

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2011"/> | <input type="text" value="82172.19"/> | <input type="text" value="82172.19"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="119177.71"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="31631.67"/> | <input type="text" value="77537.19"/> |
| (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="150809.38"/> | <input type="text" value="159709.38"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="18500.00"/> | <input type="text" value="27400.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="132309.38"/> | <input type="text" value="132309.38"/> |
| 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: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|---------------------------------------|---|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 28728.05 | 66714.27 |
| (ii) Unitemized | 2903.62 | 9419.02 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 31631.67 | 76133.29 |
| (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) | 31631.67 | 76133.29 |
| 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 | 1403.90 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total 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))..... ▶ | 31631.67 | 77537.19 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 31631.67 | 77537.19 |

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..... | 16000.00 | 22000.00 |
| 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 | 2500.00 | 5400.00 |
| 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)) .. | 18500.00 | 27400.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 18500.00 | 27400.00 |

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) | 31631.67 | 76133.29 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 31631.67 | 76133.29 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 34
(check only one)

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

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

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

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

Mailing Address 1203 Deering Bay Court

City State Zip Code
Gibsonia PA 15044

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 18 / 2011
Transaction ID : 1548720

Amount of Each Receipt this Period
750.00

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

Mailing Address 1308 Devils Reach Rd Ste 302

City State Zip Code
Woodbridge VA 22192

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

Name of Employer Occupation
Hallmark Insurance Group Inc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 13 / 2011
Transaction ID : 2106459

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. Glen Douglas Walton

Mailing Address 104 ROSS ST

City State Zip Code
ELKTON MD 21921-6114

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

Name of Employer Occupation
Erie Insurance Group Property Claims Reinspector

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
239.17

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39009102538

Amount of Each Receipt this Period
150.38

P/R Deduction (\$15.09 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.38

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 7 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

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

Mailing Address 141 E 37TH ST

City State Zip Code
ERIE PA 16504-1521

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

Name of Employer Occupation
Erie Insurance Group VP, Strategic Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39010242538

Amount of Each Receipt this Period
390.00

P/R Deduction (\$60.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. James P. Stoik

Mailing Address 7 NIAGARA PIER

City State Zip Code
ERIE PA 16507-2305

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

Name of Employer Occupation
Erie Insurance Group VP, Internal Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39010422538

Amount of Each Receipt this Period
130.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Dwayne A Gantz

Mailing Address 5191 JASON DR

City State Zip Code
ERIE PA 16506-6051

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

Name of Employer Occupation
Erie Insurance Group VP, FncI Reporting & Cost Admn

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39010612538

Amount of Each Receipt this Period
130.00

P/R Deduction (\$20.00 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 650.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 34 |
| | <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. Barbara R. Lincoln
Full Name (Last, First, Middle Initial)
Mailing Address 6692 CRANE RD
City EDINBORO State PA Zip Code 16412-3918
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Dir, Sales Plng Rptg & Tchnlgy
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39010862538
Amount of Each Receipt this Period 390.00
P/R Deduction (\$60.00 Bi-Weekly)

B. Sean D. Dugan
Full Name (Last, First, Middle Initial)
Mailing Address 4204 TRASK AVE
City ERIE State PA Zip Code 16508-3142
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Corporate Training & Dev
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 380.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39010942538
Amount of Each Receipt this Period 260.00
P/R Deduction (\$40.00 Bi-Weekly)

C. Jacqueline M. Tirpak
Full Name (Last, First, Middle Initial)
Mailing Address 6448 HEARTHSTONE LN
City ERIE State PA Zip Code 16505-2614
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Insurance Curriculum-Proj Mgr
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39015762538
Amount of Each Receipt this Period 156.00
P/R Deduction (\$24.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 806.00
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 34 |
| | <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. Jonathan G. Alfred
Full Name (Last, First, Middle Initial)

Mailing Address 514 PAHLHURST PLZ

City PARKERSBURG State WV Zip Code 26101-7624

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

Name of Employer Erie Insurance Group Occupation Sr Investigator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.12

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39017162538

Amount of Each Receipt this Period
105.56

P/R Deduction (\$16.24 Bi-Weekly)

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

Mailing Address 4852 APPALOOSA CT

City ERIE State PA Zip Code 16506-6612

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

Name of Employer Erie Insurance Group Occupation Project Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 602.49

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39017792538

Amount of Each Receipt this Period
302.12

P/R Deduction (\$46.48 Bi-Weekly)

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

Mailing Address 120 MADELINE DR

City EDINBORO State PA Zip Code 16412-2764

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

Name of Employer Erie Insurance Group Occupation Dir, Retirement Planning & Adm

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.55

Date of Receipt
12 / 31 / 2011
Transaction ID : PR39018102538

Amount of Each Receipt this Period
165.75

P/R Deduction (\$25.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 573.43

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

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

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

FOR LINE NUMBER: PAGE 10 OF 34
(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. Karen A. Skarupski

Mailing Address 456 KAHKWA BLVD

City State Zip Code
ERIE PA 16505-2313

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

Name of Employer Occupation
Erie Insurance Group Sr Counsel-Employment & Prvcy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39018152538

Amount of Each Receipt this Period
390.00

P/R Deduction (\$60.00 Bi-Weekly)

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

Mailing Address 5452 MYSTIC RDG

City State Zip Code
ERIE PA 16506-7036

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

Name of Employer Occupation
Erie Insurance Group VP & Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39018202538

Amount of Each Receipt this Period
520.00

P/R Deduction (\$80.00 Bi-Weekly)

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

Mailing Address 7065 SANDY TRL

City State Zip Code
ERIE PA 16510-5963

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

Name of Employer Occupation
Erie Insurance Group VP & Product Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1140.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39018452538

Amount of Each Receipt this Period
780.00

P/R Deduction (\$120.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **1690.00**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 34
(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. Christine L. Lucas

Mailing Address 2152 LORWOOD DR

| | | |
|--------------|-------------|------------------------|
| City ERIE | State PA | Zip Code 16510-6324 |
|--------------|-------------|------------------------|

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

| | |
|--|------------------------------------|
| Name of Employer Erie Insurance Group | Occupation VP & Product Manager |
|--|------------------------------------|

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 |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39018482538

Amount of Each Receipt this Period

| |
|--------|
| 195.00 |
|--------|

P/R Deduction (\$30.00 Bi-Weekly)

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

Mailing Address 3500 DUNN VALLEY RD

| | | |
|--------------|-------------|------------------------|
| City ERIE | State PA | Zip Code 16509-4310 |
|--------------|-------------|------------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1410.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39018532538

Amount of Each Receipt this Period

| |
|--------|
| 845.00 |
|--------|

P/R Deduction (\$130.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Damien C Josefiak

Mailing Address 11114 BOTHWELL ST

| | | |
|------------------|-------------|------------------------|
| City RICHMOND | State VA | Zip Code 23233-2261 |
|------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer Erie Insurance Group | Occupation Field Govt Relations Spct |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39018892538

Amount of Each Receipt this Period

| |
|--------|
| 156.00 |
|--------|

P/R Deduction (\$24.00 Bi-Weekly)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1196.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 12 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Sue A. Pfadt | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39019122538 |
| Mailing Address 5811 SOUTHLAND DR | | Amount of Each Receipt this Period 260.00 |
| 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 | | P/R Deduction (\$40.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 520.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Bridget H. Schoenig | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39019132538 |
| Mailing Address 5122 ROBINHOOD LN | | Amount of Each Receipt this Period 325.00 |
| City ERIE | State PA | Zip Code 16509-2561 |
| FEC ID number of contributing federal political committee. C | Name of Employer Erie Insurance Group | |
| Occupation Counsel II | | P/R Deduction (\$50.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 525.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. David R Glod | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39020502538 |
| Mailing Address 4902 REESE RD | | Amount of Each Receipt this Period 325.00 |
| City ERIE | State PA | Zip Code 16510-4304 |
| FEC ID number of contributing federal political committee. C | Name of Employer Erie Insurance Group | |
| Occupation VP, Fixed Income Portfolio Mgr | | P/R Deduction (\$50.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 650.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 910.00 |
| 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 13 OF 34 |
| | <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. Patrick J. McMichael | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39020662538 |
| Mailing Address 1211 AMBER GLADES LN | | Amount of Each Receipt this Period 250.25 |
| City KNOXVILLE | State TN | Zip Code 37922-9352 |
| FEC ID number of contributing federal political committee. C | | P/R Deduction (\$38.50 Bi-Weekly) |
| Name of Employer Erie Insurance Group | Occupation VP & Claims Manager I | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.50 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Melvin L. Hirst | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39020752538 |
| Mailing Address 6000 AVONIA RD APT 47 | | Amount of Each Receipt this Period 520.00 |
| City FAIRVIEW | State PA | Zip Code 16415-2471 |
| FEC ID number of contributing federal political committee. C | | P/R Deduction (\$80.00 Bi-Weekly) |
| Name of Employer Erie Insurance Group | Occupation VP, Sales Promotion & Agcy Rel | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 800.00 | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Michael A. Bova | | Date of Receipt 12 / 31 / 2011 Transaction ID : PR39020792538 |
| Mailing Address 5913 BEACON HILL LN | | Amount of Each Receipt this Period 325.00 |
| City ERIE | State PA | Zip Code 16509-3307 |
| FEC ID number of contributing federal political committee. C | | P/R Deduction (\$50.00 Bi-Weekly) |
| Name of Employer Erie Insurance Group | Occupation VP, Commercial Underwriting | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 590.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1095.25 |
| 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: | PAGE 14 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Kathy L. Zonna
Full Name (Last, First, Middle Initial)

Mailing Address 5135 ROSLINDALE AVE

City State Zip Code
ERIE PA 16509-2447

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

Name of Employer Occupation
Erie Insurance Group External Investment Anl III

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.43

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39021302538

Amount of Each Receipt this Period
149.89

P/R Deduction (\$23.06 Bi-Weekly)

B. Peggy J. Proba
Full Name (Last, First, Middle Initial)

Mailing Address 6055 BOXWOOD DR

City State Zip Code
FAIRVIEW PA 16415-3211

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

Name of Employer Occupation
Erie Insurance Group SSV--Product Configuration

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
12 / 31 / 2011

Transaction ID : PR39021662538

Amount of Each Receipt this Period
130.00

P/R Deduction (\$20.00 Bi-Weekly)

c. Cheryl A. Hirst
Full Name (Last, First, Middle Initial)

Mailing Address 6009 COBBLESTONE DR

City State Zip Code
ERIE PA 16509-3517

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

Name of Employer Occupation
Erie Insurance Group Sr Organizational Effec Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.70

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39021732538

Amount of Each Receipt this Period
260.00

P/R Deduction (\$40.00 Bi-Weekly)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 539.89 |
| 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 34 |
| | <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. Larry J. Hasbrouck
 Full Name (Last, First, Middle Initial)
 Mailing Address 11351 CARUTHERS WAY
 City GLEN ALLEN State VA Zip Code 23059-1835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation Liability Claims Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.03

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39022322538
 Amount of Each Receipt this Period 127.79
 P/R Deduction (\$19.66 Bi-Weekly)

B. David L Bauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 1963 ROCK CRK
 City AKRON State OH Zip Code 44333-4753
 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 ▼ 850.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39023112538
 Amount of Each Receipt this Period 650.00
 P/R Deduction (\$100.00 Bi-Weekly)

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
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39023222538
 Amount of Each Receipt this Period 1300.00
 P/R Deduction (\$200.00 Bi-Weekly)

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2077.79 |
| 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 16 OF 34
(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. 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 ▼
 369.41

Date of Receipt
 12 / 31 / 2011
Transaction ID : PR39023422538

Amount of Each Receipt this Period
 282.49

P/R Deduction (\$43.46 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Neil S. Smith

Mailing Address 180 TIMBER RIDGE RD

City State Zip Code
 GREENEVILLE TN 37743-3503

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

Name of Employer Occupation
 Erie Insurance Group Sr District Sales Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 212.95

Date of Receipt
 12 / 31 / 2011
Transaction ID : PR39023762538

Amount of Each Receipt this Period
 106.99

P/R Deduction (\$16.46 Bi-Weekly)

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

Mailing Address 9262 HAMOT RD

City State Zip Code
 WATERFORD PA 16441-2738

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

Name of Employer Occupation
 Erie Insurance Group SVP, Field Claims

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1118.75

Date of Receipt
 12 / 31 / 2011
Transaction ID : PR39024242538

Amount of Each Receipt this Period
 563.55

P/R Deduction (\$86.70 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 953.03

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

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 17 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

Full Name (Last, First, Middle Initial)
A. Mary V Johnston

Mailing Address 10775 COTTAGE HILL LN

| | | |
|-----------------|-------------|------------------------|
| City CHARDON | State OH | Zip Code 44024-9775 |
|-----------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer Erie Insurance Group | Occupation VP, Business Apps & Support |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **528.01**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39024252538

Amount of Each Receipt this Period
361.27

P/R Deduction (\$55.58 Bi-Weekly)

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

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 ▼ **650.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39024332538

Amount of Each Receipt this Period
325.00

P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Lisa M. Beery

Mailing Address 5316 DEERFIELD DR

| | | |
|------------------|-------------|------------------------|
| City FAIRVIEW | State PA | Zip Code 16415-2320 |
|------------------|-------------|------------------------|

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

| | |
|--|---------------------------------------|
| Name of Employer Erie Insurance Group | Occupation SSV--Absence Management |
|--|---------------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **427.45**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12 | / | 31 | / | 2011 |

Transaction ID : PR39024432538

Amount of Each Receipt this Period
243.10

P/R Deduction (\$37.40 Bi-Weekly)

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 929.37 |
| 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 34 |
| <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. 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, Corporate Marketing Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 483.34

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39024492538
Amount of Each Receipt this Period 483.34
P/R Deduction (\$74.36 Bi-Weekly)

B. Peter C. Maercklein
Full Name (Last, First, Middle Initial)
Mailing Address 6527 BARNESDALE PATH
City CENTREVILLE State VA Zip Code 20120-3945
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Lead District Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39024512538
Amount of Each Receipt this Period 130.00
P/R Deduction (\$20.00 Bi-Weekly)

C. Robert J. Stevenson
Full Name (Last, First, Middle Initial)
Mailing Address 51100 OAK LINED DR
City GRANGER State IN Zip Code 46530-7531
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Lead District Sales Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.00

Date of Receipt 12 / 31 / 2011
Transaction ID : PR39024532538
Amount of Each Receipt this Period 130.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 743.34
TOTAL This Period (last page this line number only)..... ▶

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Theresa M. Gamble | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 1049 W 24TH ST | | Transaction ID : PR39025052538 |
| City ERIE | State PA | Zip Code 16502-2424 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 195.00 |
| Name of Employer Erie Insurance Group | Occupation Dir, Compliance Operations | P/R Deduction (\$30.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 390.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Jeffrey W. Brinling | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 5603 STONERIDGE DR | | Transaction ID : PR39025092538 |
| City FAIRVIEW | State PA | Zip Code 16415-2243 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 637.00 |
| Name of Employer Erie Insurance Group | Occupation SVP, Corporate Trng & Dvlp | P/R Deduction (\$98.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1211.00 | |

| | | |
|---|-------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Christina M. Marsh | | Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 2805 ASH ST APT 2 | | Transaction ID : PR39025162538 |
| City ERIE | State PA | Zip Code 16504-1238 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 581.49 |
| Name of Employer Erie Insurance Group | Occupation SVP, Human Resources | P/R Deduction (\$89.46 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1150.44 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1413.49 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 20 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

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

Mailing Address 5500 STONERIDGE DR

City 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 ▼
1125.78

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR39025172538

Amount of Each Receipt this Period
676.00

P/R Deduction (\$104.00 Bi-Weekly)

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

Mailing Address 6418 FIELD VALLEY LN

City State Zip Code
FAIRVIEW PA 16415-1725

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

Name of Employer Occupation
Erie Insurance Group SVP, Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1040.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR39025182538

Amount of Each Receipt this Period
520.00

P/R Deduction (\$80.00 Bi-Weekly)

C. Eric D. Root
Full Name (Last, First, Middle Initial)

Mailing Address 6775 MANCHESTER BEACH RD

City State Zip Code
FAIRVIEW PA 16415-1636

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

Name of Employer Occupation
Erie Insurance Group SVP, Commercial Lines

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1288.44

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR39025212538

Amount of Each Receipt this Period
647.27

P/R Deduction (\$99.58 Bi-Weekly)

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1843.27 |
| 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 21 OF 34 |
| | <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 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 ▼
2220.70

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR3902522538

Amount of Each Receipt this Period
1124.50

P/R Deduction (\$173.00 Bi-Weekly)

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

Mailing Address 4896 THOROUGHBRED LOOP

City State Zip Code
ERIE PA 16506-6608

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

Name of Employer Occupation
Erie Insurance Group EVP, Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1780.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR39025262538

Amount of Each Receipt this Period
1001.00

P/R Deduction (\$154.00 Bi-Weekly)

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

Mailing Address 6146 SCIOTO CT

City State Zip Code
FAIRVIEW PA 16415-3276

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

Name of Employer Occupation
Erie Insurance Group SVP, Regional Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011
Transaction ID : PR39025342538

Amount of Each Receipt this Period
325.00

P/R Deduction (\$50.00 Bi-Weekly)

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2450.50 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

FOR LINE NUMBER: PAGE 22 OF 34
(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. Michael S. Zavasky

Mailing Address 4304 PRESTWICK DR

City State Zip Code
ERIE PA 16506-3660

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

Name of Employer Occupation
Erie Insurance Group EVP, Insurance Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4004.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39025412538

Amount of Each Receipt this Period
2002.00

P/R Deduction (\$308.00 Bi-Weekly)

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

Mailing Address 4891 EQUESTRIAN DR

City State Zip Code
ERIE PA 16506-6617

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

Name of Employer Occupation
Erie Insurance Group EVP & Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39025422538

Amount of Each Receipt this Period
2000.05

P/R Deduction (\$307.70 Bi-Weekly)

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

Mailing Address 5804 WIND CHIME LN

City State Zip Code
FAIRVIEW PA 16415-3249

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

Name of Employer Occupation
Erie Insurance Group EVP, Sales & Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3311.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39025432538

Amount of Each Receipt this Period
2002.00

P/R Deduction (\$308.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 6004.05

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

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

| | | |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 34 |
| | <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

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 ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39025532538

Amount of Each Receipt this Period
300.00

P/R Deduction (\$50.00 Bi-Weekly)

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

Mailing Address **23840 STATE ROAD 213 N**

City **NOBLESVILLE** State **IN** Zip Code **46060-9229**

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 ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2011

Transaction ID : PR39025542538

Amount of Each Receipt this Period
325.00

P/R Deduction (\$50.00 Bi-Weekly)

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

Mailing Address **6515 HONEY LN**

City **ERIE** State **PA** Zip Code **16509-4879**

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

Name of Employer **Erie Insurance Group** Occupation **SVP, Corporate Claims**

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
12 / 31 / 2011

Transaction ID : PR39025552538

Amount of Each Receipt this Period
650.00

P/R Deduction (\$100.00 Bi-Weekly)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1275.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 24 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Erin E Siegrist | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 2302 HUNTERS RIDGE DR | | Transaction ID : PR39025612538 |
| City ERIE | State PA | Zip Code 16510-6322 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 260.00 |
| Name of Employer Erie Insurance Group | Occupation Sr Human Resources Generalist | P/R Deduction (\$40.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) B. Kristopher C. Marrion | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address 113 BRIARBURN LN | | Transaction ID : PR39025652538 |
| City HOLLY SPRINGS | State NC | Zip Code 27540-7733 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 137.54 |
| Name of Employer Erie Insurance Group | Occupation VP & Branch Manager III | P/R Deduction (\$21.16 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 241.76 | |

| | | |
|---|---------------------------------------|--|
| Full Name (Last, First, Middle Initial) C. Jack W. Wood | | Date of Receipt M M / D D / Y Y Y Y Y 12 / 31 / 2011 |
| Mailing Address PO BOX 37 | | Transaction ID : PR39025662538 |
| City ALLENTOWN | State NY | Zip Code 14707-0037 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 230.00 |
| Name of Employer Erie Insurance Group | Occupation VP & Branch Manager III | P/R Deduction (\$40.00 Bi-Weekly) |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 490.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 627.54 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|------------------------------|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 25 OF 34 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 15 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Joseph M. Wilkerson
Full Name (Last, First, Middle Initial)

Mailing Address 2541 PISCES CT

City DUBLIN State OH Zip Code 43016-9039

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025672538

Amount of Each Receipt this Period
 138.06

P/R Deduction (\$21.24 Bi-Weekly)

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

Mailing Address 34 SHILOH ST

City MORTON State IL Zip Code 61550-2387

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025682538

Amount of Each Receipt this Period
 139.10

P/R Deduction (\$21.40 Bi-Weekly)

C. Daniel J. Zdunski
Full Name (Last, First, Middle Initial)

Mailing Address 1009 CRIMSON CLOVER DR

City BRENTWOOD State TN Zip Code 37027-1805

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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025702538

Amount of Each Receipt this Period
 130.00

P/R Deduction (\$20.00 Bi-Weekly)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 407.16 |
| 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 34 |
| <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 K. Banks
Full Name (Last, First, Middle Initial)

Mailing Address 5123 FLINTLOCK LN

City ROANOKE State VA Zip Code 24018-8711

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025722538

Amount of Each Receipt this Period
 520.00

P/R Deduction (\$80.00 Bi-Weekly)

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 ▼ 500.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025742538

Amount of Each Receipt this Period
 250.25

P/R Deduction (\$38.50 Bi-Weekly)

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 ▼ 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : PR39025872538

Amount of Each Receipt this Period
 130.00

P/R Deduction (\$20.00 Bi-Weekly)

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 900.25 |
| 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: PAGE 27 OF 34
(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. Reginald L. Hewett

Mailing Address 405 MAYMOUNT DR

City State Zip Code
DURHAM NC 27703-3662

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

Name of Employer Occupation
Erie Insurance Group Sr Claims Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
219.49

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39027072538

Amount of Each Receipt this Period
110.37

P/R Deduction (\$16.98 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Jerry W. Wiley

Mailing Address 1511 AINSWORTH ST

City State Zip Code
GARNER NC 27529-4401

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

Name of Employer Occupation
Erie Insurance Group Sr Material Damage Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39027252538

Amount of Each Receipt this Period
104.00

P/R Deduction (\$16.00 Bi-Weekly)

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

Mailing Address 3 DICK DR

City State Zip Code
MERRIMACK NH 03054-3058

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

Name of Employer Occupation
Erie Insurance Group SSV--Senior Project Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.70

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011
Transaction ID : PR39029492538

Amount of Each Receipt this Period
277.94

P/R Deduction (\$42.76 Bi-Weekly)

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 492.31 |
| TOTAL This Period (last page this line number only).....▶ | 28728.05 |

**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. Bob Casey For Senate Inc

Mailing Address 30 South 15th Street Suite 400

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement

011

Candidate Name

Sen. Robert Casey Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07 | | 22 | | 2011 |

Transaction ID : 1553315

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. Mike Kelly For Congress

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement

011

Candidate Name

Rep. Mike Kelly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 03

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09 | | 12 | | 2011 |

Transaction ID : 1553343

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Full Name (Last, First, Middle Initial)

C. Donnelly For Indiana

Mailing Address 1050 17th St Nw Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement

011

Candidate Name

Rep. Joseph Donnelly

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IN District: 02

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10 | | 12 | | 2011 |

Transaction ID : 1609537

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

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

| |
|---------|
| 2500.00 |
|---------|

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

| |
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| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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. Fitzpatrick For Congress

Mailing Address PO Box 185

City Langhorne State PA Zip Code 19047

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Michael Fitzpatrick

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : 1609601

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Congressman Tim Holden

Mailing Address 18 North Second Street, Box 37

City Saint Clair State PA Zip Code 17970

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Tim Holden

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 17

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : 1609602

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. InsurePAC

Mailing Address 127 South Payton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : 1609605

Amount of Each Disbursement this Period

2500.00

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

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

4500.00

**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 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. Hoyer For Congress

Mailing Address 700 13th Street, Nw
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Steny Hoyer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 12 | | 2011 |

Transaction ID : 1609606

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

B. Jim Gerlach For Congress Committee

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. James Gerlach

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | | 12 | | 2011 |

Transaction ID : 1609607

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

C. Bob Casey For Senate Inc

Mailing Address 30 South 15th Street Suite 400

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Void - Bob Casey For Senate Inc

011

Category/
Type

Candidate Name

Sen. Robert Casey Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08 | | 03 | | 2011 |

Transaction ID : 2106426

Amount of Each Disbursement this Period

| |
|----------|
| -1000.00 |
|----------|

Void - Bob Casey For Senate Inc

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

| |
|---------|
| 1000.00 |
|---------|

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

| |
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| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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. Bob Casey For Senate Inc

Mailing Address 30 South 15th Street Suite 400

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Robert Casey Jr.

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 12 / 2011

Transaction ID : 2106427

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

5000.00

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

16000.00

**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 |

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

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

Full Name (Last, First, Middle Initial)

A. Friends of Greg Habeeb

Mailing Address P.O. Box 882

City Salem State VA Zip Code 24153

Purpose of Disbursement
Gregory Habeeb, STATE HOUSE 8th VA

011

Candidate Name

VA Del. Gregory Habeeb

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

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

Transaction ID : 1553336

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 7 | 5 | 0 | 0 | 0 |
|---|---|---|---|---|

Gregory Habeeb, STATE HOUSE 8th VA

Full Name (Last, First, Middle Initial)

B. Friends of Jackson Miller

Mailing Address P.O. Box 10072

City Manassas State VA Zip Code 20108

Purpose of Disbursement
Jackson Miller, STATE HOUSE 50th VA

011

Candidate Name

VA Del. Jackson Miller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 50

Date of Disbursement

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

Transaction ID : 1553337

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 7 | 5 | 0 | 0 | 0 |
|---|---|---|---|---|

Jackson Miller, STATE HOUSE 50th VA

Full Name (Last, First, Middle Initial)

C. Alexander for House of Delegates

Mailing Address 7246 Granby Street

City Norfolk State VA Zip Code 23505

Purpose of Disbursement
Kenny Alexander, STATE HOUSE 89th VA

011

Candidate Name

VA Del. Kenny Alexander

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District: 89

Date of Disbursement

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

Transaction ID : 1553339

Amount of Each Disbursement this Period

| | | | | |
|---|---|---|---|---|
| 7 | 5 | 0 | 0 | 0 |
|---|---|---|---|---|

Kenny Alexander, STATE HOUSE 89th VA

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

| | | | | |
|---|---|---|---|---|
| 2 | 2 | 5 | 0 | 0 |
|---|---|---|---|---|

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

| | | | | |
|---|---|---|---|---|
| 7 | 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 Stinziano

Mailing Address 550 East Walnut Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Michael Stinziano, STATE HOUSE 25th OH

Candidate Name
OH Rep. Michael Stinziano

Office Sought: House Senate President
Disbursement For: 2012 Primary General Other (specify) ▼
State: OH District: 25

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
09 / 21 / 2011

Transaction ID : 1553347
Amount of Each Disbursement this Period
250.00

Michael Stinziano, STATE HOUSE 25th OH

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Category/
Type

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Category/
Type

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

250.00
2500.00