Edgar Filing: ERIE INDEMNITY CO - Form 4

ERIE INDE	MNITY CO											
Form 4												
August 05, 2	2013											
FORM	14					~			OMB AF	PROVAL		
	UNITED	STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287		
Check this box if no longer									Expires:	January 31,		
subject to		MENT O	F CHAN	IGES IN BENEFICIAL OWNE				NERSHIP OF	Estimated a	imated average		
					ITIES		burden hours per					
Form 4 o Form 5		rement to (Section 1	6(a) of the	- Soouriti	os Fr	zahanaa	e Act of 1934,	response	0.5		
obligatio	ons Section 17						-	1935 or Sectior	ı			
may con See Instr	unue.			vestment	•	· ·			•			
1(b).	uenon				1.	•						
(Print or Type)	Responses)											
			2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
			2	NDEMNI	TY CO []	ERIE]					
(Last)	(First) ((Middle)		f Earliest Tr	_		-	(Check	k all applicable)		
			(Month/D	/Day/Year)				Director		Owner		
100 ERIE I	NSURANCE PL	ACE	08/01/2	013				X Officer (give below) Senior	title Othe below) Vice Presiden	r (specify t		
	(Street)		4. If Ame	ndment, Da	te Original			6. Individual or Jo	int/Group Filin	g(Check		
Filed(Mor			Ionth/Day/Year)				Applicable Line)					
	(520							_X_ Form filed by O Form filed by M				
ERIE, PA 1	6530							Person				
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acqu	uired, Disposed of,	, or Beneficial	y Owned		
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution any	med 3. 4. Securities Acquired on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) Day/Year) (Instr. 8)				of (D)	5. Amount of Securities Beneficially Owned	7. Nature of Indirect Beneficial Ownership			
						(A)		Following Reported Transaction(s)	Indirect (I) (Instr. 4)	(Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)				
Class A												
Common Stock	08/01/2013			J <u>(1)</u>	18.635	А	\$ 80.37	644.98	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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. tionNumber of) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	7. Title Amoun Underly Securit (Instr. 3	nt of ying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title I	Amount or Number of Shares		

Edgar Filing: ERIE INDEMNITY CO - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Peterman Randall T 100 ERIE INSURANCE PLACE ERIE, PA 16530			Senior Vice President				
Signatures							
Linda A. Etter, Power of Attorney	08/0)5/2013					
**Signature of Reporting Person]	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.