

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Erie Indemnity Company PAC-Federal

ADDRESS (number and street) 100 Erie Insurance Place

Check if different than previously reported. (ACC) Erie PA 16530

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00153577

3. IS THIS REPORT NEW (N) OR AMENDED (A) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/>	Feb 20 (M2)	<input type="checkbox"/>	May 20 (M5)	<input type="checkbox"/>	Aug 20 (M8)	<input type="checkbox"/>	Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/>	Mar 20 (M3)	<input type="checkbox"/>	Jun 20 (M6)	<input type="checkbox"/>	Sep 20 (M9)	<input type="checkbox"/>	Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/>	Apr 20 (M4)	<input type="checkbox"/>	Jul 20 (M7)	<input type="checkbox"/>	Oct 20 (M10)	<input type="checkbox"/>	Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/>	Primary (12P)	<input type="checkbox"/>	General (12G)	<input type="checkbox"/>	Runoff (12R)
<input type="checkbox"/>	Convention (12C)	<input type="checkbox"/>	Special (12S)		

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/>	General (30G)	<input type="checkbox"/>	Runoff (30R)	<input type="checkbox"/>	Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gary D. Veshecco

Signature of Treasurer Gary D. Veshecco [Electronically Filed] Date 05 / 13 / 2014

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="149874.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="149874.48"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="25468.18"/>	<input type="text" value="25468.18"/>
(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="175342.66"/>	<input type="text" value="175342.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11150.00"/>	<input type="text" value="11150.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="164192.66"/>	<input type="text" value="164192.66"/>
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).....	18841.36	18841.36
(ii) Unitemized	6626.82	6626.82
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25468.18	25468.18
(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)	25468.18	25468.18
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))..... ▶	25468.18	25468.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	25468.18	25468.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	7000.00	7000.00
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	4150.00	4150.00
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)) ..	11150.00	11150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11150.00	11150.00

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)	25468.18	25468.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25468.18	25468.18
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

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

Form/Schedule: F3XA
Transaction ID :

Amended report ID # C00153577 per your correspondence dated 5/2/2014

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: PAGE 7 OF 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. William Matrogran

Mailing Address 4726 PARKWOOD DR

City State Zip Code
ERIE PA 16510-6320

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

Name of Employer Occupation
Erie Insurance Group VP, Claims Learning & Dvlp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : 5883993

Amount of Each Receipt this Period
445.00

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

Mailing Address 7379 SAGE XING

City State Zip Code
FAIRVIEW PA 16415-3311

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
 03 / 13 / 2014
Transaction ID : 5883995

Amount of Each Receipt this Period
500.00

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

Mailing Address 6300 LAKE SHORE DR

City State Zip Code
ERIE PA 16505-1015

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 13 / 2014
Transaction ID : 5883996

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5945.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 21
(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. James P. Stoik
 Full Name (Last, First, Middle Initial)
 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 ▼
 259.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39010428330
 Amount of Each Receipt this Period
 259.76
 P/R Deduction (\$88.00 Monthly)

B. Robert W McNutt
 Full Name (Last, First, Middle Initial)
 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 ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39018208330
 Amount of Each Receipt this Period
 360.00
 P/R Deduction (\$120.00 Monthly)

C. Joseph M. Vahey
 Full Name (Last, First, Middle Initial)
 Mailing Address 7065 SANDY TRL
 City State Zip Code
 ERIE PA 16510-5963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP & Product Manager (Prsl)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39018458330
 Amount of Each Receipt this Period
 360.00
 P/R Deduction (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 979.76
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 9 OF 21
<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. Sheryl A Rucker
Full Name (Last, First, Middle Initial)

Mailing Address 3500 DUNN VALLEY RD

City ERIE	State PA	Zip Code 16509-4310
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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 ▼
457.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : PR39018538330

Amount of Each Receipt this Period
457.34

P/R Deduction (\$155.46 Monthly)

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

Mailing Address 4902 REESE RD

City ERIE	State PA	Zip Code 16510-4304
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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 ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : PR39020508330

Amount of Each Receipt this Period
270.00

P/R Deduction (\$90.00 Monthly)

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

Mailing Address 5820 FOREST XING

City ERIE	State PA	Zip Code 16506-7004
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FEC ID number of contributing federal political committee. **C**

Name of Employer Erie Insurance Group	Occupation VP, Sales Promotion & Agcy Rel
--	--

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
03	/	31	/	2014

Transaction ID : PR39020758330

Amount of Each Receipt this Period
240.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	967.34
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 10 OF 21
(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. Diane M Stamatelatos
Full Name (Last, First, Middle Initial)
Mailing Address 12147 JAMES JACK LN
City CHARLOTTE State NC Zip Code 28277-3752
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Strategic Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39021588330
Amount of Each Receipt this Period 210.00
P/R Deduction (\$70.00 Monthly)

B. David L Bauer
Full Name (Last, First, Middle Initial)
Mailing Address 2081 MAJESTY CT
City AKRON State OH Zip Code 44333-1282
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Field Life Sales Mgmt
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39023118330
Amount of Each Receipt this Period 300.00
P/R Deduction (\$100.00 Monthly)

C. Gary D. Veshecco
Full Name (Last, First, Middle Initial)
Mailing Address 845 W TOWNHALL RD
City WATERFORD State PA Zip Code 16441-4131
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SVP, Law & Privacy Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39023228330
Amount of Each Receipt this Period 600.00
P/R Deduction (\$200.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
	<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. 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 ▼ 280.56

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39024248330
 Amount of Each Receipt this Period 280.56
 P/R Deduction (\$95.52 Monthly)

B. 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 ▼ 225.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39024498330
 Amount of Each Receipt this Period 225.30
 P/R Deduction (\$76.58 Monthly)

C. Shawn C Cummings
 Full Name (Last, First, Middle Initial)
 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 ▼ 279.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39024508330
 Amount of Each Receipt this Period 279.60
 P/R Deduction (\$94.44 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	785.46
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 21
<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. Jeffrey W. Brinling
Full Name (Last, First, Middle Initial)

Mailing Address 5603 STONERIDGE DR

City FAIRVIEW	State PA	Zip Code 16415-2243
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : PR39025098330

Amount of Each Receipt this Period
294.00

P/R Deduction (\$98.00 Monthly)

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

Mailing Address 3710 VOLKMAN RD

City ERIE	State PA	Zip Code 16506-4759
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
923.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : PR39025158330

Amount of Each Receipt this Period
923.10

P/R Deduction (\$307.70 Monthly)

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

Mailing Address 245 GATEWAY DR

City FAIRVIEW	State PA	Zip Code 16415-1639
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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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : PR39025168330

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1517.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 21
	<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. 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 ▼
 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39025178330
 Amount of Each Receipt this Period
 312.00
 P/R Deduction (\$104.00 Monthly)

B. Lorianne Feltz
 Full Name (Last, First, Middle Initial)
 Mailing Address 6418 FIELD VALLEY LN
 City 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39025188330
 Amount of Each Receipt this Period
 250.00
 P/R Deduction (\$100.00 Monthly)

C. Gregory J. Gutting
 Full Name (Last, First, Middle Initial)
 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 ▼
 585.32

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39025228330
 Amount of Each Receipt this Period
 585.32
 P/R Deduction (\$200.24 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1147.32
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 21
	<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. Ann H Zaprazny
 Full Name (Last, First, Middle Initial)
 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 ▼ 300.00

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39025378330
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$100.00 Monthly)

B. Marcia A Dall
 Full Name (Last, First, Middle Initial)
 Mailing Address 4891 EQUESTRIAN DR
 City ERIE State PA Zip Code 16506-6617
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation EVP & Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 923.10

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39025428330
 Amount of Each Receipt this Period 923.10
 P/R Deduction (\$307.70 Monthly)

C. 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 ▼ 924.00

Date of Receipt 03 / 31 / 2014
Transaction ID : PR39025438330
 Amount of Each Receipt this Period 924.00
 P/R Deduction (\$308.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	2147.10
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 21
(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. Patrick J. Burns
 Mailing Address 8391 SUN LAKE DR
 City State Zip Code
 GIRARD PA 16417-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP & Regional Claims Officer
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39025548330
 Amount of Each Receipt this Period
 420.00
 P/R Deduction (\$140.00 Monthly)

Full Name (Last, First, Middle Initial)
B. Matthew W. Myers
 Mailing Address 6515 HONEY LN
 City State Zip Code
 ERIE PA 16509-4879
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP, Corporate Claims
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2014
Transaction ID : PR39025558330
 Amount of Each Receipt this Period
 450.00
 P/R Deduction (\$150.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Mark K. Banks
 Mailing Address 5123 FLINTLOCK LN
 City State Zip Code
 ROANOKE VA 24018-8711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP & Branch Manager IV
 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
 03 / 31 / 2014
Transaction ID : PR39025728330
 Amount of Each Receipt this Period
 240.00
 P/R Deduction (\$80.00 Monthly)

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 21
	<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. Cheryl L. Mitchell

Mailing Address 4315 ALISON AVE

City State Zip Code
ERIE PA 16506-6165

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

Name of Employer Occupation
Erie Insurance Group VP, Workplace Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.00

Date of Receipt
03 / 31 / 2014
Transaction ID : PR39026498330

Amount of Each Receipt this Period
216.00

P/R Deduction (\$72.00 Monthly)

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

Mailing Address 3693 VOLKMAN RD

City State Zip Code
ERIE PA 16506-4767

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
03 / 31 / 2014
Transaction ID : PR42910808330

Amount of Each Receipt this Period
300.00

P/R Deduction (\$100.00 Monthly)

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

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 ▼
429.86

Date of Receipt
03 / 31 / 2014
Transaction ID : PR43125488330

Amount of Each Receipt this Period
429.86

P/R Deduction (\$144.34 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	945.86
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 21
	<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. Bradley G Postema

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 ▼
674.88

Date of Receipt
03 / 31 / 2014
Transaction ID : PR44411598330

Amount of Each Receipt this Period
674.88

P/R Deduction (\$230.88 Monthly)

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

Mailing Address 1324 S SHORE DR APT 707

City State Zip Code
ERIE PA 16505-2540

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
923.10

Date of Receipt
03 / 31 / 2014
Transaction ID : PR49164868330

Amount of Each Receipt this Period
923.10

P/R Deduction (\$307.70 Monthly)

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

Mailing Address 6045 FOSSILWOOD CT

City State Zip Code
ERIE PA 16506-7013

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

Name of Employer Occupation
Erie Insurance Group SVP, Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.44

Date of Receipt
03 / 31 / 2014
Transaction ID : PR56879928330

Amount of Each Receipt this Period
588.44

P/R Deduction (\$203.84 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	2186.42
TOTAL This Period (last page this line number only).....▶	18841.36

**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 Pat Toomey

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement

011

Candidate Name

Sen. Pat Toomey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	1	4

Transaction ID : 5742764

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Tim Murphy For Congress

Mailing Address P.O. Box 24551

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement

011

Candidate Name

Rep. Tim Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 18

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	4

Transaction ID : 5789817

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Scott Garrett For Congress

Mailing Address P.O. Box 905

City Newton State NJ Zip Code 07860

Purpose of Disbursement

011

Candidate Name

Rep. Scott Garrett

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

Transaction ID : 5921908

Amount of Each Disbursement this Period

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

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

7	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

7	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. OIIPAC

Mailing Address 172 East State Street
Suite 201

City Columbus State OH Zip Code 43215-4321

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
02 / 17 / 2014

Transaction ID : 5789818

Amount of Each Disbursement this Period
150.00

Full Name (Last, First, Middle Initial)

B. Friends of Faber

Mailing Address 7706 State Route 703

City Celina State OH Zip Code 45822

Purpose of Disbursement
, STATE HOUSE OH

Candidate Name

Office Sought: House Senate President
State: OH District: 00

Disbursement For: 2014 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 10 / 2014

Transaction ID : 5884009

Amount of Each Disbursement this Period
1000.00

, STATE HOUSE OH

Full Name (Last, First, Middle Initial)

C. Friends of Bob White

Mailing Address P.O. Box 1176

City Mt Vernon State IL Zip Code 62864

Purpose of Disbursement
, STATE HOUSE IL

Candidate Name

Office Sought: House Senate President
State: IL District: 00

Disbursement For: 2014 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2014

Transaction ID : 5884158

Amount of Each Disbursement this Period
500.00

, STATE HOUSE IL

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

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

1650.00

**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. Committee to Elect Bruce Wissel

Mailing Address 2015 Reeveston Road

City Richmond State IN Zip Code 47374

Purpose of Disbursement
, STATE SENATE

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 5884168

Amount of Each Disbursement this Period

, STATE SENATE

Full Name (Last, First, Middle Initial)

B. Committee to Elect Manning

Mailing Address P.O. Box 425

City Avon State OH Zip Code 44011

Purpose of Disbursement
Gayle Manning, STATE SENATE 13th OH

Candidate Name

OH Sen. Gayle Manning

011
Category/
Type

Office Sought: House
 Senate
 President
State: OH District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 5884388

Amount of Each Disbursement this Period

Gayle Manning, STATE SENATE 13th OH

Full Name (Last, First, Middle Initial)

C. Friends of Bill Beagle

Mailing Address 115 South Tippecanoe Drive

City Tipp City State OH Zip Code 45371

Purpose of Disbursement
Bill Beagle, STATE SENATE 5th OH

Candidate Name

OH Sen. Bill Beagle

011
Category/
Type

Office Sought: House
 Senate
 President
State: OH District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 5884400

Amount of Each Disbursement this Period

Bill Beagle, STATE SENATE 5th OH

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends of Wes Retherford

Mailing Address 350 Ashley Brook Drive

City Hamilton State OH Zip Code 45013

Purpose of Disbursement
Wes Retherford, STATE HOUSE 51st OH

Candidate Name
OH Rep. Wes Retherford

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: OH District: 51

Date of Disbursement

/ /

Transaction ID : 5884407

Amount of Each Disbursement this Period

Wes Retherford, STATE HOUSE 51st OH

Category/
Type

Full Name (Last, First, Middle Initial)

B. Friends of Darren Vogt for Senate

Mailing Address 2030 Forest Glade

City Fort Wayne State IN Zip Code 46845

Purpose of Disbursement
, STATE SENATE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : 5884418

Amount of Each Disbursement this Period

, STATE SENATE

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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