Edgar Filing: Colaizzo Louis F - Form 4

Form 4 August 02, 2											
FORN	ЛА								OMB AF	PROVAL	
	UNITED	STATES	S SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMMISSION	OMB Number:	3235-0287	
Check th if no lon; subject to Section 1 Form 4 c	ger STATEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Expires: January 3 200 Estimated average burden hours per response 0.		
Form 5 obligatio may con <i>See</i> Instr 1(b).	tinue. Section 17(Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
(Print or Type]	Responses)										
1. Name and Address of Reporting Person * 2. Issue Colaizzo Louis F Symbol				er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
El				RIE INDEMNITY CO [ERIE]				(Check all applicable)			
				of Earliest Transaction Day/Year) 2018				Director 10% Owner X_Officer (give title Other (specify below) SVP			
			nendment, Date Original (onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
ERIE, PA 1	6530							Form filed by M Person	ore than One Rep	porting	
(City)	(State)	(Zip)	Tabl	le I - Non-E	Derivative	Secur	rities Acqu	iired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactic Code (Instr. 8)	4. Securit or(A) or Di (Instr. 3,	spose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Class A Common Stock	08/01/2018			Code V $J(\underline{1})$	Amount 0.868		Price \$ 124.24	(Instr. 3 and 4) 3,178.988	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)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Colaizzo Louis F 100 ERIE INSURANCE PLACE ERIE, PA 16530			SVP			
Signatures						
Rebecca A. Buona, Power of Attorney	(08/02/2018				

Attorney

**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.