales & Agy Bsn Prcs/Plng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 424.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909382
 Amount of Each Receipt this Period
 85.22
 Memo Item

C. Debra A Mack
 Full Name (Last, First, Middle Initial)
 Mailing Address 3560 KANE HILL RD
 City ERIE State PA Zip Code 16510-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation Dir Sales & Agy Bsn Prcs/Plng
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 551.85

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212224
 Amount of Each Receipt this Period
 127.83
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	298.27
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 37 OF 85
	<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. 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 ▼ 640.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684817
 Amount of Each Receipt this Period
 180.00
 Memo Item

B. 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 ▼ 820.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909322
 Amount of Each Receipt this Period
 180.00
 Memo Item

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 ▼ 1090.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212164
 Amount of Each Receipt this Period
 270.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	630.00
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 OF 85
	<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. Deborah S Masi
 Full Name (Last, First, Middle Initial)
 Mailing Address 3012 MADEIRA DR
 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 Commercial Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 227.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684783
 Amount of Each Receipt this Period
 58.00
 Memo Item

B. Deborah S Masi
 Full Name (Last, First, Middle Initial)
 Mailing Address 3012 MADEIRA DR
 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 Commercial Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909362
 Amount of Each Receipt this Period
 58.00
 Memo Item

C. Deborah S Masi
 Full Name (Last, First, Middle Initial)
 Mailing Address 3012 MADEIRA DR
 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 Commercial Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-121204
 Amount of Each Receipt this Period
 87.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	203.00
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 39 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Sean J McLaughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4870 WATSON RD
 City ERIE State PA Zip Code 16505-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation EVP Secy & Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1232.00

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684922
 Amount of Each Receipt this Period 308.00
 Memo Item

B. Sean J McLaughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4870 WATSON RD
 City ERIE State PA Zip Code 16505-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation EVP Secy & Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909432
 Amount of Each Receipt this Period 308.00
 Memo Item

C. Sean J McLaughlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4870 WATSON RD
 City ERIE State PA Zip Code 16505-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation EVP Secy & Gen Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2002.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212272
 Amount of Each Receipt this Period 462.00
 Memo Item

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 40 OF 85
	<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 W McNutt
Full Name (Last, First, Middle Initial)
Mailing Address 4892 N WAYSIDE DR
City ERIE State PA Zip Code 16505-1358
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Treasurer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **840.00**

Date of Receipt **04 / 22 / 2016**
Transaction ID : A2016-684876
Amount of Each Receipt this Period **240.00**
 Memo Item

B. Robert W McNutt
Full Name (Last, First, Middle Initial)
Mailing Address 4892 N WAYSIDE DR
City ERIE State PA Zip Code 16505-1358
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Treasurer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1080.00**

Date of Receipt **05 / 24 / 2016**
Transaction ID : A2016-909387
Amount of Each Receipt this Period **240.00**
 Memo Item

C. Robert W McNutt
Full Name (Last, First, Middle Initial)
Mailing Address 4892 N WAYSIDE DR
City ERIE State PA Zip Code 16505-1358
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Treasurer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1440.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : A2016-1212229
Amount of Each Receipt this Period **360.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	840.00
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 OF 85
	<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. Cheryl L Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 4315 ALISON AVE

City ERIE	State PA	Zip Code 16506-6165
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Workplace Services
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

Transaction ID : A2016-684897

Amount of Each Receipt this Period
72.00

Memo Item

B. Cheryl L Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 4315 ALISON AVE

City ERIE	State PA	Zip Code 16506-6165
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Workplace Services
--	-------------------------------------

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
05	/	24	/	2016

Transaction ID : A2016-909408

Amount of Each Receipt this Period
72.00

Memo Item

C. Cheryl L Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 4315 ALISON AVE

City ERIE	State PA	Zip Code 16506-6165
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Workplace Services
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
468.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-1212250

Amount of Each Receipt this Period
108.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	252.00
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 42 OF 85
	<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. Matthew W Myers			Date of Receipt MM / DD / YYYY 04 / 22 / 2016 Transaction ID : A2016-684863
Mailing Address 6515 HONEY LN			Amount of Each Receipt this Period 150.00
City ERIE	State PA	Zip Code 16509-4879	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 600.00	
Name of Employer Erie Insurance Group	Occupation SVP & Claims Ref Prgm Sponsor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Matthew W Myers			Date of Receipt MM / DD / YYYY 05 / 24 / 2016 Transaction ID : A2016-909374
Mailing Address 6515 HONEY LN			Amount of Each Receipt this Period 150.00
City ERIE	State PA	Zip Code 16509-4879	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00	
Name of Employer Erie Insurance Group	Occupation SVP & Claims Ref Prgm Sponsor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Matthew W Myers			Date of Receipt MM / DD / YYYY 06 / 27 / 2016 Transaction ID : A2016-1212216
Mailing Address 6515 HONEY LN			Amount of Each Receipt this Period 225.00
City ERIE	State PA	Zip Code 16509-4879	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 975.00	
Name of Employer Erie Insurance Group	Occupation SVP & Claims Ref Prgm Sponsor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. James G Nealon III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4044 SHADYBROOK DR
 City ERIE State PA Zip Code 16506-4740
 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 ▼ 553.24

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684875
 Amount of Each Receipt this Period
 140.36
 Memo Item

B. James G Nealon III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4044 SHADYBROOK DR
 City ERIE State PA Zip Code 16506-4740
 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 ▼ 693.60

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909386
 Amount of Each Receipt this Period
 140.36
 Memo Item

C. James G Nealon III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4044 SHADYBROOK DR
 City ERIE State PA Zip Code 16506-4740
 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 ▼ 904.14

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212228
 Amount of Each Receipt this Period
 210.54
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	491.26
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: PAGE 44 OF 85
(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

Full Name (Last, First, Middle Initial)
A. Lisa 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 Dir Commercial Lines Svcs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	22	/	2016

Transaction ID : A2016-684786

Amount of Each Receipt this Period
72.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Lisa 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 Dir Commercial Lines Svcs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	24	/	2016

Transaction ID : A2016-909368

Amount of Each Receipt this Period
72.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Lisa 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 Dir Commercial Lines Svcs
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-1212210

Amount of Each Receipt this Period
108.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	252.00
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 45 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. Timothy G NeCastro
 Full Name (Last, First, Middle Initial)
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684790
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Timothy G NeCastro
 Full Name (Last, First, Middle Initial)
 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 ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909295
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Timothy G NeCastro
 Full Name (Last, First, Middle Initial)
 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 ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212137
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 46 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Gabriel Oros
 Full Name (Last, First, Middle Initial)
 Mailing Address 234 Parkgate Dr
 City State Zip Code
 Cary NC 27519
 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 ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2016
Transaction ID : A2016-801987
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Gregory C Page
 Full Name (Last, First, Middle Initial)
 Mailing Address 8780 MARTHA WAY
 City State Zip Code
 WATERFORD PA 16441-4066
 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 ▼
 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684883
 Amount of Each Receipt this Period
 120.00
 Memo Item

C. Gregory C Page
 Full Name (Last, First, Middle Initial)
 Mailing Address 8780 MARTHA WAY
 City State Zip Code
 WATERFORD PA 16441-4066
 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 ▼
 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909394
 Amount of Each Receipt this Period
 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	740.00
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 47 OF 85
	<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. Gregory C Page

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 ▼
690.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212236

Amount of Each Receipt this Period
180.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Randall T Peterman

Mailing Address 3588 SWAN LAKE LN

City ERIE State PA Zip Code 16506-1158

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

Name of Employer Erie Insurance Group Occupation SVP Financial Plng & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684872

Amount of Each Receipt this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Randall T Peterman

Mailing Address 3588 SWAN LAKE LN

City ERIE State PA Zip Code 16506-1158

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

Name of Employer Erie Insurance Group Occupation SVP Financial Plng & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909383

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	580.00
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 48 OF 85
	<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. Randall T Peterman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3588 SWAN LAKE LN
 City ERIE State PA Zip Code 16506-1158
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation SVP Financial Plng & Analysis
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 1300.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212225
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Troy M Peterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1324 S SHORE DR APT 509
 City ERIE State PA Zip Code 16505-2539
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation VP Customer Care Operations
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 275.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212262
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Sue A Pfadt
 Full Name (Last, First, Middle Initial)
 Mailing Address 5811 SOUTHLAND DR
 City ERIE State PA Zip Code 16509-7817
 FEC ID number of contributing federal political committee. C
 Name of Employer Erie Insurance Group Occupation Counsel II
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date 260.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212183
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	435.00
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 49 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Michael A Plazony
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 STONERIDGE DR
 City State Zip Code
 FAIRVIEW PA 16415-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP Life
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 728.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684870
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Michael A Plazony
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 STONERIDGE DR
 City State Zip Code
 FAIRVIEW PA 16415-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP Life
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 936.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909381
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Michael A Plazony
 Full Name (Last, First, Middle Initial)
 Mailing Address 5500 STONERIDGE DR
 City State Zip Code
 FAIRVIEW PA 16415-2240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP Life
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212223
 Amount of Each Receipt this Period
 312.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	728.00
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 50 OF 85
	<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. Bradley G Postema
 Full Name (Last, First, Middle Initial)
 Mailing Address 5701 DOBLER RD
 City State Zip Code
 GIRARD PA 16417-8768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP & Chief Investment Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 956.12

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684913
 Amount of Each Receipt this Period
 242.56
 Memo Item

B. Bradley G Postema
 Full Name (Last, First, Middle Initial)
 Mailing Address 5701 DOBLER RD
 City State Zip Code
 GIRARD PA 16417-8768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP & Chief Investment Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1198.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909424
 Amount of Each Receipt this Period
 242.56
 Memo Item

C. Bradley G Postema
 Full Name (Last, First, Middle Initial)
 Mailing Address 5701 DOBLER RD
 City State Zip Code
 GIRARD PA 16417-8768
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP & Chief Investment Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1562.52

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-121264
 Amount of Each Receipt this Period
 363.84
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	848.96
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 51 OF 85
(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. Mary I Power

Mailing Address 4962 SIR HUE DR

City State Zip Code
 ERIE PA 16506-3969

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

Name of Employer Occupation
 Erie Insurance Group VP EPMO Change Mgmt Ctr of Ex

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 290.32

Date of Receipt
 04 / 22 / 2016
Transaction ID : A2016-684800

Amount of Each Receipt this Period
 97.54

Memo Item

Full Name (Last, First, Middle Initial)
B. Mary I Power

Mailing Address 4962 SIR HUE DR

City State Zip Code
 ERIE PA 16506-3969

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

Name of Employer Occupation
 Erie Insurance Group VP EPMO Change Mgmt Ctr of Ex

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 387.86

Date of Receipt
 05 / 24 / 2016
Transaction ID : A2016-909306

Amount of Each Receipt this Period
 97.54

Memo Item

Full Name (Last, First, Middle Initial)
C. Mary I Power

Mailing Address 4962 SIR HUE DR

City State Zip Code
 ERIE PA 16506-3969

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

Name of Employer Occupation
 Erie Insurance Group VP EPMO Change Mgmt Ctr of Ex

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 534.17

Date of Receipt
 06 / 27 / 2016
Transaction ID : A2016-1212148

Amount of Each Receipt this Period
 146.31

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 341.39

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 52 OF 85
	<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. 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 IT Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 229.60

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684836
 Amount of Each Receipt this Period 57.88
 Memo Item

B. 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 IT Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 287.48

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909342
 Amount of Each Receipt this Period 57.88
 Memo Item

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 IT Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 374.30

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212184
 Amount of Each Receipt this Period 86.82
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	202.58
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 53 OF 85
(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. Kim L Reichert
 Mailing Address 5820 FOREST XING
 City State Zip Code
 ERIE PA 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SSV--Recruiting
 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 / 27 / 2016
Transaction ID : A2016-1212227
 Amount of Each Receipt this Period
 60.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. David J Rioux
 Mailing Address 2410 GLORY DR
 City State Zip Code
 WATERFORD PA 16441-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP Corporate Security
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212171
 Amount of Each Receipt this Period
 60.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Belinda J Rogers
 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 ▼
 226.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909419
 Amount of Each Receipt this Period
 45.80
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 165.80
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 54 OF 85
(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. Belinda J Rogers

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 ▼
 295.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212260

Amount of Each Receipt this Period
 68.70

Memo Item

Full Name (Last, First, Middle Initial)
B. 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 Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 654.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684850

Amount of Each Receipt this Period
 166.54

Memo Item

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 Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 821.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909357

Amount of Each Receipt this Period
 166.54

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 401.78

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 55 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. Sheryl A Rucker
 Full Name (Last, First, Middle Initial)
 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 Senior Counsel
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1071.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212199
 Amount of Each Receipt this Period
 249.81
 Memo Item

B. Karen A Rugare
 Full Name (Last, First, Middle Initial)
 Mailing Address 6945 HONEY LN
 City State Zip Code
 ERIE PA 16509-4889
 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 ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684886
 Amount of Each Receipt this Period
 120.00
 Memo Item

C. Karen A Rugare
 Full Name (Last, First, Middle Initial)
 Mailing Address 6945 HONEY LN
 City State Zip Code
 ERIE PA 16509-4889
 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 ▼
 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909397
 Amount of Each Receipt this Period
 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	489.81
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 56 OF 85
	<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 Rugare
Full Name (Last, First, Middle Initial)

Mailing Address 6945 HONEY LN

City ERIE State PA Zip Code 16509-4889

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 ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-121239

Amount of Each Receipt this Period
 180.00

Memo Item

B. Bridget H Schoenig
Full Name (Last, First, Middle Initial)

Mailing Address 5122 ROBINHOOD LN

City ERIE State PA Zip Code 16509-2561

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 ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684845

Amount of Each Receipt this Period
 100.00

Memo Item

C. Bridget H Schoenig
Full Name (Last, First, Middle Initial)

Mailing Address 5122 ROBINHOOD LN

City ERIE State PA Zip Code 16509-2561

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 ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909351

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	380.00
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 57 OF 85
(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. Bridget H Schoenig

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 Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 27 / 2016
Transaction ID : A2016-1212193

Amount of Each Receipt this Period
 150.00

Memo Item

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

Mailing Address 5876 FOREST XING

City State Zip Code
 ERIE PA 16506-7014

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

Name of Employer Occupation
 Erie Insurance Group VP Com Und E Reg& Mdl Mkt Act

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 06 / 27 / 2016
Transaction ID : A2016-1212274

Amount of Each Receipt this Period
 75.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Erin E Siegrist

Mailing Address 2302 HUNTERS RIDGE DR

City State Zip Code
 ERIE PA 16510-6322

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

Name of Employer Occupation
 Erie Insurance Group Director Benefits

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 06 / 27 / 2016
Transaction ID : A2016-1212211

Amount of Each Receipt this Period
 60.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00

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 58 OF 85
	<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. Sherri A Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 6770 KREIDER RD
 City FAIRVIEW State PA Zip Code 16415-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 769.28

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684884
 Amount of Each Receipt this Period
 192.32
 Memo Item

B. Sherri A Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 6770 KREIDER RD
 City FAIRVIEW State PA Zip Code 16415-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 961.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909395
 Amount of Each Receipt this Period
 192.32
 Memo Item

C. Sherri A Silver
 Full Name (Last, First, Middle Initial)
 Mailing Address 6770 KREIDER RD
 City FAIRVIEW State PA Zip Code 16415-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-121237
 Amount of Each Receipt this Period
 288.48
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	673.12
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 59 OF 85
(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. 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 ▼ **648.48**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

Transaction ID : A2016-684857

Amount of Each Receipt this Period

187.62

 Memo Item

B. 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 ▼ **836.10**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2016

Transaction ID : A2016-909365

Amount of Each Receipt this Period

187.62

 Memo Item

C. 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 ▼ **1117.53**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-121207

Amount of Each Receipt this Period

281.43

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	656.67
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 60 OF 85
<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. Richard L Stover
Full Name (Last, First, Middle Initial)
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 Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 05 / 2016
Transaction ID : A2016-801986
Amount of Each Receipt this Period 250.00
 Memo Item

B. Joseph M Vahey
Full Name (Last, First, Middle Initial)
Mailing Address 7496 N SHORE DR
City ERIE State PA Zip Code 16511-1616
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Product Manager (Prsl)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684805
Amount of Each Receipt this Period 120.00
 Memo Item

C. Joseph M Vahey
Full Name (Last, First, Middle Initial)
Mailing Address 7496 N SHORE DR
City ERIE State PA Zip Code 16511-1616
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Product Manager (Prsl)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909310
Amount of Each Receipt this Period 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 490.00
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 61 OF 85
	<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. Joseph M Vahey
Full Name (Last, First, Middle Initial)
Mailing Address 7496 N SHORE DR
City ERIE State PA Zip Code 16511-1616
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Product Manager (Prsl)
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **780.00**

Date of Receipt **06 / 27 / 2016**
Transaction ID : A2016-1212152
Amount of Each Receipt this Period **180.00**
 Memo Item

B. 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 **800.00**

Date of Receipt **04 / 22 / 2016**
Transaction ID : A2016-684796
Amount of Each Receipt this Period **200.00**
 Memo Item

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 **1000.00**

Date of Receipt **05 / 24 / 2016**
Transaction ID : A2016-909302
Amount of Each Receipt this Period **200.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **580.00**
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 62 OF 85
	<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	

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. 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 ▼ 1300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212144

Amount of Each Receipt this Period
 300.00

Memo Item

B. James V Vrooman
Full Name (Last, First, Middle Initial)

Mailing Address 4240 ROXBURY RD

City ERIE State PA Zip Code 16506-3711

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

Name of Employer Erie Insurance Group Occupation VP Crisis Prevention & Mgmt

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
 04 / 22 / 2016
Transaction ID : A2016-684905

Amount of Each Receipt this Period
 100.00

Memo Item

C. James V Vrooman
Full Name (Last, First, Middle Initial)

Mailing Address 4240 ROXBURY RD

City ERIE State PA Zip Code 16506-3711

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

Name of Employer Erie Insurance Group Occupation VP Crisis Prevention & Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909416

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 63 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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. James V Vrooman
 Full Name (Last, First, Middle Initial)
 Mailing Address 4240 ROXBURY RD
 City State Zip Code
 ERIE PA 16506-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP Crisis Prevention & Mgmt
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212257
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Bradley S Weisenbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 2851 N BIRCH RUN
 City State Zip Code
 ERIE PA 16506-5057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir Products & Services FP&A
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212161
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. James J Witkowsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 4066 MAGNOLIA BLOSSOM DR
 City State Zip Code
 ERIE PA 16510-6650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Claims Refresh Analyst
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684867
 Amount of Each Receipt this Period
 72.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	297.00
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 64 OF 85
	<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 J Witkowsky
Full Name (Last, First, Middle Initial)

Mailing Address 4066 MAGNOLIA BLOSSOM DR

City ERIE	State PA	Zip Code 16510-6650
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Claims Refresh Analyst
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2016

Transaction ID : A2016-909378

Amount of Each Receipt this Period
72.00

Memo Item

B. James J Witkowsky
Full Name (Last, First, Middle Initial)

Mailing Address 4066 MAGNOLIA BLOSSOM DR

City ERIE	State PA	Zip Code 16510-6650
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Claims Refresh Analyst
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
396.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-1212220

Amount of Each Receipt this Period
108.00

Memo Item

C. Shane T Wohlrahe
Full Name (Last, First, Middle Initial)

Mailing Address 406 VERMONT AVE

City ERIE	State PA	Zip Code 16505-2336
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation Claims Refresh Analyst
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-1212268

Amount of Each Receipt this Period
47.76

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	227.76
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 85
	<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. Christy S Yousefnejad
 Full Name (Last, First, Middle Initial)
 Mailing Address 1022 W STERLINGTON PL
 City APEX State NC Zip Code 27502-8938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 22 / 2016
Transaction ID : A2016-684896
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Christy S Yousefnejad
 Full Name (Last, First, Middle Initial)
 Mailing Address 1022 W STERLINGTON PL
 City APEX State NC Zip Code 27502-8938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 24 / 2016
Transaction ID : A2016-909407
 Amount of Each Receipt this Period 80.00
 Memo Item

C. Christy S Yousefnejad
 Full Name (Last, First, Middle Initial)
 Mailing Address 1022 W STERLINGTON PL
 City APEX State NC Zip Code 27502-8938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 27 / 2016
Transaction ID : A2016-1212249
 Amount of Each Receipt this Period 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	280.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 66 OF 85
(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

Full Name (Last, First, Middle Initial)
A. 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 ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

Transaction ID : A2016-684880

Amount of Each Receipt this Period
200.00

Memo Item

Full Name (Last, First, Middle Initial)
B. 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 ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2016

Transaction ID : A2016-909391

Amount of Each Receipt this Period
200.00

Memo Item

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 ▼
1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : A2016-121233

Amount of Each Receipt this Period
300.00

Memo Item

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: (check only one)	PAGE 67 OF 85
	<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. Robert J Zehr
Full Name (Last, First, Middle Initial)

Mailing Address 13130 KLINE RD

City EDINBORO	State PA	Zip Code 16412-1730
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Enterprise Risk Management
--	---

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
 04 / 22 / 2016
Transaction ID : A2016-684847

Amount of Each Receipt this Period
 100.00

Memo Item

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

Mailing Address 13130 KLINE RD

City EDINBORO	State PA	Zip Code 16412-1730
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Enterprise Risk Management
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909353

Amount of Each Receipt this Period
 100.00

Memo Item

C. Robert J Zehr
Full Name (Last, First, Middle Initial)

Mailing Address 13130 KLINE RD

City EDINBORO	State PA	Zip Code 16412-1730
------------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP Enterprise Risk Management
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212195

Amount of Each Receipt this Period
 150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 68 OF 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Christopher J Zimmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 9262 HAMOT RD
 City WATERFORD State PA Zip Code 16441-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Field Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 398.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : A2016-684831
 Amount of Each Receipt this Period
 102.04
 Memo Item

B. Christopher J Zimmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 9262 HAMOT RD
 City WATERFORD State PA Zip Code 16441-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Field Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.48

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 24 / 2016
Transaction ID : A2016-909336
 Amount of Each Receipt this Period
 102.04
 Memo Item

C. Christopher J Zimmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 9262 HAMOT RD
 City WATERFORD State PA Zip Code 16441-2706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation SVP Field Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 653.54

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : A2016-1212178
 Amount of Each Receipt this Period
 153.06
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	357.14
TOTAL This Period (last page this line number only).....▶	33728.48

**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. Roskam for Congress Cmte

Mailing Address P.O. Box 713

City State Zip Code
Wheaton IL 60189

Purpose of Disbursement
Contribution

011

Candidate Name

Peter J Roskam

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : B604702

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tom MacArthur for Congress

Mailing Address PO Box 225

City State Zip Code
Colonia NJ 07067

Purpose of Disbursement
Contribution

011

Candidate Name

Tom MacArthur

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NJ District: 03

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : B604701

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Bill Shuster for Congress

Mailing Address PO Box 27

City State Zip Code
Hollidaysburg PA 16648

Purpose of Disbursement
Contribution

011

Candidate Name

William Shuster

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : B604703

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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 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. Team Ryan

Mailing Address 824 S Milledge Ave Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement
Contribution

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 11 / 2016

Transaction ID : B601247

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Duffy for Congress

Mailing Address PO Box 538

City Wausau State WI Zip Code 54402

Purpose of Disbursement
Contribution

011

Candidate Name

Sean Duffy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 07

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 07 / 2016

Transaction ID : B604708

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Glenn Grothman for Congress

Mailing Address P.O. Box 1215

City Fond Du Lac State WI Zip Code 54964

Purpose of Disbursement
Contribution

011

Candidate Name

Glenn Grothman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 06

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 09 / 2016

Transaction ID : B604891

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

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 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. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement
Contribution

011

Candidate Name

Jeb Hensarling

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 09 / 2016

Transaction ID : B593952

Amount of Each Disbursement this Period

1000.00

Memo Item
As disclosed in 2016 TX Pre-Primary Report.

Full Name (Last, First, Middle Initial)

B. Friends of Jeb Hensarling

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement
Contribution

011

Candidate Name

Jeb Hensarling

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2016

Transaction ID : B593953

Amount of Each Disbursement this Period

1000.00

Memo Item
Redesignation of above contribution for 2016 General election

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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 Y Y

Amount of Each Disbursement this Period

Memo Item

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

0.00

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

10000.00

**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. Cmte to Elect Brian Bosma

Mailing Address 9052 Nautical Watch Dr.

City Indianapolis State IN Zip Code 46236

Purpose of Disbursement
G-2016 State House 88 IN

011

Category/
Type

Candidate Name

Brian C. Bosma

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 88

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : B601055

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jared Carpenter for State Senate

Mailing Address 138 Legacy Dr.

City Berea State KY Zip Code 40403

Purpose of Disbursement
P-2018 State Senate 34 KY

011

Category/
Type

Candidate Name

Jared Carpenter

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: KY District: 34

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : B595009

Amount of Each Disbursement this Period

-500.00

Memo Item

Voided: Original check dated 02/19/16

Full Name (Last, First, Middle Initial)

C. Jeff Greer for State Representative

Mailing Address 2125 Hwy 79

City Brandenburg State KY Zip Code 40108

Purpose of Disbursement
P-2016 State House 27 KY

011

Category/
Type

Candidate Name

Jeff Greer

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District: 27

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : B595006

Amount of Each Disbursement this Period

-500.00

Memo Item

Voided: Original check dated 02/19/16

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

0.00

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. Bart Rowland for State Representative

Mailing Address PO Box 336

City State Zip Code
Tompkinsville KY 42167

Purpose of Disbursement
P-2016 State House 21 KY

011
Category/
Type

Candidate Name
Bart Rowland

Office Sought: House
 Senate
 President
State: KY District: 21

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016

Transaction ID : B595025

Amount of Each Disbursement this Period

-500.00

Memo Item
Voided: Original check dated 02/19/16

Full Name (Last, First, Middle Initial)

B. Jared Carpenter for State Senate

Mailing Address 138 Legacy Dr.

City State Zip Code
Berea KY 40403

Purpose of Disbursement
P-2018 State Senate 34 KY

011
Category/
Type

Candidate Name
Jared Carpenter

Office Sought: House
 Senate
 President
State: KY District: 34

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : B599733

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Jeff Greer for State Representative

Mailing Address 2125 Hwy 79

City State Zip Code
Brandenburg KY 40108

Purpose of Disbursement
P-2016 State House 27 KY

011
Category/
Type

Candidate Name
Jeff Greer

Office Sought: House
 Senate
 President
State: KY District: 27

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 22 / 2016

Transaction ID : B599732

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

500.00

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

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

FOR LINE NUMBER:
(check only one)

<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. Bart Rowland for State Representative

Mailing Address PO Box 336

City Tompkinsville State KY Zip Code 42167

Purpose of Disbursement
P-2016 State House 21 KY

011

Category/
Type

Candidate Name

Bart Rowland

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: KY District: 21

Date of Disbursement

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

Transaction ID : B599735

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of John C. Astle

Mailing Address 51 Fleet Street

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
O-2018 State Senate 30 MD

011

Category/
Type

Candidate Name

John C. Astle

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼
Election Cycle

State: MD District: 30

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	6		

Transaction ID : B601063

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Dereck Davis

Mailing Address 17 W. Courtland St. #210

City Bel Air State MD Zip Code 21014

Purpose of Disbursement
O-2018 State House 25 MD

011

Category/
Type

Candidate Name

Dereck E Davis

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼
Election Cycle

State: MD District: 25

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			1	0			2	0	1	6		

Transaction ID : B601072

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Memo Item

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

1	5	0	.	0	0
---	---	---	---	---	---

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

1	5	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 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 Brian Feldman

Mailing Address PO Box 34408

City State Zip Code
Bethesda MD 20827

Purpose of Disbursement
O-2018 State Senate 15 MD

011

Candidate Name

Brian Feldman

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 15

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601064

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Bill Frick

Mailing Address 11717 Greenlane Drive

City State Zip Code
Potomac MD 20854

Purpose of Disbursement
O-2018 State House 16 MD

011

Candidate Name

Bill Frick

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 16

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601060

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Sally Jameson

Mailing Address P.O. Box 333

City State Zip Code
Bryantown MD 20617

Purpose of Disbursement
O-2018 State House 28 MD

011

Candidate Name

Sally Young Jameson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 28

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601061

Amount of Each Disbursement this Period

500.00

Memo Item

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. Friends of Kathy Klausmeier

Mailing Address 4222 Soth Ave.

City Baltimore State MD Zip Code 21236

Purpose of Disbursement
O-2018 State Senate 08 MD

011

Candidate Name

Katherine Ann Klausmeier

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 08

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601065

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Benjamin Kramer

Mailing Address 49 Randolph Road

City Silver Spring State MD Zip Code 20904

Purpose of Disbursement
O-2018 State Delegate 19 MD

011

Candidate Name

Benjamin F Kramer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 19

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601062

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Supporters of Mac Middleton

Mailing Address PO Box 2502

City LaPlata State MD Zip Code 20646

Purpose of Disbursement
O-2018 State Senate 28 MD

011

Candidate Name

Thomas (Mac) Middleton

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District: 28

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601066

Amount of Each Disbursement this Period

500.00

Memo Item

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. Friends of Ed Reilly

Mailing Address P.O. Box 3803

City State Zip Code
Crofton MD 21114

Purpose of Disbursement
O-2018 State Senate 33 MD

Candidate Name

Ed Reilly

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) Election Cycle

State: MD District: 33

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601067

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Ashford

Mailing Address 2910 Collingwood Blvd

City State Zip Code
Toledo OH 43610

Purpose of Disbursement
G-2016 State House 44 OH

Candidate Name

Mike Ashford

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: OH District: 44

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601042

Amount of Each Disbursement this Period

300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Bacon

Mailing Address 5325 Ponderosa Drive

City State Zip Code
Columbus OH 43231

Purpose of Disbursement
P-2018 State Senate 3 OH

Candidate Name

Kevin Bacon

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: OH District: 03

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601043

Amount of Each Disbursement this Period

500.00

Memo Item

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

1050.00

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. Heather Bishoff for State Rep		Date of Disbursement MM / DD / YYYY 05 / 10 / 2016
Mailing Address 2902 Braden Way		Transaction ID : B601041
City Blacklick	State OH	
Zip Code 43004	Purpose of Disbursement G-2016 State House 20 OH	Amount of Each Disbursement this Period 500.00
Candidate Name Heather Bishoff	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: OH District: 20	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Hackett for Ohio		Date of Disbursement MM / DD / YYYY 05 / 10 / 2016
Mailing Address 2050 Palouse Drive		Transaction ID : B601040
City London	State OH	
Zip Code 43140	Purpose of Disbursement G-2016 State Senate 10 OH	Amount of Each Disbursement this Period 350.00
Candidate Name Bob Hackett	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: OH District: 10	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens for Hottinger		Date of Disbursement MM / DD / YYYY 05 / 10 / 2016
Mailing Address 386 Sabrecutt Dr.		Transaction ID : B601039
City Newark	State OH	
Zip Code 43055	Purpose of Disbursement P-2018 State Senate 31 OH	Amount of Each Disbursement this Period 500.00
Candidate Name Jay Hottinger	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: OH District: 31	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	1350.00
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. Cmte for Jim Hughes

Mailing Address 372 Birchwood Ln

City Westerville State OH Zip Code 43081

Purpose of Disbursement
G-2016 State House 24 OH

011

Candidate Name

James Hughes

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 24

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601054

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Hackett for Ohio

Mailing Address 2050 Palouse Drive

City London State OH Zip Code 43140

Purpose of Disbursement
G-2016 State Senate 10 OH

011

Candidate Name

Bob Hackett

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: OH District: 10

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : B604704

Amount of Each Disbursement this Period

650.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Re-elect Craig Fitzhugh

Mailing Address 135 South Alpine

City Ripley State TN Zip Code 38063

Purpose of Disbursement
P-2016 State House 82 TN

011

Candidate Name

Craig Fitzhugh

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 82

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604882

Amount of Each Disbursement this Period

350.00

Memo Item

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

1350.00

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. Todd Gardenhire Campaign Fund

Mailing Address PO Box 4506

City Chattanooga State TN Zip Code 37405

Purpose of Disbursement
P-2016 State Senate 10 TN

011

Category/
Type

Candidate Name

Todd Gardenhire

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 10

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604878

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jack Johnson for Senate

Mailing Address 330 Franklin Rd Ste 135A-178

City Brentwood State TN Zip Code 37027

Purpose of Disbursement
P-2018 State Senate 23 TN

011

Category/
Type

Candidate Name

Jack Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District: 23

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604883

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Committee to Elect Kelly Keisling

Mailing Address 1042 Cordell Hull Memorial Drive

City Byrdstown State TN Zip Code 38549

Purpose of Disbursement
P-2016 State House 38 TN

011

Category/
Type

Candidate Name

Kelly Keisling

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 38

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604877

Amount of Each Disbursement this Period

350.00

Memo Item

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

1050.00

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. Re-Elect Bill Ketron

Mailing Address 2510 Blanton's Pointe

City Murfreesboro State TN Zip Code 37129

Purpose of Disbursement
P-2018 State Senate 13 TN

011

Candidate Name

Bill Ketron

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: TN District: 13

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604887

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Stephen McManus for Rep.

Mailing Address 405 Riveredge Dr.

City Cordova State TN Zip Code 38018

Purpose of Disbursement
P-2016 State House 96 TN

011

Candidate Name

Stephen McManus

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 96

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604881

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Charles Sargent Campaign Fund

Mailing Address 214 War Memorial Bldg.

City Nashville State TN Zip Code 37243

Purpose of Disbursement
P-2016 State House 61 TN

011

Candidate Name

Charles M Sargent

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 61

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604885

Amount of Each Disbursement this Period

350.00

Memo Item

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

950.00

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. Jim Tracy for State Senate

Mailing Address P.O. Box 332166

City Murfreesboro State TN Zip Code 37133

Purpose of Disbursement
P-2016 State Senate 14 TN

011

Category/
Type

Candidate Name

Jim Tracy

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 14

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604880

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Committee to Elect Ron Travis

Mailing Address 1158 Market Street

City Dayton State TN Zip Code 37321

Purpose of Disbursement
P-2016 State House 31 TN

011

Category/
Type

Candidate Name

Ron Travis

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TN District: 31

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : B604875

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. House Republican Campaign Cmte

Mailing Address P.O. Box 1841

City Richmond State VA Zip Code 23218

Purpose of Disbursement
State Party Cmte

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼
Not Applicable

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601068

Amount of Each Disbursement this Period

3500.00

Memo Item

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

4200.00

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. Farrell for Delegate

Mailing Address 25 E. Main Street

City Richmond State VA Zip Code 23219

Purpose of Disbursement
P-2017 State House 56 VA

011

Category/
Type

Candidate Name

Peter Farrell

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: VA District: 56

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : B601069

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends of Jackson Miller

Mailing Address P.O. Box 10072

City Manassas State VA Zip Code 20178

Purpose of Disbursement
P-2017 State House 50 VA

011

Category/
Type

Candidate Name

Jackson H Miller

Office Sought: House
 Senate
 President

Disbursement For: 2017
 Primary General
 Other (specify) ▼

State: VA District: 50

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : B601070

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Scott Fitzgerald for Senate

Mailing Address N4692 Maple Road

City Juneau State WI Zip Code 53039

Purpose of Disbursement
O-2018 State Senate 13 WI

011

Category/
Type

Candidate Name

Scott Fitzgerald

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼
Election Cycle

State: WI District: 13

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : B601056

Amount of Each Disbursement this Period

500.00

Memo Item

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)
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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. Friends of Jordan

Mailing Address 511 Fairview Circle

City Waterford State WI Zip Code 53185

Purpose of Disbursement
O-2016 State House 83 WI

011

Candidate Name

Jordan Karweik

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 83

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601082

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Taxpayers for Nygren

Mailing Address P.O. Box 552

City Marinette State WI Zip Code 54143

Purpose of Disbursement
O-2016 State House 89 WI

011

Candidate Name

John Nygren

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 89

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601058

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Petersen-Republican for 40th Assembly

Mailing Address P.O. Box 227

City Waupaca State WI Zip Code 54981

Purpose of Disbursement
O-2016 State House 40 WI

011

Candidate Name

Kevin Petersen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: WI District: 40

Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601059

Amount of Each Disbursement this Period

500.00

Memo Item

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. Friends & Neighbors of Robin Vos

Mailing Address 960 Rock Ridge Rd.

City Burlington State WI Zip Code 53105

Purpose of Disbursement
O-2016 State House 63 WI

011

Candidate Name
Robin Vos

Category/
Type

Office Sought: House
 Senate
 President
State: WI District: 63

Disbursement For: 2016
 Primary General
 Other (specify) Election Cycle

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : B601057

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Bob Ashley Committee

Mailing Address P.O. Box 823

City Spencer State WV Zip Code 25276

Purpose of Disbursement
P-2016 State Senate 03 WV

011

Candidate Name
Bob Ashley

Category/
Type

Office Sought: House
 Senate
 President
State: WV District: 03

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2016

Transaction ID : B598616

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Kurcaba for House

Mailing Address P.O. Box 30

City Morgantown State WV Zip Code 26507

Purpose of Disbursement
P-2016 State House 51 WV

011

Candidate Name
Brian Kurcaba

Category/
Type

Office Sought: House
 Senate
 President
State: WV District: 51

Disbursement For: 2016
 Primary General
 Other (specify)

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : B595027

Amount of Each Disbursement this Period

-250.00

Memo Item

Voided: Original check dated 02/19/16

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

750.00

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

17450.00