

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)

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: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S). Election on [MM/DD/YYYY] in the State of []

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S). Election on [MM/DD/YYYY] in the State of []

5. Covering Period 11 / 29 / 2016 through 12 / 31 / 2016

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 Veshecco, Gary, D.,

Signature of Treasurer Veshecco, Gary, D., [Electronically Filed] Date 01 / 24 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Table with 10 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Erie Indemnity Company PAC - Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="89098.88"/>	<input type="text" value="89098.88"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="60600.61"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8521.75"/>	<input type="text" value="126273.48"/>
(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="69122.36"/>	<input type="text" value="215372.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="-1500.00"/>	<input type="text" value="144750.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="70622.36"/>	<input type="text" value="70622.36"/>
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).....	8229.11	103800.26
(ii) Unitemized	292.64	22473.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8521.75	126273.48
(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)	8521.75	126273.48
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)).....▶	8521.75	126273.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8521.75	126273.48

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.....	-2000.00	83000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	500.00	61750.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	-1500.00	144750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-1500.00	144750.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	8521.75	126273.48
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8521.75	126273.48
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 42
(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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Altzman, Gregory, , ,

Mailing Address 4159 DOMINION DR

City ERIE	State PA	Zip Code 16510-3267
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Eval & Measurement Leader
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 384.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : A2016-2463538

Amount of Each Receipt this Period
 32.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Badon, Shane, , ,

Mailing Address 6399 KILLOE RD

City BALDWINSVILLE	State NY	Zip Code 13027-9073
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP & Branch Manager III
---	--

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 / 22 / 2016

Transaction ID : A2016-2463664

Amount of Each Receipt this Period
 20.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Bahn, James, W, ,

Mailing Address 314 SHAWNEE DR

City ERIE	State PA	Zip Code 16505-2432
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Claims Refresh Program Lead
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 960.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : A2016-2463551

Amount of Each Receipt this Period
 80.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	132.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 42
	<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. Banks, Mark, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) 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 / 22 / 2016
Transaction ID : A2016-2463639
 Amount of Each Receipt this Period
 80.00
 Memo Item

B. Barnett, Daniel, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2675 CHELSIE DR
 City ERIE State PA Zip Code 16509-4682
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SSV--P/C Actuarial
 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 / 22 / 2016
Transaction ID : A2016-2463572
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Bauer, David, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP Field Life Sales Mgmt
 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 / 22 / 2016
Transaction ID : A2016-2463601
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 42
(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. Bednar, David, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8019 W LAKE RD
 City FAIRVIEW State PA Zip Code 16415-1303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Executive Support
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 795.76

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463544
 Amount of Each Receipt this Period
 61.60
 Memo Item

B. Bloom, Jon, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 740 RIDGEVIEW DR
 City ERIE State PA Zip Code 16505-1059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir EPMO Performance Tracking
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1068.78

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463585
 Amount of Each Receipt this Period
 93.00
 Memo Item

C. Bolash, Brian, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6215 BRANDY RUN
 City FAIRVIEW State PA Zip Code 16415-3307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Asst Secy & Sr Counsel
 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 / 22 / 2016
Transaction ID : A2016-2463638
 Amount of Each Receipt this Period
 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 174.60
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 9 OF 42
(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. Boldt, Douglas, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 238 CONNECTICUT DR
 City ERIE State PA Zip Code 16505-2212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Service Level Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.92

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463661
 Amount of Each Receipt this Period 20.76
 Memo Item

B. Brinling, Jeffrey, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5603 STONERIDGE DR
 City FAIRVIEW State PA Zip Code 16415-2243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Corporate Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463533
 Amount of Each Receipt this Period 196.00
 Memo Item

C. Burns, Patrick, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8391 SUN LAKE DR
 City GIRARD State PA Zip Code 16417-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Corporate Claims Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1820.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463605
 Amount of Each Receipt this Period 140.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 356.76
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: PAGE 10 OF 42
(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. Cogan, Raymond, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6743 BURNSIDE LN
 City DUBLIN State OH Zip Code 43016-8015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Branch Manager IV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 388.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463563
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Corso, Bradley, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3381 ANCHORAGE LN
 City HILLIARD State OH Zip Code 43026-7819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Field Govt Relations Spt
 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 / 22 / 2016
Transaction ID : A2016-2463633
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Cummings, Shawn, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) Dir Strategic Agency Invstmt
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1289.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463527
 Amount of Each Receipt this Period 99.46
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 149.46
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 11 OF 42
	<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. DaBreo, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6223 WELKER DR
 City INDIANAPOLIS State IN Zip Code 46236-6303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Branch Manager IV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463536
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Deno, Joseph, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5900 JESSUP RD
 City CINCINNATI State OH Zip Code 45247-5826
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Property Adjuster II
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 209.28

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463596
 Amount of Each Receipt this Period 16.16
 Memo Item

C. Dombrowski, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463553
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	86.16
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 12 OF 42
	<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. Dorio, Brian, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 344 E 5TH ST
 City ERIE State PA Zip Code 16507-1608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Project Manager II (IT)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463654
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Dugan, Sean, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP Recruiting & Comm Outreach
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463554
 Amount of Each Receipt this Period
 36.00
 Memo Item

C. Eastwood, Bradley, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 RIDGEVIEW DR
 City ERIE State PA Zip Code 16505-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Actuarial & Chief Actuary
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 789.88

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463657
 Amount of Each Receipt this Period
 60.76
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	196.76
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 13 OF 42
	<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. Estes, Sandra, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11204 PHILLIPSVILLE RD
 City WATTSBURG State PA Zip Code 16442-1614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir Program Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463555
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Fechner III, Ruben, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6045 FOSSILWOOD CT
 City ERIE State PA Zip Code 16506-7013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2821.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463658
 Amount of Each Receipt this Period
 218.08
 Memo Item

C. Felong Pietrusinski, Kathleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4316 TROON AVE
 City ERIE State PA Zip Code 16506-3656
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Strategic Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 381.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463562
 Amount of Each Receipt this Period
 29.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	297.54
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: (check only one)	PAGE 14 OF 42
	<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. Feltz, Lorianne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6418 FIELD VALLEY LN
 City FAIRVIEW State PA Zip Code 16415-1725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Customer Service
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463542
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Filipski, Michael, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4436 W 28TH ST
 City ERIE State PA Zip Code 16506-1455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SSV--Premium Audit
 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 / 22 / 2016
Transaction ID : A2016-2463564
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Fitzgerald, Douglas, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP & Branch Manager IV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 980.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463634
 Amount of Each Receipt this Period
 78.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	298.50
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 15 OF 42
	(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. Fletcher, Charles, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 181 FREEDOM DR

City PARKERSBURG	State WV	Zip Code 26101-8505
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP & Branch Manager IV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1138.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463583

Amount of Each Receipt this Period
87.44

Memo Item

B. Gamble, Theresa, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1049 W 24TH ST

City ERIE	State PA	Zip Code 16502-2424
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Dir Compliance Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
620.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463546

Amount of Each Receipt this Period
50.00

Memo Item

C. Gheres, William, D, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 (for Individual) Erie Insurance Group	Occupation (for Individual) Dir Retirement Planning & Adm
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
357.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463556

Amount of Each Receipt this Period
27.56

Memo Item

SUBTOTAL of Receipts This Page (optional).....	165.00
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 42
	<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. Glod, David, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4902 REESE RD
 City ERIE State PA Zip Code 16510-4304
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Sr Portfolio Mgr Fxd Inc
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2050.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463603
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Gutting, Gregory, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 SYBIL DR
 City ERIE State PA Zip Code 16505-2151
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Controller
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4068.78

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463526
 Amount of Each Receipt this Period 326.92
 Memo Item

C. Harvey, James, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 BEECH AVE
 City ERIE State PA Zip Code 16508-3114
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Sr Talent Management Cons
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 641.10

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463613
 Amount of Each Receipt this Period 49.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	476.42
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 42
	<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. Hasbrouck, Larry, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4110 GROVE AVE
 City RICHMOND State VA Zip Code 23221-1906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Liability Claims Supervisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 269.74

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463642
 Amount of Each Receipt this Period 20.82
 Memo Item

B. Heintz, Leo, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6175 BRANDY RUN
 City FAIRVIEW State PA Zip Code 16415-3305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Product Manager (Cmrl)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463574
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Hermann, Danielle, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7335 APPLETON CT
 City FAIRVIEW State PA Zip Code 16415-3301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir Strategic Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 327.46

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463627
 Amount of Each Receipt this Period 25.30
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	86.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 42
	<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. Herr Jr., William, N, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 TANAGER DR
 City ERIE State PA Zip Code 16506-1156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Corporate Actuarial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1908.10

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463650
 Amount of Each Receipt this Period
 147.22
 Memo Item

B. Hesidence, Patrick, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2400 GLORY DR
 City WATERFORD State PA Zip Code 16441-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Billing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 433.60

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463617
 Amount of Each Receipt this Period
 33.48
 Memo Item

C. Hewett, Reginald, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 405 MAYMOUNT DR
 City DURHAM State NC Zip Code 27703-3662
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Sr Claims Supervisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 259.76

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463543
 Amount of Each Receipt this Period
 20.04
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.74
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 42
(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. Hirst, Melvin, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 FOREST XING
 City ERIE State PA Zip Code 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Sales Promotion & Agcy Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463531
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Holmes, Derek, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 DALE DR
 City ERIE State PA Zip Code 16511-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Life Product Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463584
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Holmes, Rebekah, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 451 DALE DR
 City ERIE State PA Zip Code 16511-2201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Life Product Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463570
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
	<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. Holmgren, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 162 E 35TH ST
 City ERIE State PA Zip Code 16504-1514
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463537
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Ingram III, Robert, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 S SHORE DR APT 707
 City ERIE State PA Zip Code 16505-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) EVP & Chief Information Ofcr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.10

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463655
 Amount of Each Receipt this Period 307.70
 Memo Item

C. Josefiak, Damien, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) Field Govt Relations Spct
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463619
 Amount of Each Receipt this Period 44.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	391.70
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 42
	<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. Kaercher, Kimberly, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5087 RIDGEDALE DR
 City ERIE State PA Zip Code 16506-6113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir Program Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 211.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463582
 Amount of Each Receipt this Period
 16.38
 Memo Item

B. Kennedy, Keith, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 971 DUTCH RD
 City FAIRVIEW State PA Zip Code 16415-1628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Information Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463648
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. Kraus Phillips, Karen, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP Strategic Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1012.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463575
 Amount of Each Receipt this Period
 78.12
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	294.50
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 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Lucas, Christine, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2152 LORWOOD DR

City ERIE	State PA	Zip Code 16510-6324
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FEC ID number of contributing federal political committee. **C**

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

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	/	22	/	2016

Transaction ID : A2016-2463548

Amount of Each Receipt this Period
30.00

Memo Item

B. MacArthur, Andrea, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4419 W 38TH ST

City ERIE	State PA	Zip Code 16506-3722
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP Learning & Development
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
313.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463628

Amount of Each Receipt this Period
26.26

Memo Item

C. Mack, Debra, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3560 KANE HILL RD

City ERIE	State PA	Zip Code 16510-4962
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Dir Sales & Agy Bsn Prcs/Plng
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1112.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463612

Amount of Each Receipt this Period
86.54

Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.80
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 42
(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. Maercklein, Peter, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) Sr District Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463643
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Maher, Phil, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7170 PINEHILL RD
 City PAINESVILLE State OH Zip Code 44077-9304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Commercial Liab Claims Spct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 214.20

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463581
 Amount of Each Receipt this Period 16.60
 Memo Item

C. Marrion, Kristopher, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 113 BRIARBURN LN
 City HOLLY SPRINGS State NC Zip Code 27540-7733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Branch Manager IV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 379.78

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463594
 Amount of Each Receipt this Period 29.42
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 66.02
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 42
(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. Marsh, Christina, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 GATEWAY DR
 City FAIRVIEW State PA Zip Code 16415-1639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463559
 Amount of Each Receipt this Period
 180.00
 Memo Item

B. Masi, Deborah, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3012 MADEIRA DR
 City ERIE State PA Zip Code 16506-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Commercial Underwriting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 749.52

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463529
 Amount of Each Receipt this Period
 58.00
 Memo Item

C. McLaughlin, Sean, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4870 WATSON RD
 City ERIE State PA Zip Code 16505-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) EVP Secy & Gen Counsel
 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 / 22 / 2016
Transaction ID : A2016-2463660
 Amount of Each Receipt this Period
 308.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 546.00
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 25 OF 42
(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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. McMahon, Heather, , ,

Mailing Address 535 E WATERFORD DR APT 7313

City HOMESTEAD	State PA	Zip Code 15120-5035
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Sr Claims Supervisor
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463593

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. McNutt, Robert, W, ,

Mailing Address 4892 N WAYSIDE DR

City ERIE	State PA	Zip Code 16505-1358
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP & Treasurer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463616

Amount of Each Receipt this Period
240.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Mitchell, Cheryl, L, ,

Mailing Address 4315 ALISON AVE

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

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP Workplace Services
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
936.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463637

Amount of Each Receipt this Period
72.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	362.00
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 26 OF 42
(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. Musselman, Kristine, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13412 E 186TH ST
 City NOBLESVILLE State IN Zip Code 46060-9685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Claims Manager II
 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 / 22 / 2016
Transaction ID : A2016-2463632
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Myers, Matthew, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) SVP & Claims Ref Prgm Sponsor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463604
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Nealon III, James, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4044 SHADYBROOK DR
 City ERIE State PA Zip Code 16506-4740
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Senior Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1816.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463615
 Amount of Each Receipt this Period
 140.36
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 310.36
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
	<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. NeCastro, Timothy, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6146 SCIOTO CT
 City FAIRVIEW State PA Zip Code 16415-3276
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Regional Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463535
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. O'Connell, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3541 JOSEPH DR
 City ERIE State PA Zip Code 16506-6033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Project Manager I
 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 / 22 / 2016
Transaction ID : A2016-2463621
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. Page, Gregory, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP & Regional Claims Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463623
 Amount of Each Receipt this Period
 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 28 OF 42
(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. Payne, Krista, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7032 MONROE RD

City BOONSBORO	State MD	Zip Code 21713-2612
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Sr Claims Supervisor
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463635

Amount of Each Receipt this Period
16.00

Memo Item

B. Peterson, Troy, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1324 S SHORE DR APT 509

City ERIE	State PA	Zip Code 16505-2539
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) VP Customer Care Operations
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463649

Amount of Each Receipt this Period
50.00

Memo Item

C. Pfadt, Sue, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5811 SOUTHLAND DR

City ERIE	State PA	Zip Code 16509-7817
--------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Counsel II
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2016

Transaction ID : A2016-2463577

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	106.00
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 29 OF 42
<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. Plazony, Michael, A, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5500 STONERIDGE DR

City FAIRVIEW	State PA	Zip Code 16415-2240
------------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) SVP Life
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		22		2016

Transaction ID : A2016-2463611

Amount of Each Receipt this Period
208.00

Memo Item

B. Postema, Bradley, G, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5701 DOBLER RD

City GIRARD	State PA	Zip Code 16417-8768
----------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) SVP & Chief Investment Officer
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3139.16

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		22		2016

Transaction ID : A2016-2463651

Amount of Each Receipt this Period
242.56

Memo Item

C. Powell, Alison, B, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1112 REBARAH MOOR DR

City WILLOW SPRING	State NC	Zip Code 27592-7688
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Property Claims Supervisor
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.80

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		22		2016

Transaction ID : A2016-2463571

Amount of Each Receipt this Period
16.72

Memo Item

SUBTOTAL of Receipts This Page (optional).....	467.28
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 42
	<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. Power, Mary, I, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4962 SIR HUE DR
 City ERIE State PA Zip Code 16506-3969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP EPMO Change Mgmt Ctr of Ex
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1168.18

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463545
 Amount of Each Receipt this Period 97.54
 Memo Item

B. Proba, Peggy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6055 BOXWOOD DR
 City FAIRVIEW State PA Zip Code 16415-3211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SSV--Product Configuration
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463530
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Putnam, Andrew, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1722 GRIST MILL DR
 City NORTH EAST State PA Zip Code 16428-2940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) IT Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.52

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463578
 Amount of Each Receipt this Period 57.88
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.42
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 42
(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. Reichert, Kim, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 FOREST XING
 City ERIE State PA Zip Code 16506-7004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SSV--Recruiting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463614
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Reinhardt, Douglas, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 157 CHANCELLOR DR
 City CHAMBERSBURG State PA Zip Code 17201-3902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Claims Refresh Program Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463532
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Rioux, David, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2410 GLORY DR
 City WATERFORD State PA Zip Code 16441-5404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Corporate Security
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463566
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 32 OF 42
	<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. Rogers, Belinda, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 658 W 6TH ST
 City ERIE State PA Zip Code 16507-1173
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Counsel I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 592.72

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463647
 Amount of Each Receipt this Period 45.80
 Memo Item

B. Rucker, Sheryl, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) Senior Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2153.74

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463592
 Amount of Each Receipt this Period 166.54
 Memo Item

C. Rugare, Karen, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6945 HONEY LN
 City ERIE State PA Zip Code 16509-4889
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Strategic Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463626
 Amount of Each Receipt this Period 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	332.34
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: (check only one)	PAGE 33 OF 42
	<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. Schoenig, Bridget, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5122 ROBINHOOD LN
 City ERIE State PA Zip Code 16509-2561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Senior Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463587
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Siegrist, Erin, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2302 HUNTERS RIDGE DR
 City ERIE State PA Zip Code 16510-6322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Director Benefits
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463600
 Amount of Each Receipt this Period 40.00
 Memo Item

C. Silver, Sherri, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6770 KREIDER RD
 City FAIRVIEW State PA Zip Code 16415-2623
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) SVP Strategic Marketing
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.16

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463624
 Amount of Each Receipt this Period 192.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	332.32
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: PAGE 34 OF 42
(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. Smith, Neil, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 TIMBER RIDGE RD
 City GREENEVILLE State TN Zip Code 37743-3503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Sr District Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 236.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463641
 Amount of Each Receipt this Period
 18.22
 Memo Item

B. Stoik, James, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 NIAGARA PIER
 City ERIE State PA Zip Code 16507-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2337.06

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463599
 Amount of Each Receipt this Period
 187.62
 Memo Item

C. Tesore, Kathy, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8740 PEPPER RD
 City FAIRVIEW State PA Zip Code 16415-2917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Portfolio Mgr External Invest
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 383.84

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463631
 Amount of Each Receipt this Period
 29.68
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 235.52
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 35 OF 42
(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. Thelin, Stephen, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3733 CHAPEL HILL DR
 City ERIE State PA Zip Code 16506-4704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Senior Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463565
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Tirpak, Jacqueline, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 256.42

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463534
 Amount of Each Receipt this Period
 22.04
 Memo Item

C. Vahey, Joseph, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7496 N SHORE DR
 City ERIE State PA Zip Code 16511-1616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP & Product Manager (Prsl)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1505.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463549
 Amount of Each Receipt this Period
 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 107.04
TOTAL This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 36 OF 42
(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. Veshecco, Gary, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) SVP Law & Privacy Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463541
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Vrooman, James, V, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4240 ROXBURY RD
 City ERIE State PA Zip Code 16506-3711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Crisis Prevention & Mgmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463644
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Walton, Glen, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 ROSS ST
 City ELKTON State MD Zip Code 21921-6114
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Property Claims Reinspector
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 288.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463595
 Amount of Each Receipt this Period
 17.85
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 317.85
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 42
<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. Weisenbach, Bradley, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2851 N BIRCH RUN
 City ERIE State PA Zip Code 16506-5057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir Products & Services FP&A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463557
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Wieser, Gregory, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4644 STATE ST
 City ERIE State PA Zip Code 16509-3666
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Dir Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.70

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463591
 Amount of Each Receipt this Period 23.74
 Memo Item

C. Wiley, Jerry, W, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 246 MEDIATE DR
 City RALEIGH State NC Zip Code 27603-1994
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Sr Material Damage Supervisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463598
 Amount of Each Receipt this Period 16.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	89.74
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 38 OF 42
(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 of Individual (Last, First, Middle Initial) or Full Organization Name
A. Wilkerson, Joseph, M, ,

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 (for Individual) Erie Insurance Group Occupation (for Individual) VP Field Cmrl Sales Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 339.16

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : A2016-2463579

Amount of Each Receipt this Period
 26.28

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Witkowsky, James, J, ,

Mailing Address 4066 MAGNOLIA BLOSSOM DR

City ERIE State PA Zip Code 16510-6650

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

Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Claims Refresh Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 864.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : A2016-2463608

Amount of Each Receipt this Period
 72.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Wohlrabe, Shane, T, ,

Mailing Address 406 VERMONT AVE

City ERIE State PA Zip Code 16505-2336

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

Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) Claims Refresh Analyst

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 412.08

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : A2016-2463656

Amount of Each Receipt this Period
 31.84

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.12

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 42
	<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. Yousefnejad, Christy, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463636
 Amount of Each Receipt this Period 80.00
 Memo Item

B. Zaprazny, Ann, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) SVP Regional Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2450.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463620
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Zdunski, Daniel, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) VP & Branch Manager IV
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 22 / 2016
Transaction ID : A2016-2463539
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 42
(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. Zehr, Robert, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13130 KLINE RD
 City EDINBORO State PA Zip Code 16412-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Erie Insurance Group Occupation (for Individual) VP Enterprise Risk Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463589
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Zimmer, Christopher, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) Erie Insurance Group Occupation (for Individual) SVP Field Claims
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1316.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016
Transaction ID : A2016-2463573
 Amount of Each Receipt this Period
 102.04
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	202.04
TOTAL This Period (last page this line number only).....▶	8229.11

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 42
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 29
<input type="checkbox"/> 27	<input type="checkbox"/> 30b	

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

A. Citizens for Prosperity in America Today PAC

Full Name (Last, First, Middle Initial)
Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: District:

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

Category/Type: 011

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C00491654
Transaction ID : B622131

Amount of Each Disbursement this Period: -2000.00

Memo Item 08/12/16

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify)

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Category/Type

Date of Disbursement

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	-2000.00
TOTAL This Period (last page this line number only).....▶	-2000.00

**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"/> 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 Jeff Waldstreicher			Date of Disbursement MM / DD / YYYY 12 / 19 / 2016		
Mailing Address 1010 Hull Street Suite 202					
City Baltimore		State MD	Zip Code 21230		
Purpose of Disbursement P-2018 State House 18 MD				Category/ Type 011	
Candidate Name Waldstreicher, Jeff, D, ,					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MD District: 18		FEC Identification Number C [] Transaction ID : B636956 Amount of Each Disbursement this Period [] 500.00 <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) B.			Date of Disbursement MM / DD / YYYY		
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement				Category/ Type	
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item			

Full Name (Last, First, Middle Initial) C.			Date of Disbursement MM / DD / YYYY		
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement				Category/ Type	
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		FEC Identification Number C [] Amount of Each Disbursement this Period [] <input type="checkbox"/> Memo Item			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 500.00
TOTAL This Period (last page this line number only).....▶	[] 500.00