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ERIE INDEN	INITY CO									
Form 4	0.07									
January 19, 2	1									PPROVAL
Check this box if no longer subject to Section 16. Form 4 or Form 5 chliasticara				ITIES A hington,		OMB Number:	3235-0287			
			CHANGES IN BENEFICIAL OWNERSHIP SECURITIES ection 16(a) of the Securities Exchange Act of 192 Public Utility Holding Company Act of 1935 or Se						January 31Expires:200Estimated averageburden hours perresponse0.	
<i>See</i> Instru 1(b).		30(h) o	f the Inv	vestment	Compar	iy Ac	t of 19	940		
(Print or Type R	esponses)									
1. Name and A LUDROF JE	ddress of Reporting Po EFFREY A	S	Symbol	Name and			-	5. Relationship of Issuer	Reporting Per	son(s) to
(Last)	(First) (M			Earliest Tr			2]	(Chec	k all applicable	e)
	ISURANCE PLA	(Month/Date of Mo	ay/Year)	ansaction			X Director X Officer (give below) Pre:		• Owner er (specify
EDIE DA 16	(Street)			ndment, Da th/Day/Year	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M		erson
ERIE, PA 16		7 • \						Person		
(City)	(State) (Z	Zip)	Table	e I - Non-D	erivative	Secur	ities Ac	equired, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8) Code V	Dispose (Instr. 3	d (A) of d of (E , 4 and (A) or))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Class A Common Stock	01/18/2007			А	5,198	А	\$0	24,537.7539	D	
Class A Common Stock								250	I	By Self as CUST for Son (Jared)
Class A Common Stock								250	I	By Self as CUST for Son (Jeffrey)

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Class A Common Stock	250	I	By Self as CUST for Son (Joseph)
Reminder: Report on a separate line for each class of securities b	peneficially owned directly or indirectly. Persons who respond to the colle information contained in this forr required to respond unless the for displays a currently valid OMB co number.	m are not orm	SEC 1474 (9-02)
	Acquired, Disposed of, or Beneficially Owne ants, options, convertible securities)	d	

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	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			
LUDROF JEFFREY A 100 ERIE INSURANCE PLACE ERIE, PA 16530	Х		President & CEO				
Signatures							
By: Linda A. Etter, Power of Attorney	(01/19/2007					
**Signature of Reporting Person		Date					

**Signature of Reporting Person

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).

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.