## STATEMENT OF

PAGE 1 / 4

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Genesee & Wyoming Inc. PAC 2550 Kingston Road ADDRESS (number and street) Suite 312 (Check if address is changed) York 17402 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jvest@gwrr.com (Check if address is changed) Optional Second E-Mail Address ksmith@gwrr,com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2017 C00289058 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Vest, Jerry, , , Type or Print Name of Treasurer Vest, Jerry, , , [Electronically Filed] 09 05 2017 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FEC Fo	orm 1 (Revised 02/2009)	Page <b>2</b>			
	COMMITTEE  Committee:				
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate					
Candidate Party Affiliat	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Cor		(Democratic,			
(d)		Republican, etc.) Party.			
Political A	action Committee (PAC):				
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nnected organization is a			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated fund or party			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fund	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
Com	nmittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
4					

FEC <b>Form 1</b> (Revi	ised 02/2009)	Page <b>3</b>
Write or Type Committee N	Name	
Genesee & V	Vyoming Inc. PAC	
6. Name of Any Connect	ted Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Genesee & Wyomi	ing Inc.	
	20 West Avenue	
Mailing Address		
	Darien CT 068	<u>                                     </u>
	CITY STATE	ZIP CODE
Relationship: <b>x</b> Conn	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the person i	n possession of committee
Lubin	n, Aimee, Steel, ,	
Full Name	,800 17th Street, NW	
Mailing Address	Suite 1100	
		2006
	Washington DC 200	<del>                                      </del>
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	- 828 - 1895
. <b>Treasurer:</b> List the name any designated agent (e	ne and address (phone number optional) of the treasurer of the committee; and the e.g., assistant treasurer).	ne name and address of
	Jerry, , ,	
of Treasurer	PO Box 38652	
Mailing Address	<u> </u>	
	D	
	Pittsburgh PA 152	
Title or Position Treasurer	CITY STATE	ZIP CODE  1 963   1 1805
	Telephone number	

	n 1 (Revised 0	2/2009)		Page <b>4</b>
Full Name of Designated Agent	Smith, Kim, , ,	, 		
Mailing Address	_2	2550 Kingston Road		
	S	Suite 312		
		York PA CITY STATE		ZIP CODE
Title or Position Assistant Treasu	urer	Telephone number	717 –	771   -   1702
Banks or Other safety deposit bo Name of Bank, D	oxes or maintain		oosits funds, hold	s accounts, rents
Mailing Address	2	508 Eastern Boulevard		
	L			
	Γ,	York PA	17402	
		York PA		ZIP CODE
Name of Bank, D	L			ZIP CODE
Name of Bank, D	L			ZIP CODE
Name of Bank, D	L			ZIP CODE
	L			ZIP CODE
	L			ZIP CODE