

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (in full)(Check if name  
is changed)Example: If typing, type  
over the lines.

12FE4M5

Erie Indemnity Company PAC - Federal

ADDRESS (number and street)

100 Erie Insurance Place

 (Check if address  
is changed)

Erie

PA

16530

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

 (Check if address  
is changed)

fecinfo@pass1.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address  
is changed)

None

2. DATE

M M / D D / Y Y Y Y  
02 / 02 / 2018

3. FEC IDENTIFICATION NUMBER ►

C C00153577

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

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

Type or Print Name of Treasurer Dombrowski, Mark, , ,

Signature of Treasurer

Dombrowski, Mark, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
02 / 02 / 2018NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

### **Candidate Committee:**

- (a)  This committee is a principal campaign committee. (Complete the candidate information below.)

(b)  This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of  
Candidate

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

## Candidate Party Affiliation

1

**Office  
Sought:**

## House

## Senate

## President

### State

1

## District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

## Party Committee:

- (d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

## Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation  Corporation w/o Capital Stock  Labor Organization

Membership Organization  Trade Association  Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

### **Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

#### Committees Participating in Joint Fundraiser

- |    |   |               |   |          |   |
|----|---|---------------|---|----------|---|
| 1. | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | FEC ID number | <input style="width: 100px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | <b>C</b> | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> |
| 2. | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | FEC ID number | <input style="width: 100px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | <b>C</b> | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> |
| 3. | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | FEC ID number | <input style="width: 100px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | <b>C</b> | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> |
| 4. | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | FEC ID number | <input style="width: 100px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> | <b>C</b> | <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px 5px; margin-right: 10px;" type="text"/> |

Write or Type Committee Name

## Erie Indemnity Company PAC - Federal

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Erie Insurance Political Action Committee

100 Erie Insurance Place

Mailing Address

Erie

PA

16530

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Dombrowski, Mark, ,

Mailing Address

c/o PASS

1950 Roland Clarke Pl Ste 300

Reston

VA

20191

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

703

476

3070

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name  
of Treasurer

Dombrowski, Mark, ,

Mailing Address

100 Erie Insurance Place

Erie

PA

16530

CITY

STATE

ZIP CODE

Title or Position  
Treasurer

Telephone number

814

870

6979

Full Name of  
Designated  
Agent

McWilliams, Kimberly, , ,

Mailing Address

100 Erie Insurance Place

Erie

CITY

PA

16530

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

814 - 870 - 7266

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC Bank

Mailing Address

9th & State Streets

Erie

CITY

PA

16533

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 A=G7 9 @ B9 C1 G H9 L H F9 @ H9 8 H C 5 F9 D C F H G7 <981 @ C F H 9 A N5 H C B

**Form/Schedule:** F1A

**Transaction ID :**

This amendment discloses a new PAC Treasurer and email address.

**Form/Schedule:**

**Transaction ID:**