

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Erie Indemnity Company PAC - Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		89098.88
(b) Cash on Hand at Beginning of Reporting Period.....	39703.88	
(c) Total Receipts (from Line 19)	21546.73	117751.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	61250.61	206850.61
7. Total Disbursements (from Line 31).....	650.00	146250.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	60600.61	60600.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Erie Indemnity Company PAC - Federal

Report Covering the Period: From: M M / D D / Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y
11 / 28 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20482.26	95571.15
(ii) Unitemized	1064.47	22180.58
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21546.73	117751.73
(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)	21546.73	117751.73
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)).....▶	21546.73	117751.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21546.73	117751.73

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.....	0.00	85000.00
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).....	650.00	61250.00
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)) ..	650.00	146250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	650.00	146250.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	21546.73	117751.73
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21546.73	117751.73
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 71
	<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. Altsman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 304.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045107
 Amount of Each Receipt this Period 32.00
 Memo Item

B. Altsman, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 352.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202712
 Amount of Each Receipt this Period 48.00
 Memo Item

C. Badon, Shane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6399 KILLOE RD
 City BALDWINSVILLE State NY Zip Code 13027-9073
 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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045239
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	

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

Form/Schedule: SA11AI
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 71
<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. Badon, Shane, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6399 KILLOE RD

City BALDWINVILLE	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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202699

Amount of Each Receipt this Period
30.00

Memo Item

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

Mailing Address 314 SHAWNEE DR

City ERIE	State PA	Zip Code 16505-2432
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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 ▼
760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045121

Amount of Each Receipt this Period
80.00

Memo Item

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

Mailing Address 314 SHAWNEE DR

City ERIE	State PA	Zip Code 16505-2432
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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 ▼
880.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202725

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
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 71
	(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. 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 ▼
840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : A2016-2045214

Amount of Each Receipt this Period
80.00

Memo Item

B. 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
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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 IV
---	---

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
11		28		2016

Transaction ID : A2016-2202813

Amount of Each Receipt this Period
120.00

Memo Item

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) SSV--P/C Actuarial
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : A2016-2045142

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 71
	<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"/>	<input type="checkbox"/> 17

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

A. 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202746
 Amount of Each Receipt this Period 30.00
 Memo Item

B. 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 ▼ 1050.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045176
 Amount of Each Receipt this Period 100.00
 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 ▼ 1200.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202775
 Amount of Each Receipt this Period 150.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 71
<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. 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
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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 Executive Support
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
641.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045114

Amount of Each Receipt this Period
61.60

Memo Item

B. 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
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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 Executive Support
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
734.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202718

Amount of Each Receipt this Period
92.40

Memo Item

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) Dir EPMO Performance Tracking
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
836.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045156

Amount of Each Receipt this Period
93.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	247.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 71
<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. 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 ▼ 975.78

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202759
 Amount of Each Receipt this Period 139.50
 Memo Item

B. 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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045213
 Amount of Each Receipt this Period 20.00
 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202812
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	189.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 71
	<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. 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 ▼ 217.02

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045235
 Amount of Each Receipt this Period 20.76
 Memo Item

B. 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 ▼ 248.16

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202835
 Amount of Each Receipt this Period 31.14
 Memo Item

C. 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 ▼ 1960.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045102
 Amount of Each Receipt this Period 196.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 247.90
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 71
	<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. 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 ▼ 2254.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202707
 Amount of Each Receipt this Period
 294.00
 Memo Item

B. 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 ▼ 1470.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045180
 Amount of Each Receipt this Period
 140.00
 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 ▼ 1680.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202779
 Amount of Each Receipt this Period
 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	644.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 71
	<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. 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 ▼ 313.08

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045133
 Amount of Each Receipt this Period 30.00
 Memo Item

B. 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 ▼ 358.08

Date of Receipt **11 / 28 / 2016**
Transaction ID : A2016-2202737
 Amount of Each Receipt this Period 45.00
 Memo Item

C. 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 Spct
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045208
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 71
	<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. 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 Spct
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202807
 Amount of Each Receipt this Period 30.00
 Memo Item

B. 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 ▼ 1040.41

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045147
 Amount of Each Receipt this Period 99.46
 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 ▼ 1189.60

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202701
 Amount of Each Receipt this Period 149.19
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	278.65
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 71
	<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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045105
 Amount of Each Receipt this Period 20.00
 Memo Item

B. 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202710
 Amount of Each Receipt this Period 30.00
 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 ▼ 525.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045123
 Amount of Each Receipt this Period 50.00
 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 18 OF 71
	<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. 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 ▼ 600.00

Date of Receipt
 11 / 28 / 2016
Transaction ID : A2016-2202727
 Amount of Each Receipt this Period 75.00
 Memo Item

B. 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 ▼ 1000.00

Date of Receipt
 10 / 24 / 2016
Transaction ID : A2016-2045228
 Amount of Each Receipt this Period 100.00
 Memo Item

C. 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 ▼ 1150.00

Date of Receipt
 11 / 28 / 2016
Transaction ID : A2016-2202828
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 19 OF 71
	<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. 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 ▼ 378.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045124
 Amount of Each Receipt this Period 36.00
 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 ▼ 432.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202728
 Amount of Each Receipt this Period 54.00
 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 ▼ 637.98

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045231
 Amount of Each Receipt this Period 60.76
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.76
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 20 OF 71
	<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. 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 ▼ 729.12

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202831
 Amount of Each Receipt this Period 91.14
 Memo Item

B. 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 ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045125
 Amount of Each Receipt this Period 50.00
 Memo Item

C. 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 ▼ 550.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202729
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	216.14
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 71
	<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. 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 ▼ 2276.76

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045232
 Amount of Each Receipt this Period 218.08
 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 ▼ 2603.88

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202832
 Amount of Each Receipt this Period 327.12
 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 ▼ 307.61

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045132
 Amount of Each Receipt this Period 29.46
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 574.66
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 71
	<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. 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 ▼ 351.80

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202736
 Amount of Each Receipt this Period 44.19
 Memo Item

B. 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 ▼ 2000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045112
 Amount of Each Receipt this Period 200.00
 Memo Item

C. 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 ▼ 2300.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202716
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	544.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. 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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045134
 Amount of Each Receipt this Period 20.00
 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202738
 Amount of Each Receipt this Period 30.00
 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 ▼ 784.25

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045209
 Amount of Each Receipt this Period 78.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	128.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 71
	<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. 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 ▼ 902.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202808
 Amount of Each Receipt this Period 117.75
 Memo Item

B. 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 ▼ 920.04

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045154
 Amount of Each Receipt this Period 87.44
 Memo Item

C. 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 ▼ 1051.20

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202757
 Amount of Each Receipt this Period 131.16
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	336.35
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 71
	(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. 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 ▼ 495.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045116
 Amount of Each Receipt this Period 50.00
 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 ▼ 570.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202720
 Amount of Each Receipt this Period 75.00
 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 ▼ 288.86

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045126
 Amount of Each Receipt this Period 27.56
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	152.56
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 71
	<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. 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 ▼ 330.20

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202730
 Amount of Each Receipt this Period
 41.34
 Memo Item

B. 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 ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045178
 Amount of Each Receipt this Period
 180.00
 Memo Item

C. 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 ▼ 1950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202777
 Amount of Each Receipt this Period
 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	371.34
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 27 OF 71
<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. 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 ▼
3251.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045108

Amount of Each Receipt this Period
326.92

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 ▼
3741.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202700

Amount of Each Receipt this Period
490.38

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 ▼
517.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045188

Amount of Each Receipt this Period
49.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	866.80
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: (check only one)	PAGE 28 OF 71
<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. 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 ▼ 591.60

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202787
 Amount of Each Receipt this Period 74.25
 Memo Item

B. 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 ▼ 217.69

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045217
 Amount of Each Receipt this Period 20.82
 Memo Item

C. 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 ▼ 248.92

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202816
 Amount of Each Receipt this Period 31.23
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	126.30
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 71
	<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. 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 ▼
420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045144

Amount of Each Receipt this Period
40.00

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 ▼
480.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202748

Amount of Each Receipt this Period
60.00

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 ▼
264.21

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045202

Amount of Each Receipt this Period
25.30

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.30
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 71
	<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. 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 ▼ 302.16

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202801
 Amount of Each Receipt this Period 37.95
 Memo Item

B. 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 ▼ 1540.05

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045225
 Amount of Each Receipt this Period 147.22
 Memo Item

C. 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 ▼ 1760.88

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202824
 Amount of Each Receipt this Period 220.83
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	406.00
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 31 OF 71
	(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. 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 ▼ 349.90

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045192
 Amount of Each Receipt this Period
 33.48
 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 ▼ 400.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202791
 Amount of Each Receipt this Period
 50.22
 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 ▼ 209.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045113
 Amount of Each Receipt this Period
 20.04
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	103.74
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: (check only one)	PAGE 32 OF 71
	<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. 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 ▼
239.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202717

Amount of Each Receipt this Period
30.06

Memo Item

B. 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 ▼
840.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045174

Amount of Each Receipt this Period
80.00

Memo Item

C. 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 ▼
960.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202705

Amount of Each Receipt this Period
120.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.06
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 71
	<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. 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 ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045155
 Amount of Each Receipt this Period 50.00
 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 ▼ 475.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202758
 Amount of Each Receipt this Period 75.00
 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 ▼ 220.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202744
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	155.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 71
	<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. 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 ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045106

Amount of Each Receipt this Period
40.00

Memo Item

B. 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 ▼
480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202711

Amount of Each Receipt this Period
60.00

Memo Item

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

Name of Employer (for Individual) Erie Insurance Group	Occupation (for Individual) EVP & Chief Information Ofcr
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3230.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045229

Amount of Each Receipt this Period
307.70

Memo Item

SUBTOTAL of Receipts This Page (optional).....	407.70
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 35 OF 71
	<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. 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 ▼ 3692.40

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202829
 Amount of Each Receipt this Period 461.55
 Memo Item

B. 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 ▼ 352.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045194
 Amount of Each Receipt this Period 44.00
 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 ▼ 418.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202793
 Amount of Each Receipt this Period 66.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	571.55
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 71
	<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. 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 ▼ 2100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045223
 Amount of Each Receipt this Period 200.00
 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 ▼ 2400.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202822
 Amount of Each Receipt this Period 300.00
 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 ▼ 817.18

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045145
 Amount of Each Receipt this Period 78.12
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	578.12
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 37 OF 71
	<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. 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 ▼ 934.36

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202749
 Amount of Each Receipt this Period 117.18
 Memo Item

B. 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
 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 ▼ 315.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045118
 Amount of Each Receipt this Period 30.00
 Memo Item

C. 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
 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 ▼ 360.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202722
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	192.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 71
	<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. 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 ▼ 248.21

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045203
 Amount of Each Receipt this Period 26.26
 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 ▼ 287.60

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202802
 Amount of Each Receipt this Period 39.39
 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 ▼ 896.03

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045187
 Amount of Each Receipt this Period 86.54
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	152.19
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 71
	<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. 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 ▼ 1025.84

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202786
 Amount of Each Receipt this Period 129.81
 Memo Item

B. 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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045218
 Amount of Each Receipt this Period 20.00
 Memo Item

C. 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202817
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	179.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 71
	<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. 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 ▼ 306.23

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045166
 Amount of Each Receipt this Period 29.42
 Memo Item

B. 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 ▼ 350.36

Date of Receipt **11 / 28 / 2016**
Transaction ID : A2016-2202768
 Amount of Each Receipt this Period 44.13
 Memo Item

C. 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 ▼ 1810.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045129
 Amount of Each Receipt this Period 180.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	253.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 71
	<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. 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 ▼
2080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202733

Amount of Each Receipt this Period
270.00

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 ▼
604.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045169

Amount of Each Receipt this Period
58.00

Memo Item

C. 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 ▼
691.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202703

Amount of Each Receipt this Period
87.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	415.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 71
<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. 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 ▼ 3234.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045234
 Amount of Each Receipt this Period 308.00
 Memo Item

B. 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 ▼ 3696.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202834
 Amount of Each Receipt this Period 462.00
 Memo Item

C. McMahon, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045165
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	820.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 71
	<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. McMahon, Heather, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202767

Amount of Each Receipt this Period
75.00

Memo Item

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

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 ▼
2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045191

Amount of Each Receipt this Period
240.00

Memo Item

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

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 ▼
2760.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202790

Amount of Each Receipt this Period
360.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	675.00
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 44 OF 71
	<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. Mitchell, Cheryl, L, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

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 ▼
756.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : A2016-2045212

Amount of Each Receipt this Period
72.00

Memo Item

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

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 ▼
864.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		28		2016

Transaction ID : A2016-2202811

Amount of Each Receipt this Period
108.00

Memo Item

C. 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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : A2016-2045207

Amount of Each Receipt this Period
20.00

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: (check only one)	PAGE 45 OF 71
	<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. 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202806
 Amount of Each Receipt this Period 30.00
 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 ▼ 1575.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045179
 Amount of Each Receipt this Period 150.00
 Memo Item

C. 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 ▼ 1800.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202778
 Amount of Each Receipt this Period 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	405.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 71
	<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. 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 ▼ 1465.58

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045190
 Amount of Each Receipt this Period 140.36
 Memo Item

B. 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 ▼ 1676.12

Date of Receipt **11 / 28 / 2016**
Transaction ID : A2016-2202789
 Amount of Each Receipt this Period 210.54
 Memo Item

C. 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 ▼ 1000.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045104
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 71
<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. 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 ▼ 1150.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202709
 Amount of Each Receipt this Period 150.00
 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 ▼ 315.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045196
 Amount of Each Receipt this Period 30.00
 Memo Item

C. 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 ▼ 360.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202795
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 71
	<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. 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 ▼ 1170.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045198
 Amount of Each Receipt this Period
 120.00
 Memo Item

B. 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 ▼ 1350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202797
 Amount of Each Receipt this Period
 180.00
 Memo Item

C. 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045224
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 71
	<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. 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 ▼ 550.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202823
 Amount of Each Receipt this Period 75.00
 Memo Item

B. 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 ▼ 420.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045148
 Amount of Each Receipt this Period 40.00
 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 ▼ 480.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202751
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 71
	<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 ▼
2080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045186

Amount of Each Receipt this Period
208.00

Memo Item

B. 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 ▼
2392.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202785

Amount of Each Receipt this Period
312.00

Memo Item

C. 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 ▼
2532.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045226

Amount of Each Receipt this Period
242.56

Memo Item

SUBTOTAL of Receipts This Page (optional).....	762.56
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 51 OF 71
	<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. 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 ▼ 2896.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202825
 Amount of Each Receipt this Period
 363.84
 Memo Item

B. 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 ▼ 924.33

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045115
 Amount of Each Receipt this Period
 97.54
 Memo Item

C. 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 ▼ 1070.64

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202719
 Amount of Each Receipt this Period
 146.31
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	607.69
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 71
	<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"/>	<input type="checkbox"/> 17

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

A. 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 ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045173

Amount of Each Receipt this Period
20.00

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2016

Transaction ID : A2016-2202704

Amount of Each Receipt this Period
30.00

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 ▼
605.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2016

Transaction ID : A2016-2045149

Amount of Each Receipt this Period
57.88

Memo Item

SUBTOTAL of Receipts This Page (optional).....	107.88
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: (check only one)	PAGE 53 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. 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 ▼ 692.64

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202752
 Amount of Each Receipt this Period 86.82
 Memo Item

B. 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 ▼ 400.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045189
 Amount of Each Receipt this Period 40.00
 Memo Item

C. 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 ▼ 460.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202788
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	186.82
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 54 OF 71
	<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. 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 ▼ 210.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045101
 Amount of Each Receipt this Period 20.00
 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 ▼ 240.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202706
 Amount of Each Receipt this Period 30.00
 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 ▼ 380.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045136
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 55 OF 71
	<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. 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 ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202740
 Amount of Each Receipt this Period
 60.00
 Memo Item

B. 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 ▼ 478.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045222
 Amount of Each Receipt this Period
 45.80
 Memo Item

C. 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 ▼ 546.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202821
 Amount of Each Receipt this Period
 68.70
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 71
	<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. 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 ▼ 1737.39

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045164
 Amount of Each Receipt this Period 166.54
 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 ▼ 1987.20

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202766
 Amount of Each Receipt this Period 249.81
 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 ▼ 1200.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045201
 Amount of Each Receipt this Period 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	536.35
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 57 OF 71
	<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. 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 ▼ 1380.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202800
 Amount of Each Receipt this Period 180.00
 Memo Item

B. 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 ▼ 1000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045158
 Amount of Each Receipt this Period 100.00
 Memo Item

C. 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 ▼ 1150.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202761
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	430.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 71
	<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. 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 ▼ 380.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045175
 Amount of Each Receipt this Period 40.00
 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 ▼ 440.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202774
 Amount of Each Receipt this Period 60.00
 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 ▼ 2019.36

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045199
 Amount of Each Receipt this Period 192.32
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	292.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 71
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. 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 ▼ 2307.84

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202798
 Amount of Each Receipt this Period 288.48
 Memo Item

B. 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 ▼ 218.24

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202815
 Amount of Each Receipt this Period 27.33
 Memo Item

C. 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 ▼ 1868.01

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045172
 Amount of Each Receipt this Period 187.62
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	503.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 71
	<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. 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 ▼
2149.44

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		28		2016

Transaction ID : A2016-2202773

Amount of Each Receipt this Period
281.43

Memo Item

B. 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 ▼
309.64

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2016

Transaction ID : A2016-2045206

Amount of Each Receipt this Period
29.68

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 ▼
354.16

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		28		2016

Transaction ID : A2016-2202805

Amount of Each Receipt this Period
44.52

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	355.63
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 71
	<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. 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 ▼ 201.32

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045103
 Amount of Each Receipt this Period 22.04
 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 ▼ 234.38

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202708
 Amount of Each Receipt this Period 33.06
 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 ▼ 1260.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045119
 Amount of Each Receipt this Period 120.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.10
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 71
	<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. 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 ▼ 1440.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202723
 Amount of Each Receipt this Period 180.00
 Memo Item

B. 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 ▼ 2100.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045111
 Amount of Each Receipt this Period 200.00
 Memo Item

C. 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 ▼ 2400.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202715
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	680.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 71
	<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. 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 ▼ 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045219
 Amount of Each Receipt this Period
 100.00
 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 ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202818
 Amount of Each Receipt this Period
 150.00
 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 ▼ 221.29

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045167
 Amount of Each Receipt this Period
 20.12
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.12
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 64 OF 71
	<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. 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 ▼ 270.65

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202769
 Amount of Each Receipt this Period 49.36
 Memo Item

B. 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 ▼ 475.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045127
 Amount of Each Receipt this Period 50.00
 Memo Item

C. 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 ▼ 550.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202731
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 174.36
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 65 OF 71
	<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. 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 ▼ 248.35

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045162
 Amount of Each Receipt this Period 23.74
 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 ▼ 283.96

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202765
 Amount of Each Receipt this Period 35.61
 Memo Item

C. Wilkerson, Joseph, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 273.46

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045150
 Amount of Each Receipt this Period 26.28
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85.63
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 66 OF 71
	<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. Wilkerson, Joseph, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 312.88

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202753
 Amount of Each Receipt this Period 39.42
 Memo Item

B. Witkowsky, James, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 684.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045183
 Amount of Each Receipt this Period 72.00
 Memo Item

C. Witkowsky, James, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 792.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202782
 Amount of Each Receipt this Period 108.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	219.42
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 67 OF 71
	<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. Wohlraabe, Shane, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 332.48

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045230
 Amount of Each Receipt this Period 31.84
 Memo Item

B. Wohlraabe, Shane, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 ▼ 380.24

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202830
 Amount of Each Receipt this Period 47.76
 Memo Item

C. 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 ▼ 840.00

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045211
 Amount of Each Receipt this Period 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	159.60
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 71
	<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. 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 ▼ 960.00

Date of Receipt **11 / 28 / 2016**
Transaction ID : A2016-2202810
 Amount of Each Receipt this Period 120.00
 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 ▼ 1950.00

Date of Receipt **10 / 24 / 2016**
Transaction ID : A2016-2045195
 Amount of Each Receipt this Period 200.00
 Memo Item

C. 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 ▼ 2250.00

Date of Receipt **11 / 28 / 2016**
Transaction ID : A2016-2202794
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	620.00
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 69 OF 71
	<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. 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 ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045109
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. 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 ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2016
Transaction ID : A2016-2202713
 Amount of Each Receipt this Period
 30.00
 Memo Item

C. 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 ▼ 950.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2016
Transaction ID : A2016-2045160
 Amount of Each Receipt this Period
 100.00
 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 70 OF 71
	<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. 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 ▼ 1100.00

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202763
 Amount of Each Receipt this Period 150.00
 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 ▼ 1061.70

Date of Receipt 10 / 24 / 2016
Transaction ID : A2016-2045143
 Amount of Each Receipt this Period 102.04
 Memo Item

C. 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 ▼ 1214.76

Date of Receipt 11 / 28 / 2016
Transaction ID : A2016-2202747
 Amount of Each Receipt this Period 153.06
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	405.10
TOTAL This Period (last page this line number only).....	20482.26

**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

A. Friends of Kathleen M. DuMais

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 4247

City Rockville State MD Zip Code 20850

Purpose of Disbursement P-2018 State House 15 MD

Candidate Name DuMais, Kathleen, M, ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MD District: 15

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : B634771

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Charles Sargent Campaign Fund

Full Name (Last, First, Middle Initial)
Mailing Address 214 War Memorial Bldg.

City Nashville State TN Zip Code 37243

Purpose of Disbursement G-2016 State House 61 TN

Candidate Name Sargent, Charles, M, ,

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: TN District: 61

Date of Disbursement: 10 / 24 / 2016

FEC Identification Number: C

Transaction ID : B622152

Amount of Each Disbursement this Period: -350.00

Voided: Original check dated 08/12/16

Memo Item

C. Friends of David Yancey

Full Name (Last, First, Middle Initial)
Mailing Address 423 Pin Oak Rd

City Newport News State VA Zip Code 23601

Purpose of Disbursement P-2017 State House 94 VA

Candidate Name Yancey, David, , ,

Office Sought: House Senate President

Disbursement For: 2017 Primary General Other (specify) ▼

State: VA District: 94

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : B634772

Amount of Each Disbursement this Period: 500.00

Memo Item

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

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

650.00
650.00