

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="149874.48"/>	<input type="text" value="149874.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="47093.16"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13464.19"/>	<input type="text" value="89082.87"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="60557.35"/>	<input type="text" value="238957.35"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="178400.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="60557.35"/>	<input type="text" value="60557.35"/>
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).....	12600.15	75324.16
(ii) Unitemized	864.04	13758.71
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13464.19	89082.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13464.19	89082.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	13464.19	89082.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	13464.19	89082.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	96250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	-500.00	82150.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	178400.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	178400.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13464.19	89082.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13464.19	89082.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Glen Douglas Walton
Full Name (Last, First, Middle Initial)
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 Erie Insurance Group Occupation Property Claims Reinspector
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 272.35

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390091011468
Amount of Each Receipt this Period 47.91
P/R Deduction (\$17.19 Monthly)

B. Brian W. Bolash
Full Name (Last, First, Middle Initial)
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 Erie Insurance Group Occupation Asst Secy & Sr Counsel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 389.26

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390092811468
Amount of Each Receipt this Period 40.00
P/R Deduction (\$20.00 Monthly)

C. Karen A. Rugare
Full Name (Last, First, Middle Initial)
Mailing Address 6945 HONEY LN
City ERIE State PA Zip Code 16509-4889
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP, Strategic Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 690.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390102411468
Amount of Each Receipt this Period 120.00
P/R Deduction (\$60.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 207.91
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 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Danielle M. Hermann
Full Name (Last, First, Middle Initial)

Mailing Address 7335 APPLETON CT

City State Zip Code
FAIRVIEW PA 16415-3301

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

Name of Employer Occupation
Erie Insurance Group Dir, Strategic Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
271.61

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390102511468

Amount of Each Receipt this Period
47.48

P/R Deduction (\$23.74 Monthly)

B. Gregory A. Wieser
Full Name (Last, First, Middle Initial)

Mailing Address 4644 STATE ST

City State Zip Code
ERIE PA 16509-3666

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

Name of Employer Occupation
Erie Insurance Group Dir, Strategic Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
261.11

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390102611468

Amount of Each Receipt this Period
45.64

P/R Deduction (\$22.82 Monthly)

C. Kathleen Felong Pietrusinski
Full Name (Last, First, Middle Initial)

Mailing Address 4316 TROON AVE

City State Zip Code
ERIE PA 16506-3656

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

Name of Employer Occupation
Erie Insurance Group VP, Strategic Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.86

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390102711468

Amount of Each Receipt this Period
52.72

P/R Deduction (\$26.36 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.84

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

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

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

FOR LINE NUMBER: PAGE 8 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 7 NIAGARA PIER

City State Zip Code
 ERIE PA 16507-2305

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

Name of Employer Occupation
 Erie Insurance Group VP, Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1007.76

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390104211468

Amount of Each Receipt this Period
 176.00

P/R Deduction (\$88.00 Monthly)

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

Mailing Address 4204 TRASK AVE

City State Zip Code
 ERIE PA 16508-3142

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

Name of Employer Occupation
 Erie Insurance Group VP, Recruiting & Comm Outreach

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 414.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390109411468

Amount of Each Receipt this Period
 72.00

P/R Deduction (\$36.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Daniel S. Barnett

Mailing Address 2675 CHELSIE DR

City State Zip Code
 ERIE PA 16509-4682

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

Name of Employer Occupation
 Erie Insurance Group SSV--P/C Actuarial

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390170911468

Amount of Each Receipt this Period
 40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 288.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. William D. Gheres
Full Name (Last, First, Middle Initial)

Mailing Address 120 MADELINE DR

City EDINBORO State PA Zip Code 16412-2764

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **308.09**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390181011468

Amount of Each Receipt this Period **53.72**

P/R Deduction (\$26.86 Monthly)

B. Andrew G. Putnam
Full Name (Last, First, Middle Initial)

Mailing Address 1722 GRIST MILL DR

City NORTH EAST State PA Zip Code 16428-2940

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

Name of Employer Erie Insurance Group Occupation IT Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.71**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390181111468

Amount of Each Receipt this Period **110.76**

P/R Deduction (\$55.38 Monthly)

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

Mailing Address 4892 N WAYSIDE DR

City ERIE State PA Zip Code 16505-1358

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

Name of Employer Erie Insurance Group Occupation VP & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1380.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390182011468

Amount of Each Receipt this Period **240.00**

P/R Deduction (\$120.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	404.48
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Joseph M. Vahey
Full Name (Last, First, Middle Initial)
Mailing Address 7496 N SHORE DR
City ERIE State PA Zip Code 16511-1616
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Product Manager (Prsl)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1380.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390184511468
Amount of Each Receipt this Period 240.00
P/R Deduction (\$120.00 Monthly)

B. Christine L. Lucas
Full Name (Last, First, Middle Initial)
Mailing Address 2152 LORWOOD DR
City ERIE State PA Zip Code 16510-6324
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation VP & Product Manager (Cmrl)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 345.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390184811468
Amount of Each Receipt this Period 60.00
P/R Deduction (\$30.00 Monthly)

C. Patrick D Hesidence
Full Name (Last, First, Middle Initial)
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 Erie Insurance Group Occupation VP, Billing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 369.31

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390184911468
Amount of Each Receipt this Period 64.36
P/R Deduction (\$32.18 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 364.36
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 11 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Sheryl A Rucker
Full Name (Last, First, Middle Initial)
Mailing Address 3500 DUNN VALLEY RD
City State Zip Code
ERIE PA 16509-4310
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Senior Counsel
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1778.75

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390185311468
Amount of Each Receipt this Period
310.92
P/R Deduction (\$155.46 Monthly)

B. Bradley A Corso
Full Name (Last, First, Middle Initial)
Mailing Address 3381 ANCHORAGE LN
City State Zip Code
HILLIARD OH 43026-7819
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Field Govt Relations Spct
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
230.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390188811468
Amount of Each Receipt this Period
40.00
P/R Deduction (\$20.00 Monthly)

C. Damien C Josefiak
Full Name (Last, First, Middle Initial)
Mailing Address 11114 BOTHWELL ST
City State Zip Code
RICHMOND VA 23233-2261
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Erie Insurance Group Field Govt Relations Spct
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
276.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390188911468
Amount of Each Receipt this Period
48.00
P/R Deduction (\$24.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	398.92
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Belinda J Rogers

Mailing Address 658 W 6TH ST

City State Zip Code
 ERIE PA 16507-1173

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

Name of Employer Occupation
 Erie Insurance Group Counsel I

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 491.56

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390190511468

Amount of Each Receipt this Period
 85.92

P/R Deduction (\$42.96 Monthly)

Full Name (Last, First, Middle Initial)
B. Sue A. Pfadt

Mailing Address 5811 SOUTHLAND DR

City State Zip Code
 ERIE PA 16509-7817

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

Name of Employer Occupation
 Erie Insurance Group Counsel II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 460.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390191211468

Amount of Each Receipt this Period
 80.00

P/R Deduction (\$40.00 Monthly)

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

Mailing Address 5122 ROBINHOOD LN

City State Zip Code
 ERIE PA 16509-2561

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

Name of Employer Occupation
 Erie Insurance Group Senior Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390191311468

Amount of Each Receipt this Period
 100.00

P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.92

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

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC-Federal

A. David R Glod
 Full Name (Last, First, Middle Initial)
 Mailing Address 4902 REESE RD
 City ERIE State PA Zip Code 16510-4304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Sr Portfolio Mgr, Fxd Inc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1035.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390205011468
 Amount of Each Receipt this Period 180.00
 P/R Deduction (\$90.00 Monthly)

B. Melvin L. Hirst
 Full Name (Last, First, Middle Initial)
 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 Erie Insurance Group Occupation VP, Sales Promotion & Agcy Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 920.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390207511468
 Amount of Each Receipt this Period 160.00
 P/R Deduction (\$80.00 Monthly)

C. Deborah S. Masi
 Full Name (Last, First, Middle Initial)
 Mailing Address 3012 MADEIRA DR
 City ERIE State PA Zip Code 16506-1732
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Branch Manager IV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 610.19

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390208011468
 Amount of Each Receipt this Period 106.92
 P/R Deduction (\$53.46 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	446.92
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Kathy L. Tesore
Full Name (Last, First, Middle Initial)

Mailing Address 8740 PEPPER RD

City State Zip Code
FAIRVIEW PA 16415-2917

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

Name of Employer Occupation
Erie Insurance Group Portfolio Mgr, External Invest

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
314.82

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014

Transaction ID : PR390213011468

Amount of Each Receipt this Period
55.12

P/R Deduction (\$27.56 Monthly)

B. Diane M Stamatelatos
Full Name (Last, First, Middle Initial)

Mailing Address 12147 JAMES JACK LN

City State Zip Code
CHARLOTTE NC 28277-3752

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

Name of Employer Occupation
Erie Insurance Group VP, Strategic Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
805.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014

Transaction ID : PR390215811468

Amount of Each Receipt this Period
140.00

P/R Deduction (\$70.00 Monthly)

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

Mailing Address 6055 BOXWOOD DR

City State Zip Code
FAIRVIEW PA 16415-3211

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014

Transaction ID : PR390216611468

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	235.12
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. Larry J. Hasbrouck
Full Name (Last, First, Middle Initial)

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 Erie Insurance Group Occupation Liability Claims Supervisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.44

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390223211468

Amount of Each Receipt this Period 40.32

P/R Deduction (\$20.16 Monthly)

B. Kristine L. Musselman
Full Name (Last, First, Middle Initial)

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 Erie Insurance Group Occupation VP & Claims Manager II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390229011468

Amount of Each Receipt this Period 40.00

P/R Deduction (\$20.00 Monthly)

C. David L Bauer
Full Name (Last, First, Middle Initial)

Mailing Address 2081 MAJESTY CT

City AKRON State OH Zip Code 44333-1282

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

Name of Employer Erie Insurance Group Occupation VP, Field Life Sales Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390231111468

Amount of Each Receipt this Period 200.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 280.32

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 16 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Gary D. Veshecco

Mailing Address 845 W TOWNHALL RD

City State Zip Code
 WATERFORD PA 16441-4131

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

Name of Employer Occupation
 Erie Insurance Group SVP, Law & Privacy Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : PR390232211468

Amount of Each Receipt this Period
 400.00

P/R Deduction (\$200.00 Monthly)

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

Mailing Address 3917 BEECH AVE

City State Zip Code
 ERIE PA 16508-3114

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

Name of Employer Occupation
 Erie Insurance Group Sr Talent Management Cons

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 536.87

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : PR390234211468

Amount of Each Receipt this Period
 93.80

P/R Deduction (\$46.90 Monthly)

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

Mailing Address 180 TIMBER RIDGE RD

City State Zip Code
 GREENEVILLE TN 37743-3503

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

Name of Employer Occupation
 Erie Insurance Group Sr District Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 202.02

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : PR390237611468

Amount of Each Receipt this Period
 35.28

P/R Deduction (\$17.64 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **529.08**

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 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Christopher J. Zimmer			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 9262 HAMOT RD			Transaction ID : PR390242411468
City WATERFORD	State PA	Zip Code 16441-2706	Amount of Each Receipt this Period 191.04
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation SVP, Field Claims		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1092.48		P/R Deduction (\$95.52 Monthly)

Full Name (Last, First, Middle Initial) B. Kim L Reichert			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 5820 FOREST XING			Transaction ID : PR390242911468
City ERIE	State PA	Zip Code 16506-7004	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation SSV--Recruiting		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		P/R Deduction (\$20.00 Monthly)

Full Name (Last, First, Middle Initial) C. Mark Dombrowski			Date of Receipt M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 4361 COOPER RD			Transaction ID : PR390243311468
City ERIE	State PA	Zip Code 16510-6621	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation VP, Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00		P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	331.04
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Karen A. Kraus Phillips
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 VIRGINIA AVE
 City State Zip Code
 ERIE PA 16505-4611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group VP, Strategic Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **876.23**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR390244911468
 Amount of Each Receipt this Period
153.16
 P/R Deduction (\$76.58 Monthly)

B. Shawn C Cummings
 Full Name (Last, First, Middle Initial)
 Mailing Address 1844 BUXTON WAY
 City State Zip Code
 BURLINGTON NC 27215-9435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Dir, Strategic Agency Invstmt
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1082.34**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR390245011468
 Amount of Each Receipt this Period
188.88
 P/R Deduction (\$94.44 Monthly)

C. Peter C. Maercklein
 Full Name (Last, First, Middle Initial)
 Mailing Address 6527 BARNESDALE PATH
 City State Zip Code
 CENTREVILLE VA 20120-3945
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Sr District Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **230.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR390245111468
 Amount of Each Receipt this Period
40.00
 P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	382.04
TOTAL This Period (last page this line number only).....▶	

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

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

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

A. David C Katovich
Full Name (Last, First, Middle Initial)

Mailing Address 4325 STONE CREEK DR

City ERIE	State PA	Zip Code 16506-7041
--------------	-------------	------------------------

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

Name of Employer Erie Insurance Group	Occupation VP, Life Undw & Product Admn
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **376.44**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390245711468

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

B. Theresa M. Gamble
Full Name (Last, First, Middle Initial)

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 Erie Insurance Group	Occupation Dir, Compliance Operations
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390250511468

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Monthly)

C. Jeffrey W. Brinling
Full Name (Last, First, Middle Initial)

Mailing Address 5603 STONERIDGE DR

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1127.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390250911468

Amount of Each Receipt this Period

196.00

P/R Deduction (\$98.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	316.00
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 20 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 3710 VOLKMAN RD

City State Zip Code
ERIE PA 16506-4759

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

Name of Employer Occupation
Erie Insurance Group EVP, Products

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3538.55

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390251511468

Amount of Each Receipt this Period
615.40

P/R Deduction (\$307.70 Monthly)

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

Mailing Address 245 GATEWAY DR

City State Zip Code
FAIRVIEW PA 16415-1639

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

Name of Employer Occupation
Erie Insurance Group SVP, Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1150.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390251611468

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Monthly)

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

Mailing Address 5500 STONERIDGE DR

City State Zip Code
FAIRVIEW PA 16415-2240

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

Name of Employer Occupation
Erie Insurance Group SVP, Life

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1196.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390251711468

Amount of Each Receipt this Period
208.00

P/R Deduction (\$104.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1023.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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

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

Mailing Address 6418 FIELD VALLEY LN

City State Zip Code
FAIRVIEW PA 16415-1725

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

Name of Employer Occupation
Erie Insurance Group SVP, Customer Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390251811468

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Monthly)

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

Mailing Address 529 SYBIL DR

City State Zip Code
ERIE PA 16505-2151

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

Name of Employer Occupation
Erie Insurance Group SVP, Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2287.36

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390252211468

Amount of Each Receipt this Period
400.48

P/R Deduction (\$200.24 Monthly)

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

Mailing Address 289 NIAGARA POINT DR

City State Zip Code
ERIE PA 16507-2321

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

Name of Employer Occupation
Erie Insurance Group EVP, Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2769.30

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390252611468

Amount of Each Receipt this Period
615.40

P/R Deduction (\$307.70 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1215.88

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

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

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

FOR LINE NUMBER: PAGE 22 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 6146 SCIOTO CT

City State Zip Code
FAIRVIEW PA 16415-3276

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

Name of Employer Occupation
Erie Insurance Group SVP, Regional Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR390253411468

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Monthly)

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

Mailing Address 93 JACOBS CREEK DR

City State Zip Code
HERSHEY PA 17033-8915

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

Name of Employer Occupation
Erie Insurance Group SVP, Regional Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR390253711468

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Monthly)

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

Mailing Address 4891 EQUESTRIAN DR

City State Zip Code
ERIE PA 16506-6617

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **3538.55**

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 24 / 2014
Transaction ID : PR390254211468

Amount of Each Receipt this Period
615.40

P/R Deduction (\$307.70 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ **915.40**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Mailing Address 5804 WIND CHIME LN

City State Zip Code
FAIRVIEW PA 16415-3249

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3542.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390254311468

Amount of Each Receipt this Period
616.00

P/R Deduction (\$308.00 Monthly)

B. Gregory C. Page
Full Name (Last, First, Middle Initial)

Mailing Address 8780 MARTHA WAY

City State Zip Code
WATERFORD PA 16441-4066

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

Name of Employer Occupation
Erie Insurance Group VP & Regional Claims Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
690.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390255311468

Amount of Each Receipt this Period
120.00

P/R Deduction (\$60.00 Monthly)

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

Mailing Address 8391 SUN LAKE DR

City State Zip Code
GIRARD PA 16417-7013

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

Name of Employer Occupation
Erie Insurance Group VP, Corporate Claims Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1610.00

Date of Receipt
11 / 24 / 2014
Transaction ID : PR390255411468

Amount of Each Receipt this Period
280.00

P/R Deduction (\$140.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	1016.00
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 24 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address **6515 HONEY LN**

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

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

Name of Employer Erie Insurance Group	Occupation SVP & Claims Ref Prgm Sponsor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1725.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390255511468

Amount of Each Receipt this Period

300.00

P/R Deduction (\$150.00 Monthly)

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

Mailing Address **162 E 35TH ST**

City ERIE	State PA	Zip Code 16504-1514
---------------------	--------------------	-------------------------------

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

Name of Employer Erie Insurance Group	Occupation VP, Strategic Marketing
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390255711468

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Monthly)

Full Name (Last, First, Middle Initial)
C. Kristopher C. Marrion

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 Erie Insurance Group	Occupation VP & Branch Manager IV
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **298.33**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : PR390256511468

Amount of Each Receipt this Period

52.44

P/R Deduction (\$26.22 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	432.44
TOTAL This Period (last page this line number only).....▶	

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

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

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

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

Mailing Address 2541 PISCES CT

City DUBLIN State OH Zip Code 43016-9039

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

Name of Employer Erie Insurance Group Occupation VP, Field Cmrl Sales Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **278.74**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390256711468

Amount of Each Receipt this Period **48.72**

P/R Deduction (\$24.36 Monthly)

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

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 Erie Insurance Group Occupation VP & Branch Manager IV

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **313.55**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390256811468

Amount of Each Receipt this Period **59.36**

P/R Deduction (\$28.06 Monthly)

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

Mailing Address 1009 CRIMSON CLOVER DR

City BRENTWOOD State TN Zip Code 37027-1805

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 24 / 2014**

Transaction ID : PR390257011468

Amount of Each Receipt this Period **40.00**

P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... **148.08**

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 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. Anthony DaBreo

Mailing Address 6223 WELKER DR

City State Zip Code
 INDIANAPOLIS IN 46236-6303

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390257111468

Amount of Each Receipt this Period
 40.00

P/R Deduction (\$20.00 Monthly)

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

Mailing Address 5123 FLINTLOCK LN

City State Zip Code
 ROANOKE VA 24018-8711

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 920.00

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390257211468

Amount of Each Receipt this Period
 160.00

P/R Deduction (\$80.00 Monthly)

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

Mailing Address 2311 WEDGEWOOD WAY

City State Zip Code
 YORK PA 17408-9464

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 442.75

Date of Receipt
 11 / 24 / 2014
Transaction ID : PR390257411468

Amount of Each Receipt this Period
 77.00

P/R Deduction (\$38.50 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 277.00

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 27 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Charles M. Fletcher
 Full Name (Last, First, Middle Initial)
 Mailing Address 181 FREEDOM DR
 City PARKERSBURG State WV Zip Code 26101-8505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Branch Manager IV
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 676.96

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390257711468
 Amount of Each Receipt this Period 169.24
 P/R Deduction (\$84.62 Monthly)

B. Douglas H. Reinhardt
 Full Name (Last, First, Middle Initial)
 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 Erie Insurance Group Occupation Claims Refresh Program Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390258311468
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Monthly)

C. Christy S. Yousefnejad
 Full Name (Last, First, Middle Initial)
 Mailing Address 1022 W STERLINGTON PL
 City APEX State NC Zip Code 27502-8938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Erie Insurance Group Occupation VP & Claims Manager I
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 740.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR390258711468
 Amount of Each Receipt this Period 160.00
 P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 369.24
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Cheryl L. Mitchell			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 4315 ALISON AVE			Transaction ID : PR390264911468
City ERIE	State PA	Zip Code 16506-6165	Amount of Each Receipt this Period 144.00
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation VP, Workplace Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 828.00		P/R Deduction (\$72.00 Monthly)

Full Name (Last, First, Middle Initial) B. Reginald L. Hewett			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 405 MAYMOUNT DR			Transaction ID : PR390270711468
City DURHAM	State NC	Zip Code 27703-3662	Amount of Each Receipt this Period 37.96
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation Sr Claims Supervisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 217.23		P/R Deduction (\$18.98 Monthly)

Full Name (Last, First, Middle Initial) C. Michael J. Filipski			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 24 / 2014
Mailing Address 4436 W 28TH ST			Transaction ID : PR390274211468
City ERIE	State PA	Zip Code 16506-1455	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer Erie Insurance Group	Occupation SSV--Premium Audit		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		P/R Deduction (\$20.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	221.96
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 29 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Ryszard Krysiak		Date of Receipt 11 / 24 / 2014 Transaction ID : PR390294911468
Mailing Address 903 LONG POINT DR		Amount of Each Receipt this Period 84.40
City ERIE	State PA	Zip Code 16505-5417
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 84.40	
Name of Employer Erie Insurance Group	Occupation Project Manager I (IT)	P/R Deduction (\$42.20 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 485.30	

Full Name (Last, First, Middle Initial) B. Andrew M Eрман		Date of Receipt 11 / 24 / 2014 Transaction ID : PR429108011468
Mailing Address 3693 VOLKMAN RD		Amount of Each Receipt this Period 200.00
City ERIE	State PA	Zip Code 16506-4767
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Erie Insurance Group	Occupation VP & Chief Life Actuary	P/R Deduction (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name (Last, First, Middle Initial) C. William N Herr Jr.		Date of Receipt 11 / 24 / 2014 Transaction ID : PR431254811468
Mailing Address 3450 TANAGER DR		Amount of Each Receipt this Period 288.68
City ERIE	State PA	Zip Code 16506-1156
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 288.68	
Name of Employer Erie Insurance Group	Occupation VP, Corporate Actuarial	P/R Deduction (\$144.34 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1656.75	

SUBTOTAL of Receipts This Page (optional).....▶	573.08
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 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Bradley G Postema
Full Name (Last, First, Middle Initial)
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 Erie Insurance Group Occupation SVP & Chief Investment Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2637.36

Date of Receipt 11 / 24 / 2014
Transaction ID : PR444115911468
Amount of Each Receipt this Period 461.76
P/R Deduction (\$230.88 Monthly)

B. Lorrie S. Tavana
Full Name (Last, First, Middle Initial)
Mailing Address 1140 SOUTHVIEW DR
City ERIE State PA Zip Code 16509-2575
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation SSV--Desktop Investigations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR486479511468
Amount of Each Receipt this Period 48.00
P/R Deduction (\$24.00 Monthly)

C. Brian R Dorio
Full Name (Last, First, Middle Initial)
Mailing Address 344 E 5TH ST
City ERIE State PA Zip Code 16507-1608
FEC ID number of contributing federal political committee. **C**
Name of Employer Erie Insurance Group Occupation Project Manager II (IT)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 24 / 2014
Transaction ID : PR491627711468
Amount of Each Receipt this Period 100.00
P/R Deduction (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶ 609.76
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 31 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Shane T Wohlrabe
 Full Name (Last, First, Middle Initial)
 Mailing Address 406 VERMONT AVE
 City State Zip Code
 ERIE PA 16505-2336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group Claims Refresh Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 341.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR491635511468
 Amount of Each Receipt this Period
 59.76
 P/R Deduction (\$29.88 Monthly)

B. Robert C Ingram III
 Full Name (Last, First, Middle Initial)
 Mailing Address 1324 S SHORE DR APT 707
 City State Zip Code
 ERIE PA 16505-2540
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group EVP & Chief Information Ofcr
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3538.55

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR491648611468
 Amount of Each Receipt this Period
 615.40
 P/R Deduction (\$307.70 Monthly)

C. Bradley C. Eastwood
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 RIDGEVIEW DR
 City State Zip Code
 ERIE PA 16505-1056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Erie Insurance Group SVP, Actuarial & Chief Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 681.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 24 / 2014
Transaction ID : PR568799111468
 Amount of Each Receipt this Period
 119.12
 P/R Deduction (\$59.56 Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	794.28
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: PAGE 32 OF 34
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Erie Indemnity Company PAC-Federal

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

Mailing Address 6045 FOSSILWOOD CT

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2321.08

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	24	/	2014

Transaction ID : PR568799211468

Amount of Each Receipt this Period
407.68

P/R Deduction (\$203.84 Monthly)

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	407.68
TOTAL This Period (last page this line number only).....▶	12600.15

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends Of Pat Toomey

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Pat Toomey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2014			

Transaction ID : 6529074

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

500.00

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

500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends of John Astle

Mailing Address 51 Fleet Street

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Void - Friends of John Astle

Candidate Name
Senator John Astle

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2014

Transaction ID : 6580830

Amount of Each Disbursement this Period

-500.00

Void - Friends of John Astle

Full Name (Last, First, Middle Initial)

B.

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

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

-500.00

-500.00
