FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

| Washington, | D.C. | 20549 |  |
|-------------|------|-------|--|
|             |      |       |  |

| STATEMENT | <b>OF CHANGES</b> | IN BENEFICIAL | <b>OWNERSHIP</b> |
|-----------|-------------------|---------------|------------------|
|           |                   |               |                  |

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person*  KRAHE MICHAEL J                        |  |  |                               |                         | 2. Issuer Name and Ticker or Trading Symbol ERIE INDEMNITY CO [ ERIE ] |  |  |  |                         |  |   |             |                               | Check all a  |                                      | ng Pe  | Person(s) to Issuer  10% Owner   |  |  |
|--|--|--|-------------------------------|-------------------------|--|--|--|--|-------------------------|--|---|-------------|-------------------------------|--|--------------------------------------|--|--|--|--|
| (Last) (First) (Middle) 100 ERIE INSURANCE PLACE                                 |  |  |                               |                         | 3. Date of Earliest Transaction (Month/Day/Year) 02/02/2004            |  |  |  |                         |  |   |             |                               |  | icer (give title<br>ow)<br>Executive |  | Other (specify below)  e President                                       |  |  |
| (Street) ERIE (City)   | PA<br>(St  |  | .6530<br>Zip)                 |                         | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |  |  |                         |  |   |             | ine)<br>X Fo<br>Fo            | lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person |                                      |  |  |  |  |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |  |                               |                         |  |  |  |  |                         |  |   |             |                               |  |                                      |  |  |  |  |
| Dat  |  |  | 2. Transa<br>Date<br>(Month/D | n/Day/Year)   Execution |  | A. Deemed<br>execution Date,<br>fany<br>Month/Day/Year)  |  | Transaction Disposed Code (Instr. 5)                           |                         | ties Acquired (A)<br>d Of (D) (Instr. 3, 4 |   |             | nd Secu<br>Bend<br>Own        | nount of<br>irities<br>eficially<br>ed Following<br>orted  | For<br>(D)                           | Ownership<br>m: Direct<br>or Indirect<br>Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |  |
|  |  |  |                               |                         |  |  |  | Code   | v                       | Amount                                     | (1  | A) or<br>D) | Price                         | Tran   | action(s)<br>. 3 and 4)              |  |  | (1130.4)   |  |
| Class A Common Stock   |  |  | 02/02                         | 2/2004                  |  |  |  | J <sup>(1)</sup>   | J <sup>(1)</sup> 21.309 |  | 01 A  |             | \$                            | 2,353.8423   |                                      |  | D  |  |  |
|  | 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)                              | Derivative Conversion Date Execution Date Courity or Exercise (Month/Day/Year) if any  |  | Date,                         |                         | ransaction of Code (Instr. Derivative                                  |  | rative<br>rities<br>ired<br>r<br>osed<br>) | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                         |  | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |             |                               | 8. Price of Derivative Security (Instr. 5)   |                                      | y  | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|  |  |  |                               |                         | Code   | v  | (A)  | (D)  | Date<br>Exercisal       |  | Expiration<br>Date  | Title       | Amo<br>or<br>Nun<br>of<br>Sha | nber   |                                      |  |  |  |  |

## **Explanation of Responses:**

1. Participant directed transaction under 401(k) Plan

## Remarks:

By: Linda A. Etter, Power of Attorney

02/03/2004

\*\* Signature of Reporting Person Date

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

- \* 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.

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 Number.