## Edgar Filing: BRINLING JEFFREY W - Form 4

| BRINLING   | JEFFREY W                               |  |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|--|
| Form 4   | 1 2012                                  |  |  |  |  |  |  |  |
| December 04  |   |  |  |  |  |  | PROVAL                                 |  |
| FORM   | <b>14</b> UNITED S                      |  | URITIES AND E<br>Vashington, D.C. 2  |  | COMMISSION   |  | 3235-0287                              |  |
| Check thi<br>if no long<br>subject to<br>Section 1<br>Form 4 o<br>Form 5<br>obligation<br>may cont<br><i>See</i> Instru<br>1(b). | 6.<br>r<br>Filed pur<br>inue.           | IENT OF CH<br>suant to Sectiona) of the Public | ANGES IN BENE<br>SECURITIES<br>n 16(a) of the Secu<br>Utility Holding C<br>Investment Comp | January 31,<br>2005<br>Estimated average<br>burden hours per<br>response 0.5 |  |  |  |  |
| (Print or Type F   | Responses)                              |  |  |  |  |  |  |  |
| BRINLING JEFFREY W Symbol  |   |  | suer Name <b>and</b> Ticker<br>ol<br>E INDEMNITY CO  | C C  | 5. Relationship of Reporting Person(s) to<br>Issuer  |  |  |  |
| (Month/D<br>100 ERIE INSURANCE PLACE (Month/D<br>12/03/20<br>(Street) 4. If Amer   |   |  | e of Earliest Transactio<br>h/Day/Year)<br>3/2012  | n  | (Check all applicable)<br><u></u> Director 10% Owner<br><u></u> Officer (give title 0ther (specify<br>below) below)<br>Senior Vice President |  |  |  |
|  |   |  | Amendment, Date Origi<br>Month/Day/Year)   | nal  | 6. Individual or Joint/Group Filing(Check<br>Applicable Line)<br>_X_ Form filed by One Reporting Person                                      |  |  |  |
| ERIE, PA 1   | 6530                                    |  |  |  | Form filed by M<br>Person  |  |  |  |
| (City)   | (State)                                 | (Zip)  | able I - Non-Derivati  | ve Securities Acc  |  | or Beneficial  | lv Owned                               |  |
| 1.Title of<br>Security<br>(Instr. 3)   | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed                                     | 3.4. SecifTransaction(A) or<br>CodeCode(Instr.   | urities Acquired<br>Disposed of (D)<br>3, 4 and 5)<br>(A)<br>or              | 5. Amount of<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 3 and 4)                           | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial |  |
| Class A<br>Common<br>Stock   | 12/03/2012                              |  | J <u>(1)</u> 3.235   | 5 A <sup>\$</sup><br>71.28   | 8,130.221  | D  |  |  |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | 5.<br>of Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, | (Month/Day/Year)<br>ve<br>es<br>d |                    | Amou<br>Under<br>Secur | 7. Title and<br>Amount of<br>Underlying<br>Securities<br>(Instr. 3 and 4) | Derivative I<br>Security S<br>(Instr. 5) I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I<br>I | 9. Nu<br>Deriv<br>Secu<br>Bene<br>Owne<br>Follo<br>Repo<br>Trans<br>(Instr |
|---|---|---|--|---|-----------------------------------|--------------------|------------------------|---|--|--|
|   |   |   | Code V                                 | 4, and 5)<br>(A) (D)  | Date<br>Exercisable               | Expiration<br>Date | Title                  | Amount<br>or<br>Number<br>of<br>Shares                                    |  |  |

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## **Reporting Owners**

| Reporting Owner Name / Address                                   | Relationships |           |                       |       |  |  |  |
|--|---------------|-----------|-----------------------|-------|--|--|--|
|  | Director      | 10% Owner | Officer               | Other |  |  |  |
| BRINLING JEFFREY W<br>100 ERIE INSURANCE PLACE<br>ERIE, PA 16530 |               |           | Senior Vice President |       |  |  |  |
| Signatures   |               |           |                       |       |  |  |  |
| Linda A. Etter, Power of Attorney                                | 12/0          | )4/2012   |                       |       |  |  |  |
| **Signature of Reporting Person                                  | 1             | Date      |                       |       |  |  |  |

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Participant directed transaction under 401(k) Plan

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.