

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
Norfolk Southern Good Government Fund

ADDRESS (number and street) Three Commercial Place
 Check if different than previously reported. (ACC)
Norfolk VA 23510

2. **FEC IDENTIFICATION NUMBER** C00009282
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 08 01 2006 through 08 31 2006

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 Marque Ledoux

Signature of Treasurer Electronically Filed by Marque Ledoux Date 04 11 2007

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**

Write or Type Committee Name
Norfolk Southern Good Government Fund

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		88418.05
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	117835.30									
(c) Total Receipts (from Line 19)	41767.24	335898.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	159602.54	424316.60								
7. Total Disbursements (from Line 31)	41550.00	306296.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	118052.54	118020.54								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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
Norfolk Southern Good Government Fund

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	38510.65	273956.50
(i) Itemized (use Schedule A)	3256.59	61942.05
(ii) Unitemized	41767.24	335898.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	41767.24	335898.55
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))	41767.24	335898.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	41767.24	335898.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	42000.00	269000.00
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	54.00
(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	54.00
29. Other Disbursements.....	-450.00	37242.06
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))..	41550.00	306296.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41550.00	306296.06

DETAILED SUMMARY PAGE
of Disbursements

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)	41767.24	335898.55
34. Total Contribution Refunds (from Line 28(d))	0.00	54.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41767.24	335844.55
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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 108						
	(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

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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. KATHY G MILES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 487 S EWING AVE		Transaction ID: PR103452518284	
City DECATUR	State IL	Zip Code 62522	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$15.00 Semi-Monthly) _____	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV OFFICE MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		

Full Name (Last, First, Middle Initial) B. JASON ADAM BROWNING		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 309 BRANDON DR		Transaction ID: PR111591298284	
City BLUEFIELD	State VA	Zip Code 24605	Amount of Each Receipt this Period _____ 46.00
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$23.00 Semi-Monthly) _____	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation TRAINMASTER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 368.00		

Full Name (Last, First, Middle Initial) C. MICHAEL H ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1906 HASTINGS CT		Transaction ID: PR111591308284	
City GAINESVILLE	State GA	Zip Code 30504	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$25.00 Semi-Monthly) _____	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN DIVISION ENGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 126.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. J G PETTWAY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 817 OMAHA DR		Transaction ID: PR113715508284
City NORCROSS State GA Zip Code 30093	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$46.33 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR NT SYSTEM SUPP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00	

Full Name (Last, First, Middle Initial) B. THOMAS C HEINRICH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4186 IRISH HIGHLAND DR		Transaction ID: PR113715538284
City POWDER SPRINGS State GA Zip Code 30127	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ENGR STRUCT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	

Full Name (Last, First, Middle Initial) C. THURMAN D WYATT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1210 OLD JACKSON RD		Transaction ID: PR113715558284
City LOCUST GROVE State GA Zip Code 30248	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SYS ENG PUB IMPROV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 190.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. J J LESTRANGE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 142 TRIPLE CROWN CIR		Transaction ID: PR113715568284
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR TERMINAL OPER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. T L REYNOLDS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4761 ELLINGTON CT		Transaction ID: PR113715578284
City State Zip Code MARIETTA GA 30067	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SYSTEM GEN RF ENGS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. CLAUDE E ELKINS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1520 S ELEANOR CT		Transaction ID: PR115799138284
City State Zip Code NORFOLK VA 23508	Amount of Each Receipt this Period _____ 102.70	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MKTG & SLS DOM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 402.70	P/R Deduction (\$51.90 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	_____ 302.70
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. PAUL A GILLEY		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 11705 FOREST PARK LN		Transaction ID: PR115799158284
City CARMEL	State IN	Zip Code 46033
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 78.34
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP	P/R Deduction (\$40.42 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.38	

Full Name (Last, First, Middle Initial) B. LINDA VANESSA HILL		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3187 MANGUM LN SW		Transaction ID: PR123152508284
City ATLANTA	State GA	Zip Code 30311
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNE REAL EST	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. NEVILLE M WILSON, II		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 667 KING SWORD CT SE		Transaction ID: PR123152518284
City MABLETON	State GA	Zip Code 30126
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 95.84
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF TERMINAL	P/R Deduction (\$47.92 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 479.87	

SUBTOTAL of Receipts This Page (optional)	▶	224.18
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) PATRICK T WHITEHEAD Mailing Address 186 PRIMROSE DR City DYER State IN Zip Code 46311 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR123152528284 Amount of Each Receipt this Period 90.00 P/R Deduction (\$45.00 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: SUPT OF TERMINAL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 540.00		

B. Full Name (Last, First, Middle Initial) DAVID G PRICE Mailing Address 16633 PINE RIDGE PASS City LEO State IN Zip Code 46765 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR123152538284 Amount of Each Receipt this Period 98.08 P/R Deduction (\$49.04 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: DIV MGR MECH OPNS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 580.00		

C. Full Name (Last, First, Middle Initial) JAMES A SQUIRES Mailing Address 6306 POWHATAN AVE City NORFOLK State VA Zip Code 23508 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR123152588284 Amount of Each Receipt this Period 416.66 P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer: NORFOLK SOUTHERN CORPORAT-ION Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.66		

SUBTOTAL of Receipts This Page (optional)	604.74
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) HENRY C WOLF		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 334 S BOTETOURT CT		Transaction ID: PR123152598284	
City NORFOLK	State VA	Zip Code 23507	Amount of Each Receipt this Period _____ 416.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer NORFOLK SOUTHERN CORPORATION		Occupation _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 416.66	
P/R Deduction (\$208.33 Semi-Monthly)			

B. Full Name (Last, First, Middle Initial) JOHN MEADE SCHEIB		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3329 GLEN EDEN QUAY		Transaction ID: PR128594018284	
City VIRGINIA BEACH	State VA	Zip Code 23452	Amount of Each Receipt this Period _____ 117.50
FEC ID number of contributing federal political committee. C _____			
Name of Employer _____		Occupation _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 455.00	
P/R Deduction (\$58.75 Semi-Monthly)			

C. Full Name (Last, First, Middle Initial) DAVID JEREMY KRITZ		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10011 KENSINGTON PKWY		Transaction ID: PR131940368284	
City KENSINGTON	State MD	Zip Code 20895	Amount of Each Receipt this Period _____ 232.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer _____		Occupation _____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 464.00	
P/R Deduction (\$60.42 Semi-Monthly)			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 766.16
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DONALD W SEALE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1333 BAFFY LOOP		Transaction ID: PR38340448284	
City CHESAPEAKE	State VA	Zip Code 23320	Amount of Each Receipt this Period 416.66
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation EVP SALES & MRKTING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3249.94		
P/R Deduction (\$208.33 Semi-Monthly)			

Full Name (Last, First, Middle Initial) B. JOSEPH C DIMINO		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 255 COLLEGE CROSS APT 71		Transaction ID: PR38340608284	
City NORFOLK	State VA	Zip Code 23510	Amount of Each Receipt this Period 416.66
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP & CORP COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1859.99		
P/R Deduction (\$208.33 Semi-Monthly)			

Full Name (Last, First, Middle Initial) C. KARIN L STAMY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 503 16TH ST		Transaction ID: PR38340618284	
City VIRGINIA BEACH	State VA	Zip Code 23451	Amount of Each Receipt this Period 108.34
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 837.46		
P/R Deduction (\$54.17 Semi-Monthly)			

SUBTOTAL of Receipts This Page (optional) ▶	941.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 108
	<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	

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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. LARRY R COLLINGWOOD		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8450 HAVEN WOOD TRL		Transaction ID: PR38340628284	
City ROSWELL	State GA	Zip Code 30076	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP INDUSTRIAL DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		
		P/R Deduction (\$84.42 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. JOHN H FRIEDMANN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 707 BALDWIN AVE		Transaction ID: PR38340648284	
City NORFOLK	State VA	Zip Code 23517	Amount of Each Receipt this Period _____ 133.34
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV SUPERINTENDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1035.78		
		P/R Deduction (\$72.92 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. CHARLES J BRENNER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 730 RIVER STRAND		Transaction ID: PR38340658284	
City CHESAPEAKE	State VA	Zip Code 23320	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP MKT DEV & SYS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$87.50 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 203.34
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. PHILIP G PISERCHIA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 700 RALEIGH AVE APT A		Transaction ID: PR38340678284	
City NORFOLK	State VA	Zip Code 23507	Amount of Each Receipt this Period _____ 120.84
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR AGR DEV & STAFF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1040.84		
		P/R Deduction (\$60.42 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. FRANK R MACCHIAVERNA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 216 DERRICK DR		Transaction ID: PR38340688284	
City IRMO	State SC	Zip Code 29063	Amount of Each Receipt this Period _____ 97.50
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 776.24		
		P/R Deduction (\$60.56 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. W C JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2208 NINE OAKS DR NW		Transaction ID: PR38340708284	
City KENNESAW	State GA	Zip Code 30152	Amount of Each Receipt this Period _____ 120.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR C&S		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 960.00		
		P/R Deduction (\$60.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 338.34
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. J F FOLK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6071 RIVER CRES		Transaction ID: PR38340718284	
City NORFOLK	State VA	Zip Code 23505	Amount of Each Receipt this Period _____ 284.26
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP PLNNG & ANALYSIS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2207.04		

P/R Deduction (\$138.67 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. JOHN A IRWIN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2626 PEACHTREE RD NW UNIT 1902 UNIT #1902		Transaction ID: PR38340748284	
City ATLANTA	State GA	Zip Code 30305	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST GEN MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 640.00		

P/R Deduction (\$40.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. KENNETH J OBRIEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2336 WILCHESTER GLEN DR		Transaction ID: PR38340758284	
City VIRGINIA BEACH	State VA	Zip Code 23456	Amount of Each Receipt this Period _____ 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1000.00		

P/R Deduction (\$62.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 489.26
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. RICHARD J DAVISON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2457 HAVERSHAM CLOSE		Transaction ID: PR38340768284	
City State Zip Code VIRGINIA BEACH VA 23454	Amount of Each Receipt this Period _____ 306.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP HUMAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1840.00		
		P/R Deduction (\$210.17 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. JAMES R SCHAAF		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3309 KENWICK TRL		Transaction ID: PR38340778284	
City State Zip Code ROANOKE VA 24018	Amount of Each Receipt this Period _____ 113.04		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 911.18		
		P/R Deduction (\$65.04 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. H CRAIG LEWIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 602 SPRUCE ST		Transaction ID: PR38340788284	
City State Zip Code PHILADELPHIA PA 19106	Amount of Each Receipt this Period _____ 416.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP CORPORATE AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3063.50		
		P/R Deduction (\$208.33 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 836.36
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 17 / 108
	(check only one)	
	<input checked="" 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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. RONALD A LISTWAK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 626 BEAUMONT CIR		Transaction ID: PR38340798284	
City WEST CHESTER	State PA	Zip Code 19380	Amount of Each Receipt this Period _____ 157.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP UTILITY NORTH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1256.00		
		P/R Deduction (\$81.54 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. GERHARD A THELEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 125 FRANKLIN PL NE		Transaction ID: PR38340808284	
City ATLANTA	State GA	Zip Code 30342	Amount of Each Receipt this Period _____ 416.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP MECHANICAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3333.28		
		P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. DANIEL M MAZUR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1107 WALNUT NECK AVE		Transaction ID: PR38340818284	
City CHESAPEAKE	State VA	Zip Code 23320	Amount of Each Receipt this Period _____ 173.34
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP STRATEGIC PLANNG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1328.34		
		P/R Deduction (\$208.33 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 747.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. WILLIAM A GALANKO		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1208 CEDAR POINT DR		Transaction ID: PR38340828284
City VIRGINIA BEACH	State VA	Zip Code 23451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.66
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP FINANCIAL PLNG.	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2854.98	

Full Name (Last, First, Middle Initial) B. SCOTT R WEAVER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 230 W TAZEWELL ST APT 210		Transaction ID: PR38340838284
City NORFOLK	State VA	Zip Code 23510
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 68.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR LABOR RELATIONS	P/R Deduction (\$60.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 544.00	

Full Name (Last, First, Middle Initial) C. WILLIAM E INGRAM		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 540 PEMBROKE AVE		Transaction ID: PR38340848284
City NORFOLK	State VA	Zip Code 23507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR STRATEGIC PLANNG	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	534.66
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. J H BLANCHFIELD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 149 AGNEW RD		Transaction ID: PR38340888284
City MOORESVILLE	State NC	Zip Code 28117
Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR MTCE EQPT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00	
P/R Deduction (\$20.00 Semi-Monthly)		

Full Name (Last, First, Middle Initial) B. WILLIAM J HARRIS, III		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4158 E BAY CIR		Transaction ID: PR38340898284
City LEWIS CENTER	State OH	Zip Code 43035
Amount of Each Receipt this Period _____ 115.58		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 902.48	
P/R Deduction (\$60.83 Semi-Monthly)		

Full Name (Last, First, Middle Initial) C. ROBERT W BLANK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7623 AMBER CT		Transaction ID: PR38340928284
City ROANOKE	State VA	Zip Code 24018
Amount of Each Receipt this Period _____ 244.80		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR RES & TESTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1443.92	
P/R Deduction (\$122.40 Semi-Monthly)		

SUBTOTAL of Receipts This Page (optional) ▶	400.38
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. GERALD R STEELE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8220 OLD TAVERN RD		Transaction ID: PR38340938284	
City State Zip Code ROANOKE VA 24019	Amount of Each Receipt this Period _____ 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR PURCHASING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 480.00		P/R Deduction (\$30.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. MICHAEL ROBERT MCCLELLAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 531 WARREN CRES		Transaction ID: PR38340948284	
City State Zip Code NORFOLK VA 23507	Amount of Each Receipt this Period _____ 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP INTMDL&AUTO MKTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1000.00		P/R Deduction (\$208.33 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. W B WINGO		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1001 EAST BROAD ST 325 OLD CITY HALL		Transaction ID: PR38340968284	
City State Zip Code RICHMOND VA 23219	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 235.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. AVAC VOLLBRECHT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 414 MOWBRAY ARCH		Transaction ID: PR38340988284	
City NORFOLK	State VA	Zip Code 23507	Amount of Each Receipt this Period _____ 34.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MKT RES & ECON		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 272.00		
		P/R Deduction (\$17.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MANFRED S BLOCK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 638 GRAYDON AVE		Transaction ID: PR38341028284	
City NORFOLK	State VA	Zip Code 23507	Amount of Each Receipt this Period _____ 62.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 496.00		
		P/R Deduction (\$31.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JEFFREY G YATES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1317 BAFFY LOOP		Transaction ID: PR38341038284	
City CHESAPEAKE	State VA	Zip Code 23320	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST DIVISION SUPT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 136.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. AS SNOW		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 86 ASHBY DR		Transaction ID: PR38341048284	
City DALEVILLE	State VA	Zip Code 24083	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. DAVID R GOODE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7301 WOODWAY LN		Transaction ID: PR38341058284	
City NORFOLK	State VA	Zip Code 23505	Amount of Each Receipt this Period _____ 416.66
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SPEC ADV TO THE CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3541.61		
		P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JOEL E HARRELL, III		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3636 WILDWOOD FARMS DR		Transaction ID: PR38341068284	
City DULUTH	State GA	Zip Code 30096	Amount of Each Receipt this Period _____ 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1200.00		
		P/R Deduction (\$87.50 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 616.66
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
C RUSS MCDANIEL, JR

Mailing Address 4915 SHADY SIDE DR

City State Zip Code
ROANOKE VA 24018

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND DIR PROC IMPRV 6 SIG

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 895.81

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341078284

Amount of Each Receipt this Period
162.86

P/R Deduction (\$89.08 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
JOSEPH A HOPKINS

Mailing Address 6463 FAIRWAY ESTATES DR

City State Zip Code
ROANOKE VA 24018

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND AVP TAX ADMIN

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1499.94

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341088284

Amount of Each Receipt this Period
166.66

P/R Deduction (\$170.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
MARTA R STEWART

Mailing Address 1698 S WOODSIDE LN

City State Zip Code
VIRGINIA BEACH VA 23454

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND VP & CONTROLLER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1680.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341118284

Amount of Each Receipt this Period
210.00

P/R Deduction (\$105.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	539.52
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) CHARLES CHRISTOPHER WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341148284
Mailing Address 640 GREENTREE DR		Amount of Each Receipt this Period 40.00
City VIRGINIA BEACH State VA Zip Code 23452		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR BENEFITS & COMP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$40.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial) GARY W WOODS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341168284
Mailing Address 3530 WYNTERSET DR		Amount of Each Receipt this Period 171.86
City SNELLVILLE State GA Zip Code 30039		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP ENGINEERING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1374.88	P/R Deduction (\$89.06 Semi-Monthly)

C. Full Name (Last, First, Middle Initial) STEPHEN C TOBIAS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341178284
Mailing Address 789 S VILLIER CT		Amount of Each Receipt this Period 416.00
City VIRGINIA BEACH State VA Zip Code 23452		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VICE CHAIRMAN & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3328.00	P/R Deduction (\$208.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	627.86
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. VIRGINIA K FOGG		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2604 ARABIAN DR		Transaction ID: PR38341188284
City	State	Zip Code
VIRGINIA BEACH	VA	23456
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GENERAL SOLICITOR	P/R Deduction (\$105.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) B. JOHN P RATHBONE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 836 COVERDALE LN		Transaction ID: PR38341208284
City	State	Zip Code
VIRGINIA BEACH	VA	23452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.66
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation EVP ADMINISTRATION	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3333.28	

Full Name (Last, First, Middle Initial) C. ROBERT DAVID COBBS, JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 221 SILVER MAPLE DR		Transaction ID: PR38341248284
City	State	Zip Code
CHESAPEAKE	VA	23322
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.84
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP DIVERSITY & EEO	P/R Deduction (\$60.42 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional)	677.50
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. MARK S HAMILTON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 542 DORCHESTER DR		Transaction ID: PR38341258284
City State Zip Code SEVEN FIELDS PA 16046	Amount of Each Receipt this Period _____ 261.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$137.00 Se-mi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV SUPERINTENDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1121.00	

Full Name (Last, First, Middle Initial) B. ROGER A PETERSEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 500 DENHAM ARCH		Transaction ID: PR38341278284
City State Zip Code CHESAPEAKE VA 23322	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$163.83 Se-mi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GENERAL COUNSEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2250.00	

Full Name (Last, First, Middle Initial) C. KATHRYN B MCQUADE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 3071		Transaction ID: PR38341288284
City State Zip Code NORFOLK VA 23514	Amount of Each Receipt this Period _____ 416.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$208.00 Se-mi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation EVP PLANNING & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3744.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 927.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) FREDERICK BLAIR WIMBUSH Mailing Address 1330 BAFFY LOOP City CHESAPEAKE State VA Zip Code 23320 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341298284 Amount of Each Receipt this Period 416.66 P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: VP REAL ESTATE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3333.28		

B. Full Name (Last, First, Middle Initial) JEFFREY E PAIR Mailing Address PO BOX 411 City ENOLA State PA Zip Code 17025 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341308284 Amount of Each Receipt this Period 84.22 P/R Deduction (\$43.39 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: SHOP MANAGER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 399.33		

C. Full Name (Last, First, Middle Initial) ROBERT M KESLER, JR Mailing Address 6200 MONROE PL City NORFOLK State VA Zip Code 23508 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38341318284 Amount of Each Receipt this Period 416.66 P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: VP TAXATION Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2633.32		

SUBTOTAL of Receipts This Page (optional)	917.54
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JAMES E CARTER, JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3812 LITTLE NECK PT		Transaction ID: PR38341328284
City VIRGINIA BEACH	State VA	Zip Code 23452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.66
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP INTERNAL AUDIT	P/R Deduction (\$208.33 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1583.32	

Full Name (Last, First, Middle Initial) B. C H ALLISON, JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2830 AVENHAM AVE SW		Transaction ID: PR38341348284
City ROANOKE	State VA	Zip Code 24014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP STRATG SOURCNG	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. DAVID L DALE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 6048 EAGLES REST TRL		Transaction ID: PR38341358284
City SUGAR HILL	State GA	Zip Code 30518
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation PROCESS ENGINEER	P/R Deduction (\$15.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	496.66
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. W G CARPER, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2626 BELLEVUE AVE		Transaction ID: PR38341378284
City State Zip Code BLUEFIELD WV 24701	Amount of Each Receipt this Period _____ 107.74	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$83.33 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 969.66	

Full Name (Last, First, Middle Initial) B. DEZORA MORRISSETTE MARTIN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5504 WHITEHURST LANDING CT		Transaction ID: PR38341398284
City State Zip Code VIRGINIA BEACH VA 23464	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CORP SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	

Full Name (Last, First, Middle Initial) C. THOMAS E RAPPOLD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5623 CLUB LN		Transaction ID: PR38341408284
City State Zip Code ROANOKE VA 24018	Amount of Each Receipt this Period _____ 157.42	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$163.75 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP DOM UT IND CL MK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1259.36	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 315.16
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. RICHARD D WHITE, III		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6705 CHRISTOPHER DR		Transaction ID: PR38341418284	
City ROANOKE	State VA	Zip Code 24018	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP MATERIAL MGMT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1230.00		
		P/R Deduction (\$125.00 Se- mi-Monthly)	

Full Name (Last, First, Middle Initial) B. DANIEL D SMITH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3245 LAUREL DR		Transaction ID: PR38341438284	
City BLACKSBURG	State VA	Zip Code 24060	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SVP ENERGY & PROP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		
		P/R Deduction (\$208.33 Se- mi-Monthly)	

Full Name (Last, First, Middle Initial) C. JEFFREY A MCCRACKEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 150 ROLLING RD		Transaction ID: PR38341448284	
City SOCIAL CIRCLE	State GA	Zip Code 30025	Amount of Each Receipt this Period _____ 139.64
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR LINE MAIN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 937.84		
		P/R Deduction (\$73.31 Sem- i-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	639.64
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. EDWARD G CODY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 3423		Transaction ID: PR38341468284	
City GREENVILLE	State SC	Zip Code 29602	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV ENGINEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 700.00		
		P/R Deduction (\$70.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MICHAEL E REID		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 405 MAGNOLIA CT		Transaction ID: PR38341528284	
City LOGANVILLE	State GA	Zip Code 30052	Amount of Each Receipt this Period _____ 265.48
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENG PROG MTCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2066.92		
		P/R Deduction (\$139.35 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. NEWELL M BAKER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1189 JOHN ADAMS DR		Transaction ID: PR38341538284	
City LAWRENCEVILLE	State GA	Zip Code 30043	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INDUSTRIAL DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 415.48
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DURWOOD S LAUGHINGHOUSE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 17945		Transaction ID: PR38341548284	
City RALEIGH	State NC	Zip Code 27619	Amount of Each Receipt this Period _____ 131.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1103.28		
		P/R Deduction (\$67.92 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MARCELLUS CLEMENT KIRCHNER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 721 COLONIAL AVE		Transaction ID: PR38341568284	
City NORFOLK	State VA	Zip Code 23507	Amount of Each Receipt this Period _____ 84.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR STRATEGIC PLANNG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 672.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. WILLIAM H JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2804 OCEAN MIST CT		Transaction ID: PR38341578284	
City VIRGINIA BEACH	State VA	Zip Code 23454	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 255.66
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. CHARLES DOUGLAS CORBIN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 12165 WEXFORD OVERLOOK		Transaction ID: PR38341598284	
City ROSWELL	State GA	Zip Code 30075	Amount of Each Receipt this Period _____ 211.66
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR LOCO MAINTENANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1325.52		

P/R Deduction (\$125.83 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. THOMAS W MAHONEY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6505 WINTER DR		Transaction ID: PR38341608284	
City BOONES MILL	State VA	Zip Code 24065	Amount of Each Receipt this Period _____ 197.24
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1380.68		

P/R Deduction (\$102.37 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. JUDITH A REECE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 341 N GARDEN LN NW		Transaction ID: PR38341618284	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Receipt this Period _____ 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INFO SYS DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 540.00		

P/R Deduction (\$75.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 468.90
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. THOMAS H MULLENIX, JR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1105 LITTLE NECK RD		Transaction ID: PR38341628284	
City State Zip Code VIRGINIA BEACH VA 23452	Amount of Each Receipt this Period _____ 137.50		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP HUMAN RESOURCES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1100.00		
		P/R Deduction (\$71.87 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. TIMOTHY A HEILIG		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2404 GLENMORE LN		Transaction ID: PR38341638284	
City State Zip Code SNELLVILLE GA 30078	Amount of Each Receipt this Period _____ 416.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP TRANS-NETWORK		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2545.02		
		P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. PAUL M DAVIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1760 CARLINGTON CT		Transaction ID: PR38341648284	
City State Zip Code GRAYSON GA 30017	Amount of Each Receipt this Period _____ 35.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation S DIR AU OP&DMG PREV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 280.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 589.16
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. C V BAKER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 521 THOMASTON ST		Transaction ID: PR38341658284	
City State Zip Code BARNESVILLE GA 30204	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP REAL ESTATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. MARK R MACMAHON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 23 BAY FRONT PL		Transaction ID: PR38341668284	
City State Zip Code HAMPTON VA 23664	Amount of Each Receipt this Period _____ 412.48		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2594.86		P/R Deduction (\$215.62 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. DONALD C MCKIBBEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 183 FOREST CIR		Transaction ID: PR38341678284	
City State Zip Code SALEM VA 24153	Amount of Each Receipt this Period _____ 90.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR LINE MAIN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 720.00		P/R Deduction (\$67.62 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 552.48
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 108
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DEWEY D SMITH		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3958 WHITE HORSE LN SE		Transaction ID: PR38341688284
City State Zip Code SMYRNA GA 30080	Amount of Each Receipt this Period _____ 253.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR SVC DES&I/L MGMT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1096.50	P/R Deduction (\$126.50 Se-mi-Monthly)

Full Name (Last, First, Middle Initial) B. MARK D PERREAULT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 950 HANOVER AVE		Transaction ID: PR38341718284
City State Zip Code NORFOLK VA 23508	Amount of Each Receipt this Period _____ 296.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GENERAL SOLICITOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2072.00	P/R Deduction (\$148.00 Se-mi-Monthly)

Full Name (Last, First, Middle Initial) C. JAMES R BAILEY, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1516 BARKSDALE CT NW		Transaction ID: PR38341728284
City State Zip Code KENNESAW GA 30152	Amount of Each Receipt this Period _____ 319.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP CUSTOMER SERVICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2031.82	P/R Deduction (\$159.50 Se-mi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 868.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER: PAGE 38 / 108

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
REUBEN CHAPMAN, VI

Mailing Address 5013 FALCON RIDGE RD

City State Zip Code
ROANOKE VA 24018

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT AVP ACCTG OPERATIONS
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1244.10

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341748284

Amount of Each Receipt this Period
156.38

P/R Deduction (\$161.67 Se-
mi-Monthly)

B. Full Name (Last, First, Middle Initial)
DAVID F JULIAN

Mailing Address 1642 DUKE OF WINDSOR RD

City State Zip Code
VIRGINIA BEACH VA 23454

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT PRES AUTO&SUP CHN SV
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1457.22

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341758284

Amount of Each Receipt this Period
183.08

P/R Deduction (\$190.25 Se-
mi-Monthly)

C. Full Name (Last, First, Middle Initial)
JOHN A IVY

Mailing Address 12205 BRIGHTON CT

City State Zip Code
KNOXVILLE TN 37922

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIV MGR MECH OPNS
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 939.68

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341778284

Amount of Each Receipt this Period
106.00

P/R Deduction (\$53.00 Sem-
i-Monthly)

SUBTOTAL of Receipts This Page (optional) ►

445.46

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DONALD D GRAAB		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 660 WEDNESBURY RD		Transaction ID: PR38341798284	
City ALPHARETTA	State GA	Zip Code 30022	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR DIR OPER & LOCO.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1467.50		
		P/R Deduction (\$208.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. STEVEN G HANES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5058 WILLIAMSBURG CT		Transaction ID: PR38341828284	
City ROANOKE	State VA	Zip Code 24018	Amount of Each Receipt this Period _____ 42.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR POLICE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 336.00		
		P/R Deduction (\$21.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. THOMAS E BAYRER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5426 DOE RUN RD		Transaction ID: PR38341838284	
City ROANOKE	State VA	Zip Code 24014	Amount of Each Receipt this Period _____ 70.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MKT RESOURS&PLNG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 560.00		
		P/R Deduction (\$35.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 528.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. C C EARHART		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1104 VALLEY OVERLOOK DR NE		Transaction ID: PR38341848284	
City ATLANTA State GA Zip Code 30324	Amount of Each Receipt this Period _____ 416.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP INFORMATION TECH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2464.00		
		P/R Deduction (\$208.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MICHAEL K QUINN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4816 TOPPING HILL DR		Transaction ID: PR38341868284	
City ROANOKE State VA Zip Code 24018	Amount of Each Receipt this Period _____ 131.26		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR STATE TAXES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1023.76		
		P/R Deduction (\$65.63 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. STEPHAN R BUDZINA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1100 JOCKEY CT		Transaction ID: PR38341888284	
City CHESAPEAKE State VA Zip Code 23322	Amount of Each Receipt this Period _____ 124.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 308.00		
		P/R Deduction (\$62.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 671.26
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
CONRAD M GOLIAS

Mailing Address 5309 HOLLY SPRINGS DR

City State Zip Code
DOUGLASVILLE GA 30135

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

Name of Employer
NS CORP GOOD GOVERNMENT FUND

Occupation
CHIEF ENGR C&S

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341898284

Amount of Each Receipt this Period
60.00

P/R Deduction (\$30.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
CHARLES RAY PRIBLE

Mailing Address 2205 HAVERSHAM CLOSE

City State Zip Code
VIRGINIA BEACH VA 23454

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

Name of Employer
NS CORP GOOD GOVERNMENT FUND

Occupation
MEDICAL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341908284

Amount of Each Receipt this Period
333.34

P/R Deduction (\$173.33 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
GEORGE J CAMILLE

Mailing Address 3217 MARKWOOD LN

City State Zip Code
SPRINGFIELD IL 62707

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

Name of Employer
NS CORP GOOD GOVERNMENT FUND

Occupation
RESIDENT VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1580.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38341918284

Amount of Each Receipt this Period
263.34

P/R Deduction (\$131.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	656.68
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 108		
	<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

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JAMES R PASCHALL		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 944 UPPER HASTINGS WAY		Transaction ID: PR38341928284
City VIRGINIA BEACH	State VA	Zip Code 23452
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 140.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN ATTORNEY	P/R Deduction (\$70.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) B. CHARLES E STINE		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 305 TREYBURN DR		Transaction ID: PR38341938284
City KNOXVILLE	State TN	Zip Code 37934
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV ENGINEER	P/R Deduction (\$60.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 635.00	

Full Name (Last, First, Middle Initial) C. JAMES M MCNABB, JR		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8424 BELLE HAVEN RD		Transaction ID: PR38341948284
City ROANOKE	State VA	Zip Code 24019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MARKETING	P/R Deduction (\$35.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

SUBTOTAL of Receipts This Page (optional)	330.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. VERNON GARY SHARP		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 730 GLEBE RD		Transaction ID: PR38341958284
City State Zip Code DALEVILLE VA 24083	Amount of Each Receipt this Period _____ 138.08	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP OPERATING RULES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1099.33	

Full Name (Last, First, Middle Initial) B. GARY G WENDORF		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 6015 WINNBROOK LN		Transaction ID: PR38341968284
City State Zip Code ROANOKE VA 24018	Amount of Each Receipt this Period _____ 134.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$67.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GROUP VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1072.00	

Full Name (Last, First, Middle Initial) C. FREDRIC M EHLERS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1439 N VEAUX LOOP		Transaction ID: PR38341978284
City State Zip Code NORFOLK VA 23509	Amount of Each Receipt this Period _____ 128.33	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$128.33 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 996.64	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 400.41
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. GLORIA W DANA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 3363		Transaction ID: PR38341988284	
City NORFOLK	State VA	Zip Code 23514	Amount of Each Receipt this Period _____ 123.76
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP HUMAN RSRC SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 957.88		
		P/R Deduction (\$61.88 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. BRIAN L SYKES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1321 SHYRE CREST WAY		Transaction ID: PR38342018284	
City LAWRENCEVILLE	State GA	Zip Code 30043	Amount of Each Receipt this Period _____ 76.21
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR C&S		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 600.00		
		P/R Deduction (\$76.21 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. G A ASPATORE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 877 BISHOPSGATE LN		Transaction ID: PR38342038284	
City VIRGINIA BEACH	State VA	Zip Code 23452	Amount of Each Receipt this Period _____ 163.84
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GENERAL SOLICITOR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1266.34		
		P/R Deduction (\$81.92 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 363.81
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. KEVIN L GRIGSBY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5826 SALISBURY DR		Transaction ID: PR38342088284
City State Zip Code ROANOKE VA 24018	Amount of Each Receipt this Period _____ 119.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$59.50 Semi-Monthly) _____
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF OPER RULES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 948.50	

Full Name (Last, First, Middle Initial) B. DEBORAH H BUTLER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2595 WINTHROPE WAY		Transaction ID: PR38342098284
City State Zip Code LAWRENCEVILLE GA 30044	Amount of Each Receipt this Period _____ 416.66	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$208.33 Semi-Monthly) _____
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP CUSTOMER SERVICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3333.28	

Full Name (Last, First, Middle Initial) C. JERRY W HALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 511 JACOB LN		Transaction ID: PR38342118284
City State Zip Code MECHANICSBURG PA 17050	Amount of Each Receipt this Period _____ 123.08	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$131.67 Semi-Monthly) _____
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV SUPERINTENDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 978.82	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 658.74
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JOHN M BAKER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5150 OLD SELMA RD		Transaction ID: PR38342128284
City MONTGOMERY State AL Zip Code 36108	Amount of Each Receipt this Period _____ 416.66	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$208.33 Se-mi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation RESIDENT VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3333.28	

Full Name (Last, First, Middle Initial) B. HARRY G FRIDGE, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3565 LARSON LN		Transaction ID: PR38342148284
City ROANOKE State VA Zip Code 24018	Amount of Each Receipt this Period _____ 121.75	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$121.75 Se-mi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR SVC CONT/SYSTEMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 940.19	

Full Name (Last, First, Middle Initial) C. GREG E SUMMY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 831 BISHOPSGATE LN		Transaction ID: PR38342168284
City VIRGINIA BEACH State VA Zip Code 23452	Amount of Each Receipt this Period _____ 142.92	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$71.46 Sem-i-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GENERAL SOLICITOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1105.42	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 681.33
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. ROGER M BENNETT		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 818 DERBY AVE		Transaction ID: PR38342198284	
City State Zip Code CAMP HILL PA 17011	Amount of Each Receipt this Period 114.76		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$57.38 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INDUSTRIAL DEV	Aggregate Year-to-Date ▼ 884.76	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. STEVEN J ANTHONY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 10007 OAKTON PLANTATION CT		Transaction ID: PR38342208284	
City State Zip Code VIENNA VA 22181	Amount of Each Receipt this Period 146.88		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$74.75 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP GOV RELATIONS	Aggregate Year-to-Date ▼ 1175.04	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DAVID L VERON		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4815 MCINTOSH DR		Transaction ID: PR38342228284	
City State Zip Code CUMMING GA 30040	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR EQUIP DISP&TRAIN	Aggregate Year-to-Date ▼ 240.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	291.64
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 108

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
ROBERT EVERETTE HUFFMAN
Mailing Address 1004 CATON DR

City State Zip Code
VIRGINIA BEACH VA 23454

FEC ID number of contributing
federal political committee.

C

Name of Employer
NS CORP GOOD GOVERNMENT
FUND

Occupation
VP INTERMODAL OPNS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2516.64

Date of Receipt

/ /

Transaction ID: PR38342238284

Amount of Each Receipt this Period

416.66

P/R Deduction (\$208.33 Se-
mi-Monthly)

B. Full Name (Last, First, Middle Initial)
CHARLES W MOORMAN, IV
Mailing Address 1308 OLD HOUSE LN

City State Zip Code
VIRGINIA BEACH VA 23452

FEC ID number of contributing
federal political committee.

C

Name of Employer
NS CORP GOOD GOVERNMENT
FUND

Occupation
CHAIRMAN, PRES & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3328.00

Date of Receipt

/ /

Transaction ID: PR38342248284

Amount of Each Receipt this Period

416.00

P/R Deduction (\$208.00 Se-
mi-Monthly)

C. Full Name (Last, First, Middle Initial)
DANIEL L RUSSELL
Mailing Address 1201 MATOAKA ST

City State Zip Code
NORFOLK VA 23507

FEC ID number of contributing
federal political committee.

C

Name of Employer
NS CORP GOOD GOVERNMENT
FUND

Occupation
TAX COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2243.30

Date of Receipt

/ /

Transaction ID: PR38342268284

Amount of Each Receipt this Period

304.16

P/R Deduction (\$167.29 Se-
mi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

1136.82

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. WILLIAM T ROUSIS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 6114 WISTERIA PLACE COURT		Transaction ID: PR38342278284	
City ROANOKE	State VA	Zip Code 24012	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR PURCHASING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		
		P/R Deduction (\$15.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER R NEIKIRK		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5336 EDGEWATER DR		Transaction ID: PR38342288284	
City NORFOLK	State VA	Zip Code 23508	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIRECTOR FINANCE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		
		P/R Deduction (\$75.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JOSEPH C LAWRENCE		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 40 INMAN CIR NE		Transaction ID: PR38342338284	
City ATLANTA	State GA	Zip Code 30309	Amount of Each Receipt this Period 40.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF TERMINAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. BARRY LEWIS WELLS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 221 SOWDER FARM ROAD		Transaction ID: PR38342348284	
City State Zip Code TROUTVILLE VA 24175	Amount of Each Receipt this Period _____ 92.18		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SYSTEM DIR SAFETY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 688.72		
		P/R Deduction (\$48.37 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. CHARLIE E LEX, III		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3862 PARK LN SW		Transaction ID: PR38342458284	
City State Zip Code ROANOKE VA 24015	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST DIR STATE TAXES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 350.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. D M JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2701 CREST LANE DR SE		Transaction ID: PR38342478284	
City State Zip Code SMYRNA GA 30080	Amount of Each Receipt this Period _____ 73.20		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR ADMINISTRATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 549.48		
		P/R Deduction (\$36.60 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 215.38
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. ROBERT L WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 12135 WALLACE WOODS LN		Transaction ID: PR38342488284
City State Zip Code ALPHARETTA GA 30004	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR REAL ESTATE MGR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00	P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. V E TROWELL, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3492 HIGHWAY 5 APARTMENT 1008		Transaction ID: PR38342498284
City State Zip Code DOUGLASVILLE GA 30135	Amount of Each Receipt this Period _____ 70.16	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST TO VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 558.62	P/R Deduction (\$36.83 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. LAWRENCE E ABRON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 185 VARSAILLES PL		Transaction ID: PR38342528284
City State Zip Code ELLENWOOD GA 30294	Amount of Each Receipt this Period _____ 54.08	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR JT FACILITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 432.64	P/R Deduction (\$28.13 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 164.24
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
DIANE M SCHULTHEISS

Mailing Address 2822 JARRELL RD

City GREENVILLE State GA Zip Code 30222

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation MGR PROG SYSTEMS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38342598284

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
MICHAEL JAY HESLEP

Mailing Address 8128 VISTA FOREST DR

City ROANOKE State VA Zip Code 24018

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation DIR COSTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1359.41

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38342608284

Amount of Each Receipt this Period
217.50

P/R Deduction (\$112.42 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
EDWIN R TRINKLE

Mailing Address 1981 VILLAGE ROUND NW

City MARIETTA State GA Zip Code 30064

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation GEN SUPT TML OPNS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38342618284

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	317.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 108
	<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	

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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. LYNNANNE B CATRON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 104 MONTEREY CIR		Transaction ID: PR38342628284	
City State Zip Code ROANOKE VA 24019	Amount of Each Receipt this Period _____ 102.92		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR EXPENDITURE ACCT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 818.78		
		P/R Deduction (\$53.96 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. THOMAS E HURLBUT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3396 LITCHFIELD RD		Transaction ID: PR38342728284	
City State Zip Code VIRGINIA BEACH VA 23452	Amount of Each Receipt this Period _____ 65.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP CORP ACCOUNTING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 520.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. LOUIS S CATALAND		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 578 PELHAM RD NE		Transaction ID: PR38342738284	
City State Zip Code ATLANTA GA 30324	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIRECTOR REAL ESTATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 350.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 217.92
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) D A HRUSOVSKY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38342758284
Mailing Address 2206 AVENHAM AVE SW		Amount of Each Receipt this Period 50.00
City ROANOKE	State VA	Zip Code 24014
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SYS MGR COAL GROUP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B. Full Name (Last, First, Middle Initial) MARK E WOLF		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38342768284
Mailing Address 5743 PARK CENTRAL AVE		Amount of Each Receipt this Period 146.00
City NORCROSS	State GA	Zip Code 30092
FEC ID number of contributing federal political committee. C		P/R Deduction (\$77.38 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP-INFO SYS PLN&DEV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 784.00	

C. Full Name (Last, First, Middle Initial) DAVID A SHELTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38342788284
Mailing Address 334 FAIRFAX AVE		Amount of Each Receipt this Period 93.34
City NORFOLK	State VA	Zip Code 23507
FEC ID number of contributing federal political committee. C		P/R Deduction (\$46.67 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 603.36	

SUBTOTAL of Receipts This Page (optional) ▶	289.34
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. M S DEWBERRY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 713 ROBERT WAY		Transaction ID: PR38342798284	
City State Zip Code POWDER SPRINGS GA 30127	Amount of Each Receipt this Period _____ 271.16		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ACE PROJ P&E ADM SVC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1153.28		
		P/R Deduction (\$135.58 Se-mi-Monthly)	

Full Name (Last, First, Middle Initial) B. SCOTT D MCGREGOR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3848 BUNCH WALNUTS RD		Transaction ID: PR38342888284	
City State Zip Code CHESAPEAKE VA 23322	Amount of Each Receipt this Period _____ 267.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GROUP VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1863.84		
		P/R Deduction (\$140.17 Se-mi-Monthly)	

Full Name (Last, First, Middle Initial) C. DAVID A BECKER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 302 PEACOCK DR NW		Transaction ID: PR38342898284	
City State Zip Code MARIETTA GA 30064	Amount of Each Receipt this Period _____ 91.16		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ACE DESIGN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 695.58		
		P/R Deduction (\$45.58 Sem-i-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 629.32
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. THOMAS G WERNER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3254 TWISTED BRANCHES LN		Transaction ID: PR38342918284
City State Zip Code MARIETTA GA 30068	Amount of Each Receipt this Period _____ 175.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$95.83 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP TECHNOLOGY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1341.62	

Full Name (Last, First, Middle Initial) B. D A SCHAUB		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4463 BELVEDERE PL SE		Transaction ID: PR38342948284
City State Zip Code MARIETTA GA 30067	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR DIR-CUST SVC OPNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	

Full Name (Last, First, Middle Initial) C. JOSEPH F GIULIANO		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3131 ROYAL OAK CT		Transaction ID: PR38342968284
City State Zip Code WESTLAKE OH 44145	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR SALES	
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) ▶	_____ 375.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 108
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
J P KLAIBER

Mailing Address 4581 FLEMING ST

City State Zip Code
PHILADELPHIA PA 19128

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR STRATEGIC PLAN
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 659.94

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38342988284

Amount of Each Receipt this Period
82.92

P/R Deduction (\$42.04 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
WILLIAM N WILLIAMS

Mailing Address 8119 REDCHURCH DR

City State Zip Code
SPRING TX 77379

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIR SALES
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38342998284

Amount of Each Receipt this Period
105.00

P/R Deduction (\$52.50 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
PAULA JO LINA

Mailing Address 4400 HYDE RD

City State Zip Code
PORTSMOUTH VA 23703

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT ASSOC MEDICAL DIR
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1186.72

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343008284

Amount of Each Receipt this Period
148.34

P/R Deduction (\$76.25 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **336.26**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
CHARLES SCOTT MUIR

Mailing Address 4508 QUIET BROOK CT

City State Zip Code
CHANTILLY VA 20151

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND RESIDENT VP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343018284

Amount of Each Receipt this Period
330.00

P/R Deduction (\$165.00 Se-
mi-Monthly)

B. Full Name (Last, First, Middle Initial)
TIMOTHY P TUOHY

Mailing Address 644 HOLLAND RD

City State Zip Code
POWDER SPRINGS GA 30127

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND SR DESIGNER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 575.36

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343028284

Amount of Each Receipt this Period
73.00

P/R Deduction (\$36.50 Sem-
i-Monthly)

C. Full Name (Last, First, Middle Initial)
MARY BESS SMITH

Mailing Address PO BOX 156

City State Zip Code
FINCASTLE VA 24090

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND DIR INTERNAL AUDIT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343078284

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Sem-
i-Monthly)

SUBTOTAL of Receipts This Page (optional)	478.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) CRAIG B MARIN Mailing Address 3132 KLINE DR City VIRGINIA BEACH State VA Zip Code 23452 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343098284 Amount of Each Receipt this Period 93.50 P/R Deduction (\$46.75 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: MANAGER BUDGET Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 718.25		

B. Full Name (Last, First, Middle Initial) ROBERT M LYNCH Mailing Address 6030 BURNHAM RD City ROANOKE State VA Zip Code 24018 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343108284 Amount of Each Receipt this Period 108.92 P/R Deduction (\$56.08 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: MGR LOCOMOTIVE SHOP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 771.68		

C. Full Name (Last, First, Middle Initial) DAVID C PRICE Mailing Address 6042 WIMBLEDON CT City ROANOKE State VA Zip Code 24018 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343198284 Amount of Each Receipt this Period 84.26 P/R Deduction (\$42.13 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: DIR TAX AUDITS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 674.08		

SUBTOTAL of Receipts This Page (optional)	286.68
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. KATHLEEN U COOK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1208 GATES AVE		Transaction ID: PR38343218284	
City NORFOLK State VA Zip Code 23507	Amount of Each Receipt this Period _____ 98.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR FRCST & PERF MSR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 565.00		
		P/R Deduction (\$52.42 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. FRED MANUEL CAUDILL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1534 PINEY HILL RD		Transaction ID: PR38343238284	
City LURAY State VA Zip Code 22835	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR ENV OPNS&HAZ MAT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. GARY WAYNE HUDSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 3023		Transaction ID: PR38343258284	
City NORFOLK State VA Zip Code 23514	Amount of Each Receipt this Period _____ 209.16		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR STAFF SERVICES		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1673.28		
		P/R Deduction (\$109.83 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 357.16
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 108
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DAVID C TALLEY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2107 CAVALLON CT NW		Transaction ID: PR38343268284
City ACWORTH State GA Zip Code 30101	Amount of Each Receipt this Period _____ 140.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$70.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV SUPERINTENDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00	

Full Name (Last, First, Middle Initial) B. SUSAN SARVER STUART		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3604 LARSON LN		Transaction ID: PR38343278284
City ROANOKE State VA Zip Code 24018	Amount of Each Receipt this Period _____ 90.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$45.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR PAYROLL ACCTG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 480.00	

Full Name (Last, First, Middle Initial) C. TONY E GRIM		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 415 LACEY WAY		Transaction ID: PR38343308284
City MCDONOUGH State GA Zip Code 30252	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$55.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation A CH ENGR S&E DESIGN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 330.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. LISA MARIE ASSAD		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5422 SUNNY LN		Transaction ID: PR38343328284	
City ELLISTON	State VA	Zip Code 24087	Amount of Each Receipt this Period _____ 101.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST MGR CORP ACCTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 793.28		
		P/R Deduction (\$53.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MARY LOU FERRIS REYNOLDS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 605 N BROAD ST		Transaction ID: PR38343348284	
City SALEM	State VA	Zip Code 24153	Amount of Each Receipt this Period _____ 68.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation STAFF ASSISTANT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 541.26		
		P/R Deduction (\$35.71 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. CALVIN L COX		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2735 ASTORIA AVE		Transaction ID: PR38343358284	
City CUMMING	State GA	Zip Code 30040	Amount of Each Receipt this Period _____ 298.34
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP MECHANICAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1857.93		
		P/R Deduction (\$156.67 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 468.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) PAUL V DEAN Mailing Address 2472 WINDY PINES BND City VIRGINIA BEACH State VA Zip Code 23456 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343388284 Amount of Each Receipt this Period 117.00 P/R Deduction (\$60.83 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: DIR INTMDL EQP/MAINT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 936.00		

B. Full Name (Last, First, Middle Initial) CLIFFORD L CREECH Mailing Address 726 EUJEL DR City MCDONOUGH State GA Zip Code 30252 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343418284 Amount of Each Receipt this Period 80.26 P/R Deduction (\$40.13 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: MGR PREV&FIELD SERV Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 615.76		

C. Full Name (Last, First, Middle Initial) STEPHEN M HOPTA Mailing Address PO BOX 1517 City BLUEFIELD State WV Zip Code 24701 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343468284 Amount of Each Receipt this Period 42.00 P/R Deduction (\$21.00 Semi-Monthly)
Name of Employer: NS CORP GOOD GOVERNMENT FUND Occupation: GENERAL COUNSEL PLC Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00		

SUBTOTAL of Receipts This Page (optional)	239.26
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 108
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. ROGER H BRUMFIELD		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4239 PENTWORTH LN NW		Transaction ID: PR38343478284
City State Zip Code KENNESAW GA 30144	Amount of Each Receipt this Period _____ 82.76	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$42.63 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR INFO SYS DEV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 662.08	

Full Name (Last, First, Middle Initial) B. JAMES NOBLE CARTER, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 751 PROVIDENCE CLUB DR		Transaction ID: PR38343488284
City State Zip Code MONROE GA 30656	Amount of Each Receipt this Period _____ 250.34	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$125.17 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation CHIEF ENGR BRID&STRU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1600.62	

Full Name (Last, First, Middle Initial) C. JEFFERY M CUTRIGHT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3308 LAKELAND DR		Transaction ID: PR38343498284
City State Zip Code ROANOKE VA 24018	Amount of Each Receipt this Period _____ 84.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$42.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN FOREMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 672.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 417.10
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. TERRY N EVANS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5210 COMMODORE BLF		Transaction ID: PR38343508284
City State Zip Code SUFFOLK VA 23435	Amount of Each Receipt this Period _____ 200.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$208.33 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP OPNS. PLNG&BUDG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1500.00	

Full Name (Last, First, Middle Initial) B. ROBERT G LOCKERY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 939 JAMESTOWN CRES		Transaction ID: PR38343578284
City State Zip Code NORFOLK VA 23508	Amount of Each Receipt this Period _____ 98.76	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$51.33 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR LABOR RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 553.80	

Full Name (Last, First, Middle Initial) C. SUSAN KICK HALL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1868 CLAY DR SW		Transaction ID: PR38343608284
City State Zip Code MARIETTA GA 30064	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C	P/R Deduction (\$20.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR CUSTOMER SVC OP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 338.76
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. KENNETH WARREN STUBBS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1295 SWEET BOTTOM CT SW		Transaction ID: PR38343628284	
City MARIETTA	State GA	Zip Code 30064	Amount of Each Receipt this Period _____ 180.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INFO SYS DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 530.00		
		P/R Deduction (\$90.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. DAVID W FRIES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4605 WATSON WAY		Transaction ID: PR38343638284	
City CHESAPEAKE	State VA	Zip Code 23321	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR RISK MANAGEMENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 490.00		
		P/R Deduction (\$40.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. MARY GLYNIS WELSH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 110 STONE GATE WAY SE		Transaction ID: PR38343648284	
City MABLETON	State GA	Zip Code 30126	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR INFO SYS DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$15.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 290.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
HAYDEN W NEWELL, III

Mailing Address 8793 WILD TURKEY RD

City State Zip Code
BOONES MILL VA 24065

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR INNOVATIVE RES.
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343678284

Amount of Each Receipt this Period
60.00

P/R Deduction (\$30.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
JUAN K CUNNINGHAM

Mailing Address 3860 CHURCH POINT RD

City State Zip Code
VIRGINIA BEACH VA 23455

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIR MGMT DEV & STAFF
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 856.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343688284

Amount of Each Receipt this Period
111.00

P/R Deduction (\$52.42 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
J ALAN JULIAN

Mailing Address 1870 COUNTRY CLUB RD

City State Zip Code
TROUTVILLE VA 24175

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIR SALES
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 760.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343708284

Amount of Each Receipt this Period
95.00

P/R Deduction (\$48.65 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	266.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
RICHARD J ZWOLINSKI

Mailing Address 4923 HARRINGTON PL

City State Zip Code
POWDER SPRINGS GA 30127

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR CREW MGMT.
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343728284

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
JAMES R STUMP

Mailing Address 8281 WATER PARK DR

City State Zip Code
HOLLAND OH 43528

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIV ENGINEER
FUND

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343748284

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
RENEE M PALIN

Mailing Address 3616 RIVERWOOD CRES

City State Zip Code
CHESAPEAKE VA 23322

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR PORTS & DEVELOP
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38343838284

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	110.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. LARRY L ETHERTON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5331 TALLGRASS WAY NW		Transaction ID: PR38343858284
City State Zip Code KENNESAW GA 30152	Amount of Each Receipt this Period _____ 138.50	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$72.38 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIRECTOR ENGINEERING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1102.66	

Full Name (Last, First, Middle Initial) B. ERVIN MULLINS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 601 PEMBROKE AVE APT 1113		Transaction ID: PR38343878284
City State Zip Code NORFOLK VA 23507	Amount of Each Receipt this Period _____ 42.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$21.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation PIERMASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 336.00	

Full Name (Last, First, Middle Initial) C. RUSSELL C PARKS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 105 BOULDER DR		Transaction ID: PR38343908284
City State Zip Code DUNCANSVILLE PA 16635	Amount of Each Receipt this Period _____ 75.08	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$38.88 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN FOREMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 598.14	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 255.58
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. WILLIAM TIMOTHY BUTT		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1716 LADYSMITH MEWS		Transaction ID: PR38343928284
City State Zip Code VIRGINIA BEACH VA 23455	Amount of Each Receipt this Period _____ 42.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$21.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MARKET MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 336.00	

Full Name (Last, First, Middle Initial) B. ANTHONY LAROSA, JR		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3214 LAUREL POINT CT		Transaction ID: PR38343978284
City State Zip Code KINGWOOD TX 77339	Amount of Each Receipt this Period _____ 40.00	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$20.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIRECTOR MEXICO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 280.00	

Full Name (Last, First, Middle Initial) C. DARRELL L WILSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 605 FONTAINE ST		Transaction ID: PR38343988284
City State Zip Code ALEXANDRIA VA 22302	Amount of Each Receipt this Period _____ 416.66	
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$208.33 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP GOV RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2858.28	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 498.66
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) HOWARD DALE MCFADDEN Mailing Address 407 BRYAN CT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38343998284
City State Zip Code NEWPORT NEWS VA 23606	Amount of Each Receipt this Period 91.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation GEN TAX ATTORNEY	Aggregate Year-to-Date ▼ 723.66	P/R Deduction (\$47.58 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) ROBERT A WELLS Mailing Address 1309 SARASAN CT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38344008284
City State Zip Code VIRGINIA BEACH VA 23452	Amount of Each Receipt this Period 277.34	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation GEN MGR CASUALTY CLM	Aggregate Year-to-Date ▼ 977.34	P/R Deduction (\$138.67 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) RICHARD L KILEY Mailing Address 2117 HICKORY FOREST DR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR38344018284
City State Zip Code CHESAPEAKE VA 23322	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation AVP MKTG & SALES	Aggregate Year-to-Date ▼ 400.00	P/R Deduction (\$67.50 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	418.34
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
CHARLES H MATHERS

Mailing Address 6512 DEERINGS LN

City NORCROSS State GA Zip Code 30092

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation INFO. SYS. ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.06

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344028284

Amount of Each Receipt this Period
87.50

P/R Deduction (\$43.75 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
MARSHALL E SHEETS

Mailing Address 945 GUNTER CT

City ALPHARETTA State GA Zip Code 30022

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation AVP ACCTG OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 839.11

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344098284

Amount of Each Receipt this Period
147.58

P/R Deduction (\$75.75 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
SARAH BROOKS COREY QUISENBERRY

Mailing Address 2212 LESNER CRES APT 200

City VIRGINIA BEACH State VA Zip Code 23451

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation DIR STRATEGIC PLANNG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344108284

Amount of Each Receipt this Period
40.00

P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	275.08
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. KAREN M LEGG		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5211 REGATTA POINTE RD		Transaction ID: PR38344118284	
City State Zip Code SUFFOLK VA 23435	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST TO V CHMN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) B. HAROLD R MOBLEY		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 3125 BISHOPSGATE CT		Transaction ID: PR38344138284	
City State Zip Code VIRGINIA BEACH VA 23452	Amount of Each Receipt this Period 132.12		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$66.76 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP LABOR RELATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1034.16		

Full Name (Last, First, Middle Initial) C. STEVEN G PORTNELL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5019 TARRY GLEN DR		Transaction ID: PR38344148284	
City State Zip Code SUWANEE GA 30024	Amount of Each Receipt this Period 55.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$27.50 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIRECTOR REAL ESTATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.50		

SUBTOTAL of Receipts This Page (optional) ▶	237.12
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
MARK A BARRICK

Mailing Address 1326 MEGGETT DR

City State Zip Code
CHESAPEAKE VA 23322

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR PC/LAN SUPPORT
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 733.32

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344178284

Amount of Each Receipt this Period
92.08

P/R Deduction (\$47.42 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
DAN V CORCORAN

Mailing Address 259 SCOTTSWOOD RD

City State Zip Code
RIVERSIDE IL 60546

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIR SALES
FUND

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344188284

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
BRADY H ANDERSON

Mailing Address 3599 PEAKWOOD DR SW

City State Zip Code
ROANOKE VA 24014

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT DIR MARKETING
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 563.66

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344198284

Amount of Each Receipt this Period
115.34

P/R Deduction (\$57.67 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	257.42
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. STEVEN R HAMBY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3020 BROOKFIELD DR		Transaction ID: PR38344268284	
City State Zip Code AUSTELL GA 30106	Amount of Each Receipt this Period _____ 70.76		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR IMDL BILLING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 555.70		
		P/R Deduction (\$35.38 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. RONNIE D JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1324 GULFPORT RUN		Transaction ID: PR38344298284	
City State Zip Code GRAYSON GA 30017	Amount of Each Receipt this Period _____ 118.84		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR AUTO CUST SVC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 912.78		
		P/R Deduction (\$59.42 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JOHN L WAGNER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3525 MARITIME GLN		Transaction ID: PR38344308284	
City State Zip Code GAINESVILLE GA 30506	Amount of Each Receipt this Period _____ 120.84		
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST GEN MGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 948.08		
		P/R Deduction (\$60.42 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	310.44
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 108
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
 JOHN RAY TURBYFILL, JR
 Mailing Address 133 FERRUM DR
 City State Zip Code
 SALEM VA 24153
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NS CORP GOOD GOVERNMENT FUND DIR INFO SYS DEV
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1240.00

Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: PR38344328284
 Amount of Each Receipt this Period
 210.00
 P/R Deduction (\$105.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
 J B FITZGERALD
 Mailing Address 410 PARADISE POINT RD
 City State Zip Code
 HARTWELL GA 30643
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NS CORP GOOD GOVERNMENT FUND DIRECTOR CYO
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1051.36

Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: PR38344378284
 Amount of Each Receipt this Period
 135.00
 P/R Deduction (\$67.50 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
 JAMES R HORGAN
 Mailing Address 2318 TALL TIMBERS LN
 City State Zip Code
 MARIETTA GA 30066
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NS CORP GOOD GOVERNMENT FUND DIR MERCHDSE CUS SVC
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 378.00

Date of Receipt
 M M / D D / Y Y Y Y Y
Transaction ID: PR38344388284
 Amount of Each Receipt this Period
 42.00
 P/R Deduction (\$21.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **387.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
R E MARTINEZ

Mailing Address 600 BOTETOVRT GDNS

City NORFOLK State VA Zip Code 23507

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation VP BUSINESS DEVELOP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2229.18

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344418284

Amount of Each Receipt this Period
416.66

P/R Deduction (\$208.33 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
HASKEL L STANBACK

Mailing Address 173 BUCKINGHAM CT

City ROANOKE State VA Zip Code 24019

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation ASST VICE PRES SAFTY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 580.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344448284

Amount of Each Receipt this Period
100.00

P/R Deduction (\$65.06 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
GARY R WINFREY

Mailing Address 128 GARDEN OAKS DR

City PRINCETON State WV Zip Code 24740

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

Name of Employer NS CORP GOOD GOVERNMENT FUND Occupation DIV MGR MECH OPNS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 681.92

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344488284

Amount of Each Receipt this Period
85.24

P/R Deduction (\$44.54 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	601.90
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 108
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
STEVEN C MCCURDY

Mailing Address 3825 RIVER OAK CIR

City State Zip Code
VIRGINIA BEACH VA 23456

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND SR MGR FAC SVCS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344498284

Amount of Each Receipt this Period
60.00

P/R Deduction (\$60.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
KAROL R LAWRENCE

Mailing Address 40 INMAN CIR NE

City State Zip Code
ATLANTA GA 30309

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND AVP INFO TECHNOLOGY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1131.72

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344538284

Amount of Each Receipt this Period
145.84

P/R Deduction (\$75.83 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
DENNIS A TURNER

Mailing Address 311 51ST ST

City State Zip Code
VIRGINIA BEACH VA 23451

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND MGR WELFARE BENEFITS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344548284

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	245.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. GARY L RAMSEY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 104 GREYSTONE DR		Transaction ID: PR38344558284
City State Zip Code DUNCANSVILLE PA 16635	Amount of Each Receipt this Period _____ 90.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$64.13 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN SUPT LOCO SHOPS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 720.00	

Full Name (Last, First, Middle Initial) B. JOSEPH BASCOMBE TRAYWICK, III		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3500 CHURCHILL RD		Transaction ID: PR38344568284
City State Zip Code RALEIGH NC 27607	Amount of Each Receipt this Period _____ 80.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN MGR ECBU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 610.88	

Full Name (Last, First, Middle Initial) C. ROBERT A GENTZEL		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2610 S JEFFERSON ST		Transaction ID: PR38344578284
City State Zip Code ROANOKE VA 24014	Amount of Each Receipt this Period _____ 96.38	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$48.19 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR SHORTLINE MKTG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 253.88	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 266.38
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. WILLIAM J ROMIG		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2729 BROAD BAY RD		Transaction ID: PR38344588284	
City VIRGINIA BEACH	State VA	Zip Code 23451	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP & TREASURER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1600.00		
		P/R Deduction (\$100.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. DAVID T LAWSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7471 N SHORE RD		Transaction ID: PR38344608284	
City NORFOLK	State VA	Zip Code 23505	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP INDUSTRIAL PROD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 4250.00		
		P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JOHN KENNETH DUKE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1354 LITTLE NECK RD		Transaction ID: PR38344618284	
City VIRGINIA BEACH	State VA	Zip Code 23452	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation A MGR EMP BNFT ACCTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. ROBERT A BARTLE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2342 ABBEY LN		Transaction ID: PR38344708284
City State Zip Code HARRISBURG PA 17112	Amount of Each Receipt this Period _____ 250.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$167.60 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1600.00	

Full Name (Last, First, Middle Initial) B. MICHAEL F COX		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 710 MOUNT VERNON AVE		Transaction ID: PR38344738284
City State Zip Code SALEM VA 24153	Amount of Each Receipt this Period _____ 120.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$60.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INCOME TAX ADMIN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 919.12	

Full Name (Last, First, Middle Initial) C. CHARLES K RICKMAN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1113 LOOKOUT CT		Transaction ID: PR38344748284
City State Zip Code VILLA RICA GA 30180	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR CREW MANAGEMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 700.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 470.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
STANLEY E MARKIS

Mailing Address 441 CLOVER RD

City State Zip Code
ETTERS PA 17319

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT MGR WELDING
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 574.20

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344788284

Amount of Each Receipt this Period
72.16

P/R Deduction (\$37.54 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
STEPHEN R CALDWELL

Mailing Address 109 W 10TH AVE JUNIATA

City State Zip Code
ALTOONA PA 16601

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT ASST MGR DIESEL SHOP
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344818284

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
RAYMOND JOHN RUMSEY

Mailing Address 3800 SINCLAIR SHORES RD

City State Zip Code
CUMMING GA 30041

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT AVP COMM & SIGNAL
FUND

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 680.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38344828284

Amount of Each Receipt this Period
85.00

P/R Deduction (\$42.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	197.16
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. SYDNEY J SHANER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4426 HUGH HOWELL RD STE B-185		Transaction ID: PR38344838284	
City TUCKER State GA Zip Code 30084	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$40.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SYS MGR LOCO UTILIZ		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00		

Full Name (Last, First, Middle Initial) B. JOHN M KRAEMER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8203 BAYBERRY CT		Transaction ID: PR38344848284	
City ROANOKE State VA Zip Code 24018	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GROUP VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) C. J GARY NAFF		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 255 STONELEDGE DR		Transaction ID: PR38344918284	
City ROANOKE State VA Zip Code 24019	Amount of Each Receipt this Period 110.58		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$55.29 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR LOCOMOTIVE SHOP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 871.68		

SUBTOTAL of Receipts This Page (optional) ▶	290.58
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. V HUGH STARLING		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3760 EASTBROOK CT		Transaction ID: PR38344938284	
City DORAVILLE	State GA	Zip Code 30340	Amount of Each Receipt this Period _____ 121.84
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR NETWORK SYSTEMS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 949.66		
P/R Deduction (\$60.92 Semi-Monthly)			

Full Name (Last, First, Middle Initial) B. LEANNE DORAN MARILLEY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 504 SANDY VALLEY CT		Transaction ID: PR38344958284	
City VIRGINIA BEACH	State VA	Zip Code 23452	Amount of Each Receipt this Period _____ 82.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR INVESTOR REL.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 344.00		
P/R Deduction (\$41.00 Semi-Monthly)			

Full Name (Last, First, Middle Initial) C. SAMUEL B GROGANS, III		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6527 BROOKHAVEN CT		Transaction ID: PR38344968284	
City ROANOKE	State VA	Zip Code 24018	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation TRAINMASTER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
P/R Deduction (\$25.00 Semi-Monthly)			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 253.84
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JOHN W PAYNE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 328 MOUNTAIN VIEW AVE		Transaction ID: PR38344988284
City State Zip Code BLUEFIELD WV 24701	Amount of Each Receipt this Period _____ 105.08	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$54.79 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation VP POCA LAND CORP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 836.18	

Full Name (Last, First, Middle Initial) B. WILLIAM A GORBY		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4640 TREVINO DR NE		Transaction ID: PR38344998284
City State Zip Code ROANOKE VA 24019	Amount of Each Receipt this Period _____ 30.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation PROPERTY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00	

Full Name (Last, First, Middle Initial) C. ROBERT L PETTIES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3338 CIRCLE BROOK DR APT 3C		Transaction ID: PR38345008284
City State Zip Code ROANOKE VA 24014	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPV SPECIAL AGENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 375.00	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 160.08
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 108						
	(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

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JERRY L CAUSEY		Date of Receipt
Mailing Address 6025 RIVER OAKS DR		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FLOWERY BRANCH	GA	30542
FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN ATTORNE REAL EST	Transaction ID: PR38345038284
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
	<input type="text"/> 400.00	<input type="text"/> 50.00
		P/R Deduction (\$25.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. P C POIRIER		Date of Receipt
Mailing Address 908 KINGS CROSS		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
VIRGINIA BEACH	VA	23452
FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR LABOR RELATIONS	Transaction ID: PR38345068284
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
	<input type="text"/> 811.76	<input type="text"/> 104.76
		P/R Deduction (\$52.37 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. MICHAEL J WHEELER		Date of Receipt
Mailing Address 624 DEVON BROOKE DR		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
WOODSTOCK	GA	30188
FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN MG MECH FLD OPNS	Transaction ID: PR38345078284
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
	<input type="text"/> 400.00	<input type="text"/> 50.00
		P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 204.76
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. PATRICK T TORRES		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4525 CAVALLON WAY NW		Transaction ID: PR38345098284
City ACWORTH	State GA	Zip Code 30101
Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR EQUIP PLANNING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	
		P/R Deduction (\$25.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. JOHN VERNON EDWARDS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3421 MONTGOMERY PL		Transaction ID: PR38345138284
City VIRGINIA BEACH	State VA	Zip Code 23452
Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 800.00	
		P/R Deduction (\$60.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. JIMMY ELLIS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 786 SPYGLASS BLVD		Transaction ID: PR38345168284
City FORSYTH	State IL	Zip Code 62535
Amount of Each Receipt this Period _____ 88.00		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 704.00	
		P/R Deduction (\$44.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 238.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial)
SCOTT M KERSHAW

Mailing Address 785 GATES MILL WAY

City State Zip Code
ALPHARETTA GA 30004

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND DIV MGR MECH OPNS

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

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38345218284

Amount of Each Receipt this Period
50.00

P/R Deduction (\$25.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
RICHARD P RUSSELL

Mailing Address 345 CAMBRIDGE CT UNIT A5

City State Zip Code
HARDY VA 24101

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND SYS DIR ENVIRO. PROT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38345258284

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
AJITH B WIJERATNE

Mailing Address 1712 HIDDEN SPRINGS TRCE SE

City State Zip Code
SMYRNA GA 30082

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

Name of Employer Occupation
NS CORP GOOD GOVERNMENT FUND DIR IND ENG&OPS RES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 879.98

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR38345268284

Amount of Each Receipt this Period
98.40

P/R Deduction (\$52.13 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	188.40
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. MICHAEL R FESEN		Date of Receipt M M / D D / Y Y Y Y _____	
Mailing Address 2317 SCARBOROUGH DR		Transaction ID: PR38345278284	
City HARRISBURG	State PA	Zip Code 17112	Amount of Each Receipt this Period _____ 128.34
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation RESIDENT VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 1026.72	
		P/R Deduction (\$72.44 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. JAMES P YOUNG		Date of Receipt M M / D D / Y Y Y Y _____	
Mailing Address 100 JAROD DR		Transaction ID: PR38345288284	
City CORAOPOLIS	State PA	Zip Code 15108	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation ASST DIVISION SUPT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 340.00	
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. GEORGE WILLIAM SCHAFFER, III		Date of Receipt M M / D D / Y Y Y Y _____	
Mailing Address 340 PAOLI WOODS		Transaction ID: PR38345298284	
City PAOLI	State PA	Zip Code 19301	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation DIR CORP AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 300.00	
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional)	228.34
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JEFFREY S HELLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1506 RUNNYMEDE RD		Transaction ID: PR38345308284	
City NORFOLK State VA Zip Code 23505	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP INTL SLS & MKTG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$50.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. DAVID L FOUTZ		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 164 CARRIAGE DR		Transaction ID: PR38345318284	
City RINGGOLD State GA Zip Code 30736	Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF TERMINAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 875.00		
		P/R Deduction (\$75.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. ALAN H SHAW		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5191 FOX RIDGE RD		Transaction ID: PR38345328284	
City ROANOKE State VA Zip Code 24018	Amount of Each Receipt this Period _____ 240.66		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR COAL TRANSP SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1266.66		
		P/R Deduction (\$129.17 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 440.66
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. SHELA G SEAY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 2067		Transaction ID: PR38345338284	
City WOODSTOCK	State GA	Zip Code 30188	Amount of Each Receipt this Period _____ 113.76 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR REV ACCT-SUP SVC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 893.36 _____		
		P/R Deduction (\$56.88 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. JAMES A BOLANDER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3700 LITTLE NECK PT		Transaction ID: PR38345368284	
City VIRGINIA BEACH	State VA	Zip Code 23452	Amount of Each Receipt this Period _____ 142.50 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation AVP IMDL PRICING&DEV		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 1098.00 _____		
		P/R Deduction (\$72.04 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. L D HUNT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4123 CHURCH POINT RD		Transaction ID: PR38345388284	
City VIRGINIA BEACH	State VA	Zip Code 23455	Amount of Each Receipt this Period _____ 114.42 _____
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 910.94 _____		
		P/R Deduction (\$57.21 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 370.68 _____
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 108
	<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)
Norfolk Southern Good Government Fund

A. Full Name (Last, First, Middle Initial) GEORGE P EICHELBERGER		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3468 PACES FERRY CIR SE		Transaction ID: PR38345398284
City State Zip Code SMYRNA GA 30080	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR TECH & MKT SVCS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B. Full Name (Last, First, Middle Initial) CAROL JEAN ORNDORFF		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 311 HOMEPLACE DR		Transaction ID: PR38345418284
City State Zip Code SALEM VA 24153	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$25.00 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation MGR MKT SYSTEMS	
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) CHARLES HUMPHREY ALLEN		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2305 CLUB CT		Transaction ID: PR38345428284
City State Zip Code VALPARAISO IN 46383	Amount of Each Receipt this Period 150.58	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$75.21 Semi-Monthly)
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF THE CTCO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1196.06	

SUBTOTAL of Receipts This Page (optional) ▶	250.58
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. MARQUE I LEDOUX		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1004 ALBERT RENNOLDS DR		Transaction ID: PR38345498284	
City FREDERICKSBURG	State VA	Zip Code 22401	Amount of Each Receipt this Period _____ 416.66
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST VICE PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 3333.28		
		P/R Deduction (\$208.33 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. ROBERTO H ROBINSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1313 MASTERS CT		Transaction ID: PR38345508284	
City CHESAPEAKE	State VA	Zip Code 23320	Amount of Each Receipt this Period _____ 120.58
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR GOVT & DIST SVCS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 959.48		
		P/R Deduction (\$66.67 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. JAMES ALAN NEWTON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 113 W WAYNE ST APT 406		Transaction ID: PR38345518284	
City FORT WAYNE	State IN	Zip Code 46802	Amount of Each Receipt this Period _____ 80.00
FEC ID number of contributing federal political committee. C			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation PRES TRIPLE CRWN SVC		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 640.00		
		P/R Deduction (\$40.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	617.24
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JOSEPH J DRYBURGH, JR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 475 HUGHES RD		Transaction ID: PR38345528284	
City State Zip Code KING OF PRUSSIA PA 19406	Amount of Each Receipt this Period _____ 40.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GM THOROUGHbred DIR.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 360.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. MICHAEL L WILSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 129 TIMBER RIDGE RD		Transaction ID: PR38345538284	
City State Zip Code HUMMELSTOWN PA 17036	Amount of Each Receipt this Period _____ 115.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST DIVISION SUPT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 875.74		
		P/R Deduction (\$57.50 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. KEITH R MILLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 522 GRANDVIEW DR		Transaction ID: PR38345548284	
City State Zip Code TROUTVILLE VA 24175	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR ENV ENG & AUDITS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 205.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 95 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JAMES W HAMILTON, JR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 481 RIDGE TRL		Transaction ID: PR38345568284	
City FINCASTLE	State VA	Zip Code 24090	Amount of Each Receipt this Period _____ 119.08 _____
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$61.83 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR COAL MKT SOUTH		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 568.62 _____		

Full Name (Last, First, Middle Initial) B. COREY JASON VEAL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4509 HIGH TOP CT		Transaction ID: PR38345578284	
City LOUISVILLE	State KY	Zip Code 40299	Amount of Each Receipt this Period _____ 40.00 _____
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$20.00 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF TERMINAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00 _____		

Full Name (Last, First, Middle Initial) C. JEFFREY A HARRIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2404 W 141ST ST		Transaction ID: PR38345588284	
City LEAWOOD	State KS	Zip Code 66224	Amount of Each Receipt this Period _____ 116.76 _____
FEC ID number of contributing federal political committee. C _____		P/R Deduction (\$58.38 Semi-Monthly)	
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SUPT OF TERMINAL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 902.58 _____		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 275.84 _____
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 108
	<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. JOE A STEPHENS		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 121 JAY RIDGE RD		Transaction ID: PR38345598284
City CLOVERDALE	State VA	Zip Code 24077
Amount of Each Receipt this Period _____ 73.42		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR GEN FOREMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 565.24	P/R Deduction (\$36.71 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. A DAN BRYSON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2 LONE OAK AVE		Transaction ID: PR38345608284
City SIMPSONVILLE	State SC	Zip Code 29681
Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIV SUPERINTENDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00	P/R Deduction (\$50.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. GREGORY RAYMOND COMSTOCK		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1312 GLEN CEDARS DR		Transaction ID: PR38345618284
City MABLETON	State GA	Zip Code 30126
Amount of Each Receipt this Period _____ 375.66		
FEC ID number of contributing federal political committee. C		
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation GEN MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2817.48	P/R Deduction (\$197.25 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	499.08
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 97 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. GREGORY R SWANY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 301 N LAKE RD		Transaction ID: PR38345648284	
City BIRMINGHAM	State AL	Zip Code 35242	Amount of Each Receipt this Period _____ 116.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation DIV MGR MECH OPNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 256.66	
		P/R Deduction (\$60.67 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. ERWIN G ALLEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7303 NORTHQUAY COURT		Transaction ID: PR48733428284	
City HOLLAND	State OH	Zip Code 43528	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation DIV MGR MECH OPNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 240.00	
		P/R Deduction (\$30.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. WILLIAM B SPICUZZA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 618 TERRACE AVE		Transaction ID: PR53581788284	
City VIRGINIA BEACH	State VA	Zip Code 23451	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation DIR MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 400.00	
		P/R Deduction (\$25.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 196.66
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 / 108
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. FREDERICK W FLORIAN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 928 BRASILENO CT		Transaction ID: PR53581798284	
City VIRGINIA BEACH	State VA	Zip Code 23456	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation DIR MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		

P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) B. MARK A ADAIR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 15390 MILL ST		Transaction ID: PR57022898284	
City SAEGERTOWN	State PA	Zip Code 16433	Amount of Each Receipt this Period _____ 40.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation SR COMM ENGR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 320.00		

P/R Deduction (\$20.00 Semi-Monthly)

Full Name (Last, First, Middle Initial) C. DENNIS L KERBY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 947 FOREST LAKES CIR		Transaction ID: PR60587018284	
City CHESAPEAKE	State VA	Zip Code 23322	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND	Occupation ASST DIR LABOR RELS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		

P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 130.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 108		
	<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

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. DONALD R CRAINE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7 FARMHOUSE LN		Transaction ID: PR62378248284	
City CARLISLE	State PA	Zip Code 17013	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation SUPT OF TERMINAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 400.00	
		P/R Deduction (\$25.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) B. M L RUNYON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 111 MELODY LN		Transaction ID: PR89051858284	
City SCOTT DEPOT	State WV	Zip Code 25560	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation TRAINMASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 240.00	
		P/R Deduction (\$15.00 Semi-Monthly)	

Full Name (Last, First, Middle Initial) C. S L MASON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 194 14940 WOODSIDE DR		Transaction ID: PR93804388284	
City ROCKY RIDGE	State OH	Zip Code 43458	Amount of Each Receipt this Period _____ 68.58
FEC ID number of contributing federal political committee. C _____			
Name of Employer NS CORP GOOD GOVERNMENT FUND		Occupation DIV RFE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 544.72	
		P/R Deduction (\$37.71 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 148.58
TOTAL This Period (last page this line number only) ▶	_____ 38510.65

**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)

PAGE 100 / 108

<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Team Sununu		Transaction ID: 16449327 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address P.O. Box 500		Amount of Each Disbursement this Period 1000.00
City Rye State NH Zip Code 03870	011 Category/ Type	
Purpose of Disbursement		
Candidate Name John Sununu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 2	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Good Fund		Transaction ID: 16446701 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address % Laura Bell P. O. Box 3404		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22302	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Becerra For Congress		Transaction ID: 16451503 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address PO Box 116		Amount of Each Disbursement this Period 1000.00
City Hyattsville State MD Zip Code 20781	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Xavier Becerra		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

PAGE 101 / 108

<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Bridge PAC		Transaction ID: 16451247 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 499 South Capitol Street, SW Suite 412		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DeFazio for Congress		Transaction ID: 16474457 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 1316		Amount of Each Disbursement this Period 2000.00
City Springfield State OR Zip Code 97477	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Peter DeFazio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HALPAC		Transaction ID: 16474456 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address % William smith 2404 W. Walter Reed Drive, Apt. B		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22206	011 Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Cantor For Congress		Transaction ID: 16474464 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address P. O. Box 17813		Amount of Each Disbursement this Period 5000.00
City Richmond State VA Zip Code 23226	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. Eric I. Cantor		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 7	Amount of Each Disbursement this Period 1000.00	

Full Name (Last, First, Middle Initial) B. Friends of Clay Shaw		Transaction ID: 16474463 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address P.O. Box 2188		Amount of Each Disbursement this Period 1000.00
City Fort Lauderdale State FL Zip Code 33321-2188	Purpose of Disbursement 011 Category/Type	
Candidate Name Clay Shaw, Jr.		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Amount of Each Disbursement this Period 1000.00	

Full Name (Last, First, Middle Initial) C. Pascrell For Congress Inc.		Transaction ID: 16474465 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address PO Box 640		Amount of Each Disbursement this Period 1000.00
City Totowa State NJ Zip Code 07511	Purpose of Disbursement 011 Category/Type	
Candidate Name Rep. William J. Pascrell, Jr.		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 8	Amount of Each Disbursement this Period 1000.00	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Henry E. Brown Jr. For Congress		Transaction ID: 16474467 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address P. O. Box 61886		Amount of Each Disbursement this Period 1000.00
City North Charleston State SC Zip Code 29419	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Henry E. Brown, Jr.		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kevin Brady for Congress		Transaction ID: 16474350 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address 3323 North Washington Blvd		Amount of Each Disbursement this Period 2000.00
City Arlington State VA Zip Code 22201	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Kevin Brady		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ray Meier for Congress		Transaction ID: 16474454 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address 250 Genesee Street		Amount of Each Disbursement this Period 2000.00
City Utica State NY Zip Code 13501	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Ray Meier		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 47	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Weldon Victory Committee		Transaction ID: 16474455 Date of Disbursement
Mailing Address c/o Goetas Associates 1707 Prince Street #5		<input type="text" value="08"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name Curt Weldon		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State: PA	District: 7	

Full Name (Last, First, Middle Initial) B. DANPAC		Transaction ID: 16474458 Date of Disbursement
Mailing Address 107 S. West Street PMB #722		<input type="text" value="08"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2000.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="011"/> Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) C. Kay Bailey Hutchison For Senate Committee		Transaction ID: 16489888 Date of Disbursement
Mailing Address P.O. Box 9190 800 Brazos Suite 1200		<input type="text" value="07"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City Dallas	State TX	Zip Code 75209
Purpose of Disbursement Funds Reported On <Enter Report Name Her		Amount of Each Disbursement this Period
Candidate Name Sen. Kay Hutchison		<input type="text" value="2000.00"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Funds Reported On <Enter Report Name Here>
State: TX	District: 1	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Kay Bailey Hutchison For Senate Committee		Transaction ID: 16489889 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 6	
Mailing Address P.O. Box 9190 800 Brazos Suite 1200		Amount of Each Disbursement this Period 2000.00	
City Dallas State TX Zip Code 75209	[MEMO ITEM] Re-designated funds for trans. dated 7/17/2006		
Purpose of Disbursement Re-designated funds for trans. dated 7/1			011 Category/Type
Candidate Name Sen. Kay Hutchison			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 1

Full Name (Last, First, Middle Initial) B. People with Hart		Transaction ID: 16601856 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6	
Mailing Address % Rob Jennings 3000 K Street, NW, Suite 125		Amount of Each Disbursement this Period 2000.00	
City Washington State DC Zip Code 20007	[MEMO ITEM] Re-designated funds for trans. dated 7/17/2006		
Purpose of Disbursement			011 Category/Type
Candidate Name Melissa Hart			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 4

Full Name (Last, First, Middle Initial) C. Friends Of Kent Conrad		Transaction ID: 16601823 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6	
Mailing Address PO Box 812		Amount of Each Disbursement this Period 1000.00	
City Bismarck State ND Zip Code 58502	[MEMO ITEM] Re-designated funds for trans. dated 7/17/2006		
Purpose of Disbursement			011 Category/Type
Candidate Name Sen. Kent Conrad			Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: 1

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Next Century Fund		Transaction ID: 16601873 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address 116 South Royal Street		Amount of Each Disbursement this Period 2500.00
City Alexandria State VA Zip Code 22314		
Purpose of Disbursement	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Snowe For Senate		Transaction ID: 16601853 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address PO Box 2006		Amount of Each Disbursement this Period 2000.00
City Portland State ME Zip Code 04104		
Purpose of Disbursement	011 Category/ Type	
Candidate Name Sen. Olympia Snowe		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. 21st Century Majority Fund		Transaction ID: 16601779 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 6
Mailing Address 6065 Roswell Road #2274		Amount of Each Disbursement this Period 2500.00
City Atlanta State GA Zip Code 30328		
Purpose of Disbursement	011 Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
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)

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<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)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. National Leadership PAC		Transaction ID: 16601857																					
Mailing Address P.O. Box 5577		Date of Disbursement																					
City Manhattanville State NY Zip Code 10027		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		2	9		2	0	0	6														
Purpose of Disbursement		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type																					
State: District:		011																					
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	42000.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Norfolk Southern Good Government Fund

Full Name (Last, First, Middle Initial) A. Raymond E. Basham for Senate		Transaction ID: 16281527 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 12406 Telegraph Rd		Amount of Each Disbursement this Period -200.00 Duplicate
City Taylor State MI Zip Code 48180		
Purpose of Disbursement Duplicate Candidate Name Ray Basham Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 8 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type	

Full Name (Last, First, Middle Initial) B. Committee to Elect Tom Casperson		Transaction ID: 16281529 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address P.O. Box 84		Amount of Each Disbursement this Period -100.00 Duplicate
City Escanaba State MI Zip Code 49829		
Purpose of Disbursement Duplicate Candidate Name Tom Casperson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type	

Full Name (Last, First, Middle Initial) C. Friends of Morris Hood III		Transaction ID: 16281526 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 8872 Cloverlawn		Amount of Each Disbursement this Period -150.00 Duplicate
City Detroit State MI Zip Code 48204		
Purpose of Disbursement Duplicate Candidate Name Morris Hood, III Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	-450.00
TOTAL This Period (last page this line number only) ▶	-450.00