

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

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

FOR LINE NUMBER: PAGE 117 OF 209

(check only one)

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

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NAME OF COMMITTEE (In Full)

CSX Corporation Good Government Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Logan, Rodney, D, ,

Mailing Address 461 SUMMERSET DRIVE

City

ST. JOHNS

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CSX Transportation Inc

Occupation (for Individual)

AVP Safety

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3739.54

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2017

Transaction ID : A2017-2366971

Amount of Each Receipt this Period

349.78

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lonegro, Frank, , ,

Mailing Address 8041 Whisper Lake Lane West

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

CSX Corporation

Occupation (for Individual)

EVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4583.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2017

Transaction ID : A2017-2367058

Amount of Each Receipt this Period

416.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lonegro, Kristin, , ,

Mailing Address 3820 Biggin Church Rd W

City

Jacksonville

State

FL

Zip Code

32224-7984

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Jacksonville Marine Institute

Occupation (for Individual)

Adolescent Counslor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 27 / 2017

Transaction ID : A2017-2651936

Amount of Each Receipt this Period

5000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

5766.45

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