

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

GATX CORPORATION GOOD GOVERNMENT PROGRAM

ADDRESS (number and street) 222 WEST ADAMS STREET

Check if different than previously reported. (ACC) CHICAGO IL 60606-5314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00118703 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:  April 15 Quarterly Report (Q1)  July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)  January 31 Year-End Report (YE)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER) (b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE) (c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  Convention (12C)  Special (12S) Election on M M M / D D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S) Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Eric D. Harkness

Signature of Treasurer Eric D. Harkness [Electronically Filed] Date 10 / 08 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

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="11997.99"/>	<input type="text" value="11997.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30782.99"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="909.00"/>	<input type="text" value="20194.00"/>
(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="31691.99"/>	<input type="text" value="32191.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8600.00"/>	<input type="text" value="9100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23091.99"/>	<input type="text" value="23091.99"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

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).....	729.00	18725.00
(ii) Unitemized .....	180.00	1469.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	909.00	20194.00
(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) .....	909.00	20194.00
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.).....	0.00	0.00
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))..... ▶	909.00	20194.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	909.00	20194.00

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	8600.00	9100.00
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)) ..	8600.00	9100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8600.00	9100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	909.00	20194.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	909.00	20194.00
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: PAGE 6 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

**A. Ms Katie Hadenfeldt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 15120 Zinrau Court  
 City State Zip Code  
 Savage MN 55378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GATX Corporation RVP - Sales  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.4388**  
 Amount of Each Receipt this Period  
 180.00  
 Payroll Deduction (\$30.00 semi-monthly)

**B. Mr. Suhail Nasser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 148 Seneca Trail  
 City State Zip Code  
 Bloomingdale IL 60108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GATX Corporation Director, Reporting & Integration  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 212.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.4390**  
 Amount of Each Receipt this Period  
 75.00  
 Payroll Deduction (\$12.50 semi-monthly)

**C. Mark Pietrocarlo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5513 Pebble Beach Drive  
 City State Zip Code  
 Hamburg NY 14075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 American Steamship Company VP - Controller  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2014  
**Transaction ID : SA11AI.4392**  
 Amount of Each Receipt this Period  
 150.00  
 Payroll Deduction (\$25.00 semi-monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 405.00  
**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 10  
(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)  
**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

Full Name (Last, First, Middle Initial)  
**A. Paul Titterton**

Mailing Address 1700 Forest Avenue

City Wilmette	State IL	Zip Code 60091
------------------	-------------	-------------------

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

Name of Employer GATX Corporation	Occupation VP & Chief Commercial Officer
--------------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
465.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.4393**

Amount of Each Receipt this Period  
174.00

Payroll Deduction (\$29.00 semi-monthly)

Full Name (Last, First, Middle Initial)  
**B. Robert A. Zmudka**

Mailing Address 624 Willow Road

City Winnetka	State IL	Zip Code 60093
------------------	-------------	-------------------

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

Name of Employer GATX Corporation	Occupation VP & Group Exec., NA Sales & Marketing
--------------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

**Transaction ID : SA11AI.4394**

Amount of Each Receipt this Period  
150.00

Payroll Deduction (\$25.00 semi-monthly)

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

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 M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	324.00
<b>TOTAL</b> This Period (last page this line number only).....▶	729.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

Full Name (Last, First, Middle Initial)

**A. BENISHEK FOR CONGRESS, INC.**

Mailing Address PO BOX 108

City State Zip Code  
GLADSTONE MI 49837

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**BENISHEK FOR CONGRESS, INC.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 12 / 2014

Transaction ID : **SB23.4379**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BILL FLORES FOR CONGRESS**

Mailing Address PO BOX 6207

City State Zip Code  
BRYAN TX 77805

Purpose of Disbursement  
Political Contribution

Category/  
Type

Candidate Name

**BILL FLORES FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: TX District: 17

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

Transaction ID : **SB23.4383**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BILL SHUSTER FOR CONGRESS**

Mailing Address PO BOX 27

City State Zip Code  
HOLLIDAYSBURG PA 16648

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**BILL SHUSTER FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 14 / 2014

Transaction ID : **SB23.4377**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

Full Name (Last, First, Middle Initial)

**A. DAN LIPINSKI FOR CONGRESS**

Mailing Address P.O. BOX 520

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**DAN LIPINSKI FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IL District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

Transaction ID : **SB23.4378**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DUNCAN FOR CONGRESS**

Mailing Address PO BOX 2646

City KNOXVILLE State TN Zip Code 37901

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**DUNCAN FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TN District: 02

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

Transaction ID : **SB23.4386**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DICK DURBIN COMMITTEE**

Mailing Address PO BOX 1949

City SPRINGFIELD State IL Zip Code 62705

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**FRIENDS OF DICK DURBIN COMMITTEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2014

Transaction ID : **SB23.4380**

Amount of Each Disbursement this Period

2600.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4600.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**GATX CORPORATION GOOD GOVERNMENT PROGRAM**

Full Name (Last, First, Middle Initial)

**A. KAPTUR FOR CONGRESS**

Mailing Address P.O. BOX 899

City TOLEDO State OH Zip Code 43697

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**KAPTUR FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 09

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2014

Transaction ID : SB23.4376

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

1000.00

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

8600.00