

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="26377.30"/>	<input type="text" value="26377.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33691.73"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4639.26"/>	<input type="text" value="19953.69"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="38330.99"/>	<input type="text" value="46330.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="8000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="38330.99"/>	<input type="text" value="38330.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

CON-WAY INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	3388.24	9083.78
(ii) Unitemized	1251.00	10869.83
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4639.24	19953.61
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4639.24	19953.61
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.02	0.08
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4639.26	19953.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4639.26	19953.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	8000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	8000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	8000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	4639.24	19953.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4639.24	19953.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Uzma Ahmad
Full Name (Last, First, Middle Initial)

Mailing Address 3024 Androa Dr.

City Superior Township	State MI	Zip Code 48198
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way	Occupation VP Dep GC & Asst Sec
-----------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40024

Amount of Each Receipt this Period
20.00

Payroll Deduction

B. Uzma Ahmad
Full Name (Last, First, Middle Initial)

Mailing Address 3024 Androa Dr.

City Superior Township	State MI	Zip Code 48198
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way	Occupation VP Dep GC & Asst Sec
-----------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40113

Amount of Each Receipt this Period
20.00

Payroll Deduction

C. Uzma Ahmad
Full Name (Last, First, Middle Initial)

Mailing Address 3024 Androa Dr.

City Superior Township	State MI	Zip Code 48198
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way	Occupation VP Dep GC & Asst Sec
-----------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.40202

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Uzma Ahmad

Mailing Address 3024 Androa Dr.

City Superior Township State MI Zip Code 48198

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Occupation VP Dep GC & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.40291

Amount of Each Receipt this Period
20.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Joseph M. Anderson

Mailing Address 16519 Segars Ln.

City Huntersville State NC Zip Code 28078

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Worldwide Occupation Dir. Program

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40099

Amount of Each Receipt this Period
20.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Joseph M. Anderson

Mailing Address 16519 Segars Ln.

City Huntersville State NC Zip Code 28078

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Worldwide Occupation Dir. Program

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40188

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Paul B. Berg

Mailing Address 1100 Westdale Pl.

City Springfield State PA Zip Code 19064

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **04 / 12 / 2014**
Transaction ID : SA11AI.40136

Amount of Each Receipt this Period **15.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Paul B. Berg

Mailing Address 1100 Westdale Pl.

City Springfield State PA Zip Code 19064

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 19 / 2014**
Transaction ID : SA11AI.40225

Amount of Each Receipt this Period **15.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Paul B. Berg

Mailing Address 1100 Westdale Pl.

City Springfield State PA Zip Code 19064

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11AI.40314

Amount of Each Receipt this Period **15.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **45.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Robert Bianco
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Douglass St.

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics Occupation VP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **532.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40091

Amount of Each Receipt this Period
38.00

Payroll Deduction

B. Robert Bianco
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Douglass St.

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics Occupation VP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40180

Amount of Each Receipt this Period
38.00

Payroll Deduction

C. Robert Bianco
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Douglass St.

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics Occupation VP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **608.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.40269

Amount of Each Receipt this Period
38.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **114.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Robert Bianco
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Douglass St.

City San Francisco State CA Zip Code 94131

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics Occupation VP-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **646.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.40358

Amount of Each Receipt this Period
38.00

Payroll Deduction

B. Craig Boretz
Full Name (Last, First, Middle Initial)

Mailing Address 922 NW 11th Avenue

City Portland State OR Zip Code 97209

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Service Co. Occupation VP Tax Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40038

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Craig Boretz
Full Name (Last, First, Middle Initial)

Mailing Address 922 NW 11th Avenue

City Portland State OR Zip Code 97209

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Service Co. Occupation VP Tax Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40127

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **88.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Craig Boretz

Mailing Address 922 NW 11th Avenue

City State Zip Code
Portland OR 97209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CNF Service Co. VP Tax Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2014
Transaction ID : SA11AI.40216

Amount of Each Receipt this Period
25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Craig Boretz

Mailing Address 922 NW 11th Avenue

City State Zip Code
Portland OR 97209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CNF Service Co. VP Tax Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2014
Transaction ID : SA11AI.40305

Amount of Each Receipt this Period
25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Keith W. Burnett

Mailing Address 7905 Mimosa Dr.

City State Zip Code
N. Richland Hills TX 76180

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Con-Way Transportation Service VP Admin Services CWF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
597.68

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.40051

Amount of Each Receipt this Period
40.06

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.06

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Keith W. Burnett
Full Name (Last, First, Middle Initial)
Mailing Address 7905 Mimosa Dr.
City N. Richland Hills State TX Zip Code 76180
FEC ID number of contributing federal political committee. **C**
Name of Employer Con-Way Transportation Service Occupation VP Admin Services CWF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **637.74**

Date of Receipt **04 / 12 / 2014**
Transaction ID : SA11AI.40140
Amount of Each Receipt this Period **40.06**
Payroll Deduction

B. Keith W. Burnett
Full Name (Last, First, Middle Initial)
Mailing Address 7905 Mimosa Dr.
City N. Richland Hills State TX Zip Code 76180
FEC ID number of contributing federal political committee. **C**
Name of Employer Con-Way Transportation Service Occupation VP Admin Services CWF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **677.80**

Date of Receipt **04 / 19 / 2014**
Transaction ID : SA11AI.40229
Amount of Each Receipt this Period **40.06**
Payroll Deduction

C. Keith W. Burnett
Full Name (Last, First, Middle Initial)
Mailing Address 7905 Mimosa Dr.
City N. Richland Hills State TX Zip Code 76180
FEC ID number of contributing federal political committee. **C**
Name of Employer Con-Way Transportation Service Occupation VP Admin Services CWF
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ **717.86**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11AI.40318
Amount of Each Receipt this Period **40.06**
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **120.18**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Thomas W. Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 50693 Chesapeake Dr.
 City State Zip Code
 Novi MI 48374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Con-Way Transportation SVP Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.40052
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction

B. Thomas W. Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 50693 Chesapeake Dr.
 City State Zip Code
 Novi MI 48374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Con-Way Transportation SVP Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2014
Transaction ID : SA11AI.40141
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction

C. Thomas W. Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 50693 Chesapeake Dr.
 City State Zip Code
 Novi MI 48374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Con-Way Transportation SVP Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2014
Transaction ID : SA11AI.40230
 Amount of Each Receipt this Period
 25.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Thomas W. Clark

Mailing Address 50693 Chesapeake Dr.

City	State	Zip Code
Novi	MI	48374

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Con-Way Transportation	SVP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40319

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

City	State	Zip Code
Portland	OR	97229

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CNF Service Co.	VP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40039

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											30.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Kevin S. Coel

Mailing Address 17686 NW Country Dr.

City	State	Zip Code
Portland	OR	97229

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
CNF Service Co.	VP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40128

Amount of Each Receipt this Period

8	7	6	5	4	3	2	1	0	.	0	0
											30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	85.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Kevin S. Coel
 Full Name (Last, First, Middle Initial)
 Mailing Address 17686 NW Country Dr.
 City Portland State OR Zip Code 97229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNF Service Co. Occupation VP Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2014
Transaction ID : SA11AI.40217
 Amount of Each Receipt this Period 30.00
 Payroll Deduction

B. Kevin S. Coel
 Full Name (Last, First, Middle Initial)
 Mailing Address 17686 NW Country Dr.
 City Portland State OR Zip Code 97229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CNF Service Co. Occupation VP Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2014
Transaction ID : SA11AI.40306
 Amount of Each Receipt this Period 30.00
 Payroll Deduction

C. Karl A. Cushey
 Full Name (Last, First, Middle Initial)
 Mailing Address 3186 Appian Way
 City Spring Hill State TN Zip Code 37174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Con-Way Transp. Svcs. Occupation Dir. Ops
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.40054
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	80.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Karl A. Cushey
Full Name (Last, First, Middle Initial)

Mailing Address 3186 Appian Way

City Spring Hill State TN Zip Code 37174

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transp. Svcs. Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40143

Amount of Each Receipt this Period
20.00

Payroll Deduction

B. Karl A. Cushey
Full Name (Last, First, Middle Initial)

Mailing Address 3186 Appian Way

City Spring Hill State TN Zip Code 37174

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transp. Svcs. Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.40232

Amount of Each Receipt this Period
20.00

Payroll Deduction

C. Karl A. Cushey
Full Name (Last, First, Middle Initial)

Mailing Address 3186 Appian Way

City Spring Hill State TN Zip Code 37174

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transp. Svcs. Occupation Dir. Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.40321

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Robert E. Darden
Full Name (Last, First, Middle Initial)

Mailing Address 2773 Rock Creek

City Loma Linda State MO Zip Code 64804

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation Occupation Director Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **204.00**

Date of Receipt **04 / 26 / 2014**

Transaction ID : SA11AI.40301

Amount of Each Receipt this Period **12.00**

Payroll Deduction

B. Saul Gonzalez
Full Name (Last, First, Middle Initial)

Mailing Address 5159 Bluff Dr.

City Joplin State MO Zip Code 64804

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Occupation VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **04 / 05 / 2014**

Transaction ID : SA11AI.40025

Amount of Each Receipt this Period **15.00**

Payroll Deduction

C. Saul Gonzalez
Full Name (Last, First, Middle Initial)

Mailing Address 5159 Bluff Dr.

City Joplin State MO Zip Code 64804

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Occupation VP Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **04 / 12 / 2014**

Transaction ID : SA11AI.40114

Amount of Each Receipt this Period **15.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	42.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Saul Gonzalez

Mailing Address 5159 Bluff Dr.

City Joplin	State MO	Zip Code 64804
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation	Occupation VP Operations
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40203

Amount of Each Receipt this Period

15.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Saul Gonzalez

Mailing Address 5159 Bluff Dr.

City Joplin	State MO	Zip Code 64804
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation	Occupation VP Operations
--	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40292

Amount of Each Receipt this Period

15.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. John J. Herb Jr.

Mailing Address 932 Spring Water St.

City Danville	State CA	Zip Code 94506
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics	Occupation VP, Human Resources
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40096

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	55.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. John J. Herb Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 932 Spring Water St.

City Danville	State CA	Zip Code 94506
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics	Occupation VP, Human Resources
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40185

Amount of Each Receipt this Period

25.00

Payroll Deduction

B. John J. Herb Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 932 Spring Water St.

City Danville	State CA	Zip Code 94506
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics	Occupation VP, Human Resources
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40274

Amount of Each Receipt this Period

25.00

Payroll Deduction

C. John J. Herb Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 932 Spring Water St.

City Danville	State CA	Zip Code 94506
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Menlo Logistics	Occupation VP, Human Resources
-------------------------------------	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40363

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Timothy E. Killilee

Mailing Address 10633 Kyle Ave.

City Brooklyn Park	State MN	Zip Code 55443
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation Svcs	Occupation Dir. Operations
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40086

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Timothy E. Killilee

Mailing Address 10633 Kyle Ave.

City Brooklyn Park	State MN	Zip Code 55443
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation Svcs	Occupation Dir. Operations
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40175

Amount of Each Receipt this Period

25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Timothy E. Killilee

Mailing Address 10633 Kyle Ave.

City Brooklyn Park	State MN	Zip Code 55443
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation Svcs	Occupation Dir. Operations
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40264

Amount of Each Receipt this Period

25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Timothy E. Killilee
Full Name (Last, First, Middle Initial)

Mailing Address 10633 Kyle Ave.

City State Zip Code
Brooklyn Park MN 55443

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ConWay Transportation Svcs Dir. Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2014
Transaction ID : SA11AI.40353

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Stephen Krull
Full Name (Last, First, Middle Initial)

Mailing Address 7125 Oak Bluff Ln.

City State Zip Code
Maumee OH 43537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ConWay Transportation Ex VP, GC & Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2014
Transaction ID : SA11AI.40023

Amount of Each Receipt this Period
50.00

Payroll Deduction

C. Stephen Krull
Full Name (Last, First, Middle Initial)

Mailing Address 7125 Oak Bluff Ln.

City State Zip Code
Maumee OH 43537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ConWay Transportation Ex VP, GC & Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
04 / 12 / 2014
Transaction ID : SA11AI.40112

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Stephen Krull
Full Name (Last, First, Middle Initial)

Mailing Address 7125 Oak Bluff Ln.

City Maumee	State OH	Zip Code 43537
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation	Occupation Ex VP, GC & Secretary
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40201

Amount of Each Receipt this Period

50.00

Payroll Deduction

B. Stephen Krull
Full Name (Last, First, Middle Initial)

Mailing Address 7125 Oak Bluff Ln.

City Maumee	State OH	Zip Code 43537
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ConWay Transportation	Occupation Ex VP, GC & Secretary
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40290

Amount of Each Receipt this Period

50.00

Payroll Deduction

C. Walter G. Lehmkuhl
Full Name (Last, First, Middle Initial)

Mailing Address 21575 Equestrian Trl.

City Northville	State MI	Zip Code 48167
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs	Occupation EVP & President
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40084

Amount of Each Receipt this Period

15.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	115.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Walter G. Lehmkuhl

Mailing Address 21575 Equestrian Trl.

City Northville	State MI	Zip Code 48167
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs	Occupation EVP & President
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2014
Transaction ID : SA11AI.40173

Amount of Each Receipt this Period
15.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Walter G. Lehmkuhl

Mailing Address 21575 Equestrian Trl.

City Northville	State MI	Zip Code 48167
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs	Occupation EVP & President
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2014
Transaction ID : SA11AI.40262

Amount of Each Receipt this Period
15.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Walter G. Lehmkuhl

Mailing Address 21575 Equestrian Trl.

City Northville	State MI	Zip Code 48167
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs	Occupation EVP & President
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2014
Transaction ID : SA11AI.40351

Amount of Each Receipt this Period
15.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 42
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. William C. Litty Jr.

Mailing Address 913 Victoria Court

City	State	Zip Code
Dowingtown	PA	19335

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Con-Way Transportation Svcs	VP Sales-Eastern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40064

Amount of Each Receipt this Period
30.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. William C. Litty Jr.

Mailing Address 913 Victoria Court

City	State	Zip Code
Dowingtown	PA	19335

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Con-Way Transportation Svcs	VP Sales-Eastern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40153

Amount of Each Receipt this Period
30.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. William C. Litty Jr.

Mailing Address 913 Victoria Court

City	State	Zip Code
Dowingtown	PA	19335

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Con-Way Transportation Svcs	VP Sales-Eastern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.40242

Amount of Each Receipt this Period
30.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	90.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. William C. Litty Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 913 Victoria Court

City Dowingtown State PA Zip Code 19335

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs Occupation VP Sales-Eastern

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **510.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.40331

Amount of Each Receipt this Period
30.00

Payroll Deduction

B. Michael J. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Belmont Rd.

City Ann Arbor State MI Zip Code 48104

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Occupation Sr. VP & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 05 / 2014

Transaction ID : SA11AI.40022

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Michael J. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 2200 Belmont Rd.

City Ann Arbor State MI Zip Code 48104

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Occupation Sr. VP & Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40111

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **80.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael J. Morris		Date of Receipt
Mailing Address 2200 Belmont Rd.		<input type="text" value="04"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City State Zip Code Ann Arbor MI 48104		Transaction ID : SA11AI.40200
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer CNF	Occupation Sr. VP & Treasurer	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) B. Michael J. Morris		Date of Receipt
Mailing Address 2200 Belmont Rd.		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City State Zip Code Ann Arbor MI 48104		Transaction ID : SA11AI.40289
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer CNF	Occupation Sr. VP & Treasurer	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="425.00"/>	

Full Name (Last, First, Middle Initial) C. Bruce A. Moss		Date of Receipt
Mailing Address 9263 Baron Way		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City State Zip Code Saline MI 48176		Transaction ID : SA11AI.40068
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer Con-Way Central Express	Occupation VP Sales	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Bruce A. Moss
Full Name (Last, First, Middle Initial)

Mailing Address 9263 Baron Way

City Saline State MI Zip Code 48176

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Central Express Occupation VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014

Transaction ID : SA11AI.40157

Amount of Each Receipt this Period
25.00

Payroll Deduction

B. Bruce A. Moss
Full Name (Last, First, Middle Initial)

Mailing Address 9263 Baron Way

City Saline State MI Zip Code 48176

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Central Express Occupation VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014

Transaction ID : SA11AI.40246

Amount of Each Receipt this Period
25.00

Payroll Deduction

C. Bruce A. Moss
Full Name (Last, First, Middle Initial)

Mailing Address 9263 Baron Way

City Saline State MI Zip Code 48176

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Central Express Occupation VP Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014

Transaction ID : SA11AI.40335

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **75.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Charles R. Mullett
Full Name (Last, First, Middle Initial)

Mailing Address 301 Archer Ct.

City Beryville	State VA	Zip Code 22611
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Inc.	Occupation Director, Govt. Relations
------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40018

Amount of Each Receipt this Period

40.00

Payroll Deduction

B. Charles R. Mullett
Full Name (Last, First, Middle Initial)

Mailing Address 301 Archer Ct.

City Beryville	State VA	Zip Code 22611
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Inc.	Occupation Director, Govt. Relations
------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40107

Amount of Each Receipt this Period

40.00

Payroll Deduction

C. Charles R. Mullett
Full Name (Last, First, Middle Initial)

Mailing Address 301 Archer Ct.

City Beryville	State VA	Zip Code 22611
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer CNF Inc.	Occupation Director, Govt. Relations
------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40196

Amount of Each Receipt this Period

40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Charles R. Mullett

Mailing Address 301 Archer Ct.

City Beryville State VA Zip Code 22611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CNF Inc. Director, Govt. Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt
04 / 26 / 2014
Transaction ID : **SA11AI.40285**

Amount of Each Receipt this Period
40.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Mr. Anthony S. Oliverio

Mailing Address 43 W. 803 Buck Ct.

City St. Charles State IL Zip Code 60175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Menlo Logistics VP Supply Chain Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
04 / 05 / 2014
Transaction ID : **SA11AI.40095**

Amount of Each Receipt this Period
25.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
c. Mr. Anthony S. Oliverio

Mailing Address 43 W. 803 Buck Ct.

City St. Charles State IL Zip Code 60175

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Menlo Logistics VP Supply Chain Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt
04 / 12 / 2014
Transaction ID : **SA11AI.40184**

Amount of Each Receipt this Period
25.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **90.00**

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Mr. Anthony S. Oliverio
Full Name (Last, First, Middle Initial)
Mailing Address 43 W. 803 Buck Ct.
City St. Charles State IL Zip Code 60175
FEC ID number of contributing federal political committee. **C**
Name of Employer Menlo Logistics Occupation VP Supply Chain Services
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.00**

Date of Receipt **04 / 19 / 2014**
Transaction ID : SA11AI.40273
Amount of Each Receipt this Period **25.00**
Payroll Deduction

B. Mr. Anthony S. Oliverio
Full Name (Last, First, Middle Initial)
Mailing Address 43 W. 803 Buck Ct.
City St. Charles State IL Zip Code 60175
FEC ID number of contributing federal political committee. **C**
Name of Employer Menlo Logistics Occupation VP Supply Chain Services
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **425.00**

Date of Receipt **04 / 26 / 2014**
Transaction ID : SA11AI.40362
Amount of Each Receipt this Period **25.00**
Payroll Deduction

C. Lynn Reinbolt
Full Name (Last, First, Middle Initial)
Mailing Address 129 Charles Thomas Blvd.
City Searcy State AR Zip Code 72143
FEC ID number of contributing federal political committee. **C**
Name of Employer Road Systems Occupation General Manager
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **560.00**

Date of Receipt **04 / 05 / 2014**
Transaction ID : SA11AI.40102
Amount of Each Receipt this Period **40.00**
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **90.00**
TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Lynn Reinbolt
Full Name (Last, First, Middle Initial)

Mailing Address 129 Charles Thomas Blvd.

City Searcy	State AR	Zip Code 72143
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Road Systems	Occupation General Manager
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40191

Amount of Each Receipt this Period

40.00

Payroll Deduction

B. Lynn Reinbolt
Full Name (Last, First, Middle Initial)

Mailing Address 129 Charles Thomas Blvd.

City Searcy	State AR	Zip Code 72143
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Road Systems	Occupation General Manager
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **640.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40280

Amount of Each Receipt this Period

40.00

Payroll Deduction

C. Lynn Reinbolt
Full Name (Last, First, Middle Initial)

Mailing Address 129 Charles Thomas Blvd.

City Searcy	State AR	Zip Code 72143
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Road Systems	Occupation General Manager
----------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **680.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40369

Amount of Each Receipt this Period

40.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	120.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Mr. James T. Riordan
Full Name (Last, First, Middle Initial)

Mailing Address 1174 W. Russell Road

City Tecumseh State MI Zip Code 49286

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Service Occupation Dir. Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.40071

Amount of Each Receipt this Period
 20.00

Payroll Deduction

B. Mr. James T. Riordan
Full Name (Last, First, Middle Initial)

Mailing Address 1174 W. Russell Road

City Tecumseh State MI Zip Code 49286

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Service Occupation Dir. Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2014
Transaction ID : SA11AI.40160

Amount of Each Receipt this Period
 20.00

Payroll Deduction

C. Mr. James T. Riordan
Full Name (Last, First, Middle Initial)

Mailing Address 1174 W. Russell Road

City Tecumseh State MI Zip Code 49286

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Service Occupation Dir. Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 19 / 2014
Transaction ID : SA11AI.40249

Amount of Each Receipt this Period
 20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Mr. James T. Riordan

Mailing Address 1174 W. Russell Road

City State Zip Code
Tecumseh MI 49286

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Con-Way Transportation Service Dir. Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 26 / 2014
Transaction ID : SA11AI.40338

Amount of Each Receipt this Period
20.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City State Zip Code
Tucson AZ 85742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Con-Way Transportation Svcs. Mgr. Service Center 3

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2014
Transaction ID : SA11AI.40072

Amount of Each Receipt this Period
20.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Mr. William J. Rzepecki

Mailing Address 3163 W. Feliciano Way

City State Zip Code
Tucson AZ 85742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Con-Way Transportation Svcs. Mgr. Service Center 3

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2014
Transaction ID : SA11AI.40161

Amount of Each Receipt this Period
20.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. William J. Rzepecki		Date of Receipt MM / DD / YYYY 04 / 19 / 2014 Transaction ID : SA11AI.40250
Mailing Address 3163 W. Feliciano Way		Amount of Each Receipt this Period 20.00
City Tucson	State AZ	Zip Code 85742
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Con-Way Transportation Svcs.	Occupation Mgr. Service Center 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. Mr. William J. Rzepecki		Date of Receipt MM / DD / YYYY 04 / 26 / 2014 Transaction ID : SA11AI.40339
Mailing Address 3163 W. Feliciano Way		Amount of Each Receipt this Period 20.00
City Tucson	State AZ	Zip Code 85742
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Con-Way Transportation Svcs.	Occupation Mgr. Service Center 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) C. Neil E. Smith Jr.		Date of Receipt MM / DD / YYYY 04 / 05 / 2014 Transaction ID : SA11AI.40075
Mailing Address 4546 W. Deerpath Dr.		Amount of Each Receipt this Period 95.00
City Boise	State ID	Zip Code 83714
FEC ID number of contributing federal political committee. C	Payroll Deduction	
Name of Employer Con-Way Transportation	Occupation VP Ops-Western	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1330.00	

SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Neil E. Smith Jr.		Date of Receipt MM / DD / YYYY 04 / 12 / 2014 Transaction ID : SA11AI.40164
Mailing Address 4546 W. Deerpath Dr.		Amount of Each Receipt this Period 95.00
City Boise	State ID	Zip Code 83714
FEC ID number of contributing federal political committee. C	Name of Employer Con-Way Transportation	Occupation VP Ops-Western
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1425.00	

Full Name (Last, First, Middle Initial) B. Neil E. Smith Jr.		Date of Receipt MM / DD / YYYY 04 / 19 / 2014 Transaction ID : SA11AI.40253
Mailing Address 4546 W. Deerpath Dr.		Amount of Each Receipt this Period 95.00
City Boise	State ID	Zip Code 83714
FEC ID number of contributing federal political committee. C	Name of Employer Con-Way Transportation	Occupation VP Ops-Western
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1520.00	

Full Name (Last, First, Middle Initial) C. Neil E. Smith Jr.		Date of Receipt MM / DD / YYYY 04 / 26 / 2014 Transaction ID : SA11AI.40342
Mailing Address 4546 W. Deerpath Dr.		Amount of Each Receipt this Period 95.00
City Boise	State ID	Zip Code 83714
FEC ID number of contributing federal political committee. C	Name of Employer Con-Way Transportation	Occupation VP Ops-Western
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1615.00	

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Douglas Stotlar
Full Name (Last, First, Middle Initial)

Mailing Address 5333 Pleasant Lake Rd.

City Ann Arbor	State MI	Zip Code 48103
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FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs.	Occupation President & CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1344.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2014

Transaction ID : SA11AI.40019

Amount of Each Receipt this Period
96.00

Payroll Deduction

B. Douglas Stotlar
Full Name (Last, First, Middle Initial)

Mailing Address 5333 Pleasant Lake Rd.

City Ann Arbor	State MI	Zip Code 48103
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FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs.	Occupation President & CEO
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1440.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2014

Transaction ID : SA11AI.40108

Amount of Each Receipt this Period
96.00

Payroll Deduction

C. Douglas Stotlar
Full Name (Last, First, Middle Initial)

Mailing Address 5333 Pleasant Lake Rd.

City Ann Arbor	State MI	Zip Code 48103
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FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs.	Occupation President & CEO
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1536.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	19	/	2014

Transaction ID : SA11AI.40197

Amount of Each Receipt this Period
96.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	288.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Douglas Stotlar
Full Name (Last, First, Middle Initial)

Mailing Address 5333 Pleasant Lake Rd.

City Ann Arbor State MI Zip Code 48103

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transportation Svcs. Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1632.00**

Date of Receipt **04 / 26 / 2014**
Transaction ID : **SA11AI.40286**

Amount of Each Receipt this Period **96.00**

Payroll Deduction

B. Christopher A. Welder
Full Name (Last, First, Middle Initial)

Mailing Address 10200 SW Whitebark Ln.

City Tualatin State OR Zip Code 97062

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Services Occupation Sr. Manager IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **04 / 05 / 2014**
Transaction ID : **SA11AI.40040**

Amount of Each Receipt this Period **25.00**

Payroll Deduction

c. Christopher A. Welder
Full Name (Last, First, Middle Initial)

Mailing Address 10200 SW Whitebark Ln.

City Tualatin State OR Zip Code 97062

FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Services Occupation Sr. Manager IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt **04 / 12 / 2014**
Transaction ID : **SA11AI.40129**

Amount of Each Receipt this Period **25.00**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... **146.00**

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 42
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Christopher A. Welder
Full Name (Last, First, Middle Initial)
Mailing Address 10200 SW Whitebark Ln.
City Tualatin State OR Zip Code 97062
FEC ID number of contributing federal political committee. **C**
Name of Employer Con-Way Services Occupation Sr. Manager IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 19 / 2014
Transaction ID : SA11AI.40218
Amount of Each Receipt this Period 25.00
Payroll Deduction

B. Christopher A. Welder
Full Name (Last, First, Middle Initial)
Mailing Address 10200 SW Whitebark Ln.
City Tualatin State OR Zip Code 97062
FEC ID number of contributing federal political committee. **C**
Name of Employer Con-Way Services Occupation Sr. Manager IT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 425.00

Date of Receipt 04 / 26 / 2014
Transaction ID : SA11AI.40307
Amount of Each Receipt this Period 25.00
Payroll Deduction

C. Dean W. Wright Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 32888 Keys Landing
City Scappoose State OR Zip Code 97056
FEC ID number of contributing federal political committee. **C**
Name of Employer CNF Inc. Occupation Sr. Mgr. Equipment Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 05 / 2014
Transaction ID : SA11AI.40043
Amount of Each Receipt this Period 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Dean W. Wright Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 32888 Keys Landing
City Scappose State OR Zip Code 97056
FEC ID number of contributing federal political committee. **C**
Name of Employer CNF Inc. Occupation Sr. Mgr. Equipment Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2014
Transaction ID : SA11AI.40132
Amount of Each Receipt this Period 20.00
Payroll Deduction

B. Dean W. Wright Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 32888 Keys Landing
City Scappose State OR Zip Code 97056
FEC ID number of contributing federal political committee. **C**
Name of Employer CNF Inc. Occupation Sr. Mgr. Equipment Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 19 / 2014
Transaction ID : SA11AI.40221
Amount of Each Receipt this Period 20.00
Payroll Deduction

C. Dean W. Wright Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 32888 Keys Landing
City Scappose State OR Zip Code 97056
FEC ID number of contributing federal political committee. **C**
Name of Employer CNF Inc. Occupation Sr. Mgr. Equipment Admin
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 26 / 2014
Transaction ID : SA11AI.40310
Amount of Each Receipt this Period 20.00
Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Mr. Michael D. Yuenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 7448 Black Forest Dr.
 City Dexter State MI Zip Code 48130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Con-Way Transp. Services Occupation VP/Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 05 / 2014
Transaction ID : SA11AI.40082
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

B. Mr. Michael D. Yuenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 7448 Black Forest Dr.
 City Dexter State MI Zip Code 48130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Con-Way Transp. Services Occupation VP/Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 12 / 2014
Transaction ID : SA11AI.40171
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

C. Mr. Michael D. Yuenger
 Full Name (Last, First, Middle Initial)
 Mailing Address 7448 Black Forest Dr.
 City Dexter State MI Zip Code 48130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Con-Way Transp. Services Occupation VP/Controller
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 19 / 2014
Transaction ID : SA11AI.40260
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CON-WAY INC. POLITICAL ACTION COMMITTEE

A. Mr. Michael D. Yuenger
Full Name (Last, First, Middle Initial)

Mailing Address 7448 Black Forest Dr.

City Dexter	State MI	Zip Code 48130
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FEC ID number of contributing federal political committee. **C**

Name of Employer Con-Way Transp. Services	Occupation VP/Controller
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	26	/	2014

Transaction ID : SA11AI.40349

Amount of Each Receipt this Period

20.00

Payroll Deduction

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

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C.
Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	3388.24