

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Rayonier Inc. Good Government Committee

ADDRESS (number and street) 221 North Hogan Street
Box 329
 Check if different than previously reported. (ACC)
Jacksonville FL 32202

2. **FEC IDENTIFICATION NUMBER** C00451757
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

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 Scott Winer

Signature of Treasurer Electronically Filed by Scott Winer Date 07 28 2009

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Rayonier Inc. Good Government Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | | |
|---|--|--|--|----------|---|---|---|---|--|--|----------|
| 6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | <table border="1"><tr><td>12100.00</td></tr></table> | 12100.00 |
| Y | Y | Y | Y | | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | | |
| 12100.00 | | | | | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | <table border="1"><tr><td>12100.00</td></tr></table> | 12100.00 | | | | | | | | | |
| 12100.00 | | | | | | | | | | | |
| (c) Total Receipts (from Line 19) | <table border="1"><tr><td>12700.00</td></tr></table> | 12700.00 | <table border="1"><tr><td>12700.00</td></tr></table> | 12700.00 | | | | | | | |
| 12700.00 | | | | | | | | | | | |
| 12700.00 | | | | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | <table border="1"><tr><td>24800.00</td></tr></table> | 24800.00 | <table border="1"><tr><td>24800.00</td></tr></table> | 24800.00 | | | | | | | |
| 24800.00 | | | | | | | | | | | |
| 24800.00 | | | | | | | | | | | |
| 7. Total Disbursements (from Line 31) | <table border="1"><tr><td>6500.00</td></tr></table> | 6500.00 | <table border="1"><tr><td>6500.00</td></tr></table> | 6500.00 | | | | | | | |
| 6500.00 | | | | | | | | | | | |
| 6500.00 | | | | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <table border="1"><tr><td>18300.00</td></tr></table> | 18300.00 | <table border="1"><tr><td>18300.00</td></tr></table> | 18300.00 | | | | | | | |
| 18300.00 | | | | | | | | | | | |
| 18300.00 | | | | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1"><tr><td>0.00</td></tr></table> | 0.00 | | | | | | | | | |
| 0.00 | | | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1"><tr><td>0.00</td></tr></table> | 0.00 | | | | | | | | | |
| 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Rayonier Inc. Good Government 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) | 11150.00 | 11150.00 |
| (ii) Unitemized | 1550.00 | 1550.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 12700.00 | 12700.00 |
| (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) | 12700.00 | 12700.00 |
| 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 Transfer (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)) | 12700.00 | 12700.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 12700.00 | 12700.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared 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..... | 6500.00 | 6500.00 |
| 24. Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Expenditures Made by Party Committees (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) Shared 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)).. | 6500.00 | 6500.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 6500.00 | 6500.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 29

| 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) | 12700.00 | 12700.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 12700.00 | 12700.00 |
| 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 / 29
(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)
Rayonier Inc. Good Government Committee

A. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
02 / 12 / 2009

Transaction ID: SA11AI.4120

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
02 / 26 / 2009

Transaction ID: SA11AI.4127

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 12 / 2009

Transaction ID: SA11AI.4133

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 300.00

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 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.4139

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.4217

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.4148

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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 8 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rayonier Inc. Good Government Committee

A. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 05 / 07 / 2009
Transaction ID: SA11AI.4160

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 21 / 2009
Transaction ID: SA11AI.4166

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Michael M. Bell

Mailing Address 96071 Park Place

City State Zip Code
Fernandina Beach FL 32034

FEC ID number of contributing federal political committee. C

Name of Employer Rayonier Inc. Occupation Director, External Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 06 / 04 / 2009
Transaction ID: SA11AI.4172

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 300.00

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 9 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Michael M. Bell | Date of Receipt MM / DD / YYYY 06 / 18 / 2009 |
| | Mailing Address 96071 Park Place | Transaction ID: SA11AI.4225 |
| | City State Zip Code Fernandina Beach FL 32034 | Amount of Each Receipt this Period 100.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation Director, External Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Paul G. Boynton | Date of Receipt MM / DD / YYYY 02 / 12 / 2009 |
| | Mailing Address 1008 Arbor Lane | Transaction ID: SA11AI.4125 |
| | City State Zip Code Jacksonville FL 32207 | Amount of Each Receipt this Period 75.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Performance Fibers & Wood Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Paul G. Boynton | Date of Receipt MM / DD / YYYY 02 / 26 / 2009 |
| | Mailing Address 1008 Arbor Lane | Transaction ID: SA11AI.4131 |
| | City State Zip Code Jacksonville FL 32207 | Amount of Each Receipt this Period 75.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Performance Fibers & Wood Products Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 250.00 |
| 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 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | | |
|---|---|---|---|
| A. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt |
| | Mailing Address 1008 Arbor Lane | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2009 |
| | City | State | Zip Code |
| | Jacksonville | FL | 32207 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4137 |
| Name of Employer Rayonier Inc. | | Occupation SVP, Performance Fibers & Wood Products | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 375.00 | 75.00 |

| | | | |
|---|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt |
| | Mailing Address 1008 Arbor Lane | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 26 / 2009 |
| | City | State | Zip Code |
| | Jacksonville | FL | 32207 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4146 |
| Name of Employer Rayonier Inc. | | Occupation SVP, Performance Fibers & Wood Products | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 450.00 | 75.00 |

| | | | |
|---|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt |
| | Mailing Address 1008 Arbor Lane | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2009 |
| | City | State | Zip Code |
| | Jacksonville | FL | 32207 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4152 |
| Name of Employer Rayonier Inc. | | Occupation SVP, Performance Fibers & Wood Products | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 525.00 | 75.00 |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 225.00 |
| 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 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | | | | |
|-----------|---|---|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt MM / DD / YYYY 04 / 23 / 2009 | | |
| | Mailing Address 1008 Arbor Lane | | Transaction ID: SA11AI.4158 | | |
| | City Jacksonville | State FL | Zip Code 32207 | Amount of Each Receipt this Period 75.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Performance Fibers & Wood Products | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 |
|---|------------------------------------|

| | | | | | |
|-----------|---|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt MM / DD / YYYY 05 / 07 / 2009 | | |
| | Mailing Address 1008 Arbor Lane | | Transaction ID: SA11AI.4164 | | |
| | City Jacksonville | State FL | Zip Code 32207 | Amount of Each Receipt this Period 75.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Performance Fibers & Wood Products | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 675.00 |
|---|------------------------------------|

| | | | | | |
|-----------|---|---|---|---|--|
| C. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt MM / DD / YYYY 05 / 21 / 2009 | | |
| | Mailing Address 1008 Arbor Lane | | Transaction ID: SA11AI.4170 | | |
| | City Jacksonville | State FL | Zip Code 32207 | Amount of Each Receipt this Period 75.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Performance Fibers & Wood Products | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 750.00 |
|---|------------------------------------|

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 225.00 |
| 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 12 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | | | | |
|-----------|---|---|---|---|--|
| A. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt MM / DD / YYYY 06 / 04 / 2009 | | |
| | Mailing Address 1008 Arbor Lane | | Transaction ID: SA11AI.4176 | | |
| | City Jacksonville | State FL | Zip Code 32207 | Amount of Each Receipt this Period 75.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Performance Fibers & Wood Products | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 825.00 |
|---|------------------------------------|

| | | | | | |
|-----------|---|---|---|---|--|
| B. | Full Name (Last, First, Middle Initial) Paul G. Boynton | | Date of Receipt MM / DD / YYYY 06 / 18 / 2009 | | |
| | Mailing Address 1008 Arbor Lane | | Transaction ID: SA11AI.4231 | | |
| | City Jacksonville | State FL | Zip Code 32207 | Amount of Each Receipt this Period 75.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Performance Fibers & Wood Products | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 900.00 |
|---|------------------------------------|

| | | | | | |
|-----------|---|-------------------------------------|---|--|--|
| C. | Full Name (Last, First, Middle Initial) Timothy H. Brannon | | Date of Receipt MM / DD / YYYY 01 / 29 / 2009 | | |
| | Mailing Address 3305 St. Johns Avenue | | Transaction ID: SA11AI.4115 | | |
| | City Jacksonville | State FL | Zip Code 32205 | Amount of Each Receipt this Period 150.00 | |
| | FEC ID number of contributing federal political committee. C | | | | |
| | Name of Employer Rayonier Inc. | Occupation SVP, Forest Resources | | | |

| | |
|---|------------------------------------|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 300.00 |
|---|------------------------------------|

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 300.00 |
| 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 13 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2009

Transaction ID: SA11AI.4122

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
02 / 26 / 2009

Transaction ID: SA11AI.4128

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: SA11AI.4134

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 14 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Timothy H. Brannon | Date of Receipt MM / DD / YYYY 03 / 26 / 2009 |
| | Mailing Address 3305 St. Johns Avenue | Transaction ID: SA11AI.4140 |
| | City State Zip Code Jacksonville FL 32205 | Amount of Each Receipt this Period 150.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Forest Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 900.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Timothy H. Brannon | Date of Receipt MM / DD / YYYY 04 / 09 / 2009 |
| | Mailing Address 3305 St. Johns Avenue | Transaction ID: SA11AI.4149 |
| | City State Zip Code Jacksonville FL 32205 | Amount of Each Receipt this Period 150.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Forest Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1050.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Timothy H. Brannon | Date of Receipt MM / DD / YYYY 04 / 23 / 2009 |
| | Mailing Address 3305 St. Johns Avenue | Transaction ID: SA11AI.4154 |
| | City State Zip Code Jacksonville FL 32205 | Amount of Each Receipt this Period 150.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Forest Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 1200.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 450.00 |
| 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 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.4161

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: SA11AI.4167

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Timothy H. Brannon

Mailing Address 3305 St. Johns Avenue

City State Zip Code
Jacksonville FL 32205

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

Name of Employer Rayonier Inc. Occupation SVP, Forest Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: SA11AI.4173

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Timothy H. Brannon | Date of Receipt MM / DD / YYYY 06 / 18 / 2009 |
| | Mailing Address 3305 St. Johns Avenue | Transaction ID: SA11AI.4226 |
| | City State Zip Code Jacksonville FL 32205 | Amount of Each Receipt this Period 150.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation SVP, Forest Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) Larry G. Davis | Date of Receipt MM / DD / YYYY 03 / 12 / 2009 |
| | Mailing Address 4988 Spanish Oak Circle | Transaction ID: SA11AI.4136 |
| | City State Zip Code Fernandina Beach FL 32034 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation Director, EFR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) Larry G. Davis | Date of Receipt MM / DD / YYYY 03 / 26 / 2009 |
| | Mailing Address 4988 Spanish Oak Circle | Transaction ID: SA11AI.4143 |
| | City State Zip Code Fernandina Beach FL 32034 | Amount of Each Receipt this Period 50.00 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer Rayonier Inc. Occupation Director, EFR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 250.00 |
| 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 17 / 29
(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)
Rayonier Inc. Good Government Committee

A.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Larry G. Davis | | Date of Receipt MM / DD / YYYY 04 / 09 / 2009 |
| Mailing Address 4988 Spanish Oak Circle | | Transaction ID: SA11AI.4151 |
| City Fernandina Beach | State FL | Zip Code 32034 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer Rayonier Inc. | Occupation Director, EFR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 350.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Larry G. Davis | | Date of Receipt MM / DD / YYYY 04 / 23 / 2009 |
| Mailing Address 4988 Spanish Oak Circle | | Transaction ID: SA11AI.4156 |
| City Fernandina Beach | State FL | Zip Code 32034 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer Rayonier Inc. | Occupation Director, EFR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 400.00 | |

C.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Larry G. Davis | | Date of Receipt MM / DD / YYYY 05 / 07 / 2009 |
| Mailing Address 4988 Spanish Oak Circle | | Transaction ID: SA11AI.4163 |
| City Fernandina Beach | State FL | Zip Code 32034 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 50.00 |
| Name of Employer Rayonier Inc. | Occupation Director, EFR | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 150.00 |
| 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 18 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Larry G. Davis

Mailing Address 4988 Spanish Oak Circle

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, EFR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: SA11AI.4169

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Larry G. Davis

Mailing Address 4988 Spanish Oak Circle

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, EFR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: SA11AI.4175

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Larry G. Davis

Mailing Address 4988 Spanish Oak Circle

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation Director, EFR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2009

Transaction ID: SA11AI.4230

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 19 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: SA11AI.4135

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: SA11AI.4141

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 09 / 2009

Transaction ID: SA11AI.4150

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 20 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.4155

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.4162

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.4168

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 / 29
(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)
Rayonier Inc. Good Government Committee

A.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: SA11AI.4174

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Charles H. Hood

Mailing Address 1478 Riverplace Blvd, #706

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation VP, Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2009

Transaction ID: SA11AI.4227

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Charles Margiotta

Mailing Address 7545 Founders Way

City State Zip Code
Ponte Vedra Beach FL 32082

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

Name of Employer Rayonier Inc. Occupation SVP, Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2009

Transaction ID: SA11AI.4119

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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 22 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rayonier Inc. Good Government Committee

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Charles Margiotta</p> <p>Mailing Address 7545 Founders Way</p> <p>City State Zip Code Ponte Vedra Beach FL 32082</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rayonier Inc. Occupation SVP, Real Estate</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 400.00</p> | <p>Date of Receipt 02 / 26 / 2009</p> <p>Transaction ID: SA11AI.4126</p> <p>Amount of Each Receipt this Period 100.00</p> |
|--|--|

| | |
|--|--|
| <p>B. Full Name (Last, First, Middle Initial) Charles Margiotta</p> <p>Mailing Address 7545 Founders Way</p> <p>City State Zip Code Ponte Vedra Beach FL 32082</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rayonier Inc. Occupation SVP, Real Estate</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p> | <p>Date of Receipt 03 / 12 / 2009</p> <p>Transaction ID: SA11AI.4132</p> <p>Amount of Each Receipt this Period 100.00</p> |
|--|--|

| | |
|--|--|
| <p>C. Full Name (Last, First, Middle Initial) Charles Margiotta</p> <p>Mailing Address 7545 Founders Way</p> <p>City State Zip Code Ponte Vedra Beach FL 32082</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Rayonier Inc. Occupation SVP, Real Estate</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 600.00</p> | <p>Date of Receipt 03 / 26 / 2009</p> <p>Transaction ID: SA11AI.4138</p> <p>Amount of Each Receipt this Period 100.00</p> |
|--|--|

| | |
|--|--|
| SUBTOTAL of Receipts This Page (optional) | 300.00 |
| 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 23 / 29
(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"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | 17 |

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NAME OF COMMITTEE (In Full)
Rayonier Inc. Good Government Committee

A.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Charles Margiotta | | Date of Receipt |
| Mailing Address 7545 Founders Way | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| City State Zip Code Ponte Vedra Beach FL 32082 | | <input type="text"/> 0 4 / <input type="text"/> 0 9 / <input type="text"/> 2 0 0 9 |
| FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4147 |
| Name of Employer Rayonier Inc. | | Amount of Each Receipt this Period |
| Occupation SVP, Real Estate | | <input type="text"/> 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text"/> 700.00 |

B.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Charles Margiotta | | Date of Receipt |
| Mailing Address 7545 Founders Way | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| City State Zip Code Ponte Vedra Beach FL 32082 | | <input type="text"/> 0 4 / <input type="text"/> 2 3 / <input type="text"/> 2 0 0 9 |
| FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4153 |
| Name of Employer Rayonier Inc. | | Amount of Each Receipt this Period |
| Occupation SVP, Real Estate | | <input type="text"/> 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text"/> 800.00 |

C.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Charles Margiotta | | Date of Receipt |
| Mailing Address 7545 Founders Way | | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y |
| City State Zip Code Ponte Vedra Beach FL 32082 | | <input type="text"/> 0 5 / <input type="text"/> 0 7 / <input type="text"/> 2 0 0 9 |
| FEC ID number of contributing federal political committee. C | | Transaction ID: SA11AI.4159 |
| Name of Employer Rayonier Inc. | | Amount of Each Receipt this Period |
| Occupation SVP, Real Estate | | <input type="text"/> 100.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ |
| | | <input type="text"/> 900.00 |

| | |
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| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 300.00 |
| 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 24 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rayonier Inc. Good Government Committee

A. Full Name (Last, First, Middle Initial)
Charles Margiotta
Mailing Address 7545 Founders Way
City State Zip Code
Ponte Vedra Beach FL 32082
FEC ID number of contributing federal political committee. **C**
Name of Employer Rayonier Inc. Occupation SVP, Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 05 / 21 / 2009
Transaction ID: SA11AI.4165
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Charles Margiotta
Mailing Address 7545 Founders Way
City State Zip Code
Ponte Vedra Beach FL 32082
FEC ID number of contributing federal political committee. **C**
Name of Employer Rayonier Inc. Occupation SVP, Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt 06 / 04 / 2009
Transaction ID: SA11AI.4171
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Charles Margiotta
Mailing Address 7545 Founders Way
City State Zip Code
Ponte Vedra Beach FL 32082
FEC ID number of contributing federal political committee. **C**
Name of Employer Rayonier Inc. Occupation SVP, Real Estate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 06 / 18 / 2009
Transaction ID: SA11AI.4224
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00
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 25 / 29 |
| | <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)
Rayonier Inc. Good Government Committee

A. Full Name (Last, First, Middle Initial)
Fred J. Perrett

Mailing Address 85279 Amagansett Drive

City State Zip Code
Fernandina Beach FL 32034

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

Name of Employer Rayonier Inc. Occupation General Manager, Fernandina Mill

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2009

Transaction ID: SA11AI.4190

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lee M. Thomas

Mailing Address 3918 Alhambra Drive, West

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Rayonier Inc. Occupation Chairman, President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: SA11AI.4205

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Hans E. Vanden Noort

Mailing Address 2730 Forest Mill

City State Zip Code
Jacksonville FL 32257

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

Name of Employer Rayonier Inc. Occupation SVP and Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2009

Transaction ID: SA11AI.4182

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 5550.00

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 26 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Rayonier Inc. Good Government Committee

A. Full Name (Last, First, Middle Initial)
Hans E. Vanden Noort
Mailing Address 2730 Forest Mill

City State Zip Code
Jacksonville FL 32257

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

Name of Employer Rayonier Inc. Occupation SVP and Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.4183

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Hans E. Vanden Noort
Mailing Address 2730 Forest Mill

City State Zip Code
Jacksonville FL 32257

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

Name of Employer Rayonier Inc. Occupation SVP and Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
05 / 21 / 2009

Transaction ID: SA11AI.4184

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Hans E. Vanden Noort
Mailing Address 2730 Forest Mill

City State Zip Code
Jacksonville FL 32257

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

Name of Employer Rayonier Inc. Occupation SVP and Chief Financial Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: SA11AI.4185

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 27 / 29 | |
| | (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"/> 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)
Rayonier Inc. Good Government Committee

A.

| | | | |
|---|---|---------------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial) Hans E. Vanden Noort | | Date of Receipt | |
| Mailing Address 2730 Forest Mill | | M M / D D / Y Y Y Y 06 / 18 / 2009 | |
| City | State | Zip Code | Transaction ID: SA11AI.4228 |
| Jacksonville | FL | 32257 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | C | 50.00 |
| Name of Employer Rayonier Inc. | Occupation SVP and Chief Financial Officer | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 450.00 | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 50.00 |
| TOTAL This Period (last page this line number only) | 11150.00 |

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 |

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)
Rayonier Inc. Good Government Committee

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Bill Nelson for US Senate | Transaction ID: SB23.4201 |
| | Mailing Address 500 RED SAIL WAY | Date of Disbursement 04 / 24 / 2009 |
| | City SATELLITE BEACH State FL Zip Code 32937 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln | Transaction ID: SB23.4193 |
| | Mailing Address PO BOX 3197 | Date of Disbursement 02 / 09 / 2009 |
| | City LITTLE ROCK State AR Zip Code 72203 | Amount of Each Disbursement this Period 1000.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) Friends of Corrine Brown | Transaction ID: SB23.4197 |
| | Mailing Address 3563 Carriage Walk Lane | Date of Disbursement 02 / 26 / 2009 |
| | City Laurel State MD Zip Code 20724 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement | |
| | Candidate Name | Category/Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 03 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 2500.00 |
| 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)
Rayonier Inc. Good Government Committee

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Georgians for Isakson | Transaction ID: SB23.4203 Date of Disbursement 05 / 12 / 2009 |
| | Mailing Address POST OFFICE BOX 250116 | Amount of Each Disbursement this Period 2000.00 |
| | City ATLANTA State GA Zip Code 30325 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) Michaud for Congress | Transaction ID: SB23.4195 Date of Disbursement 02 / 18 / 2009 |
| | Mailing Address 213 Lisbon St | Amount of Each Disbursement this Period 1000.00 |
| | City Lewiston State ME Zip Code 04240 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) Norm Dicks for Congress | Transaction ID: SB23.4199 Date of Disbursement 04 / 10 / 2009 |
| | Mailing Address PO Box 1663 | Amount of Each Disbursement this Period 1000.00 |
| | City Tacoma State WA Zip Code 98401 | |
| | Purpose of Disbursement | Category/Type |
| | Candidate Name | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 06 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 4000.00 |
| TOTAL This Period (last page this line number only) | 6500.00 |