



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GOOD FUND, THE

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		21760.44
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	42323.55									
(c) Total Receipts (from Line 19) .....	18220.00	155181.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	60543.55	176942.03								
7. Total Disbursements (from Line 31) .....	8558.48	124956.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	51985.07	51985.07								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
GOOD FUND, THE

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	6250.00	27030.70
(i) Itemized (use Schedule A) .....	4970.00	5255.89
(ii) Unitemized .....	11220.00	32286.59
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7000.00	122895.00
(c) Other Political Committees (such as PACs) .....	18220.00	155181.59
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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)) .....	18220.00	155181.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	18220.00	155181.59

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	4558.48	94056.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	4558.48	94056.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	16000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	2000.00	14900.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8558.48	124956.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	8558.48	124956.96

**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) .....	18220.00	155181.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18220.00	155181.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4558.48	94056.96
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4558.48	94056.96

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 16</span>
	(check only one)
<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

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)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A.</b> Marshall E. Baker		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 2600 Londonderry Rd		<b>Transaction ID:</b> SA11A1.4940
City State Zip Code Alexandria VA 22308	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> T.E. Beck, Jr		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 320 Old Grove Ln		<b>Transaction ID:</b> SA11A1.4916
City State Zip Code Glasgow VA 24555	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank A. Boxley, Sr		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 3380 Peakwood Dr SW		<b>Transaction ID:</b> SA11A1.4930
City State Zip Code Roanoke VA 24014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 / 16
	<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)  
GOOD FUND, THE

**A.** Full Name (Last, First, Middle Initial)  
David H. Burrows

Mailing Address 2301 Stanley Ave

City State Zip Code  
Roanoke VA 24014

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.4924

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Michael G. Erath

Mailing Address 5333 Fox Ridge Rd

City State Zip Code  
Roanoke VA 24018

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

Name of Employer Erath Veneer Corp Occupation President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.4922

Amount of Each Receipt this Period  
250.00

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

Mailing Address 121 W Trade St, 27th Fl

City State Zip Code  
Charlotte NC 28202

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

Name of Employer Faison & Associates Occupation Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.4936

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	750.00
<b>TOTAL</b> 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 / 16
	<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)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A.</b> Wayne Herkness, II		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 25 Marys Ln		<b>Transaction ID:</b> SA11A1.4938
City Lewisburg	State WV	Zip Code 24901
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Samuel B. Long		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 2326 Laburnum Ave		<b>Transaction ID:</b> SA11A1.4928
City Roanoke	State VA	Zip Code 24015
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer Miller, Long	Occupation Appraiser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> William R. Martin, Jr		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 1206 Mulberry Rd		<b>Transaction ID:</b> SA11A1.4918
City Martinsville	State VA	Zip Code 24112
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Blue Ridge Aquaculture Inc	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> 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 / 16
	<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)  
GOOD FUND, THE

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

Mailing Address 151 Westminister Way

City Lynchburg State VA Zip Code 24503

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 28 / 2007

Transaction ID: SA11A1.4932

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
James W. Thweatt, Jr

Mailing Address 135 Ferrum Dr

City Salem State VA Zip Code 24153

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

Name of Employer Lewis-Gale Medical Center Occupation Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 28 / 2007

Transaction ID: SA11A1.4926

Amount of Each Receipt this Period  
500.00

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

Mailing Address PO Box 1577

City Lexington State VA Zip Code 24450

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
09 / 28 / 2007

Transaction ID: SA11A1.4920

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> 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 10 / 16	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

**A.** Full Name (Last, First, Middle Initial)  
L.F. Wilt

Mailing Address 20102 Dovesville Rd

City State Zip Code  
Bergton VA 22811

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

Name of Employer Superior Concrete Occupation CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11A1.4934

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	6250.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 16
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A. DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION</b>		Date of Receipt
Mailing Address 1111 19TH STREET NW SUITE 1100		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4913
<input type="text" value="C"/> <input type="text" value="C00235309"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="2000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE</b>		Date of Receipt
Mailing Address 101 Constitution Ave. NW Suite 800 West		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.4914
<input type="text" value="C"/> <input type="text" value="C00284885"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="5000.00"/>
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="7000.00"/>

**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)

PAGE 12 / 16

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

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A. Digital Image Printing</b>		<b>Transaction ID:</b> SB21B.4897
Mailing Address 1615 Roanoke Rd		Date of Disbursement 09 / 26 / 2007
City Daleville	State VA	Zip Code 24083
Purpose of Disbursement Generic Printing	Amount of Each Disbursement this Period 2992.48	
Candidate Name	Category/ Type	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Molly Koon</b>		<b>Transaction ID:</b> SB21B.4869
Mailing Address 6432 Poage Valley Rd		Date of Disbursement 09 / 11 / 2007
City Roanoke	State VA	Zip Code 24018
Purpose of Disbursement Postage Reimbursement	Amount of Each Disbursement this Period 1066.00	
Candidate Name	Category/ Type	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Political Compliance Services</b>		<b>Transaction ID:</b> SB21B.4896
Mailing Address PO Box 373		Date of Disbursement 09 / 20 / 2007
City Fairfax Station	State VA	Zip Code 22039
Purpose of Disbursement Accounting & Compliance Fees	Amount of Each Disbursement this Period 500.00	
Candidate Name	Category/ Type	
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) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4558.48</b>
<b>TOTAL</b> 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 13 / 16

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

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial)

**A.** U.S. Postmaster

Mailing Address 1492 Roanoke Rd

City Daleville State VA Zip Code 24083

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1066.00

**[MEMO ITEM]**

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

0.00

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

4558.48

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A. GOODE FOR CONGRESS</b>		<b>Transaction ID: SB23.4898</b>
Mailing Address 235 South Main Street		Date of Disbursement 09 / 18 / 2007
City Rocky Mount	State VA	Zip Code 24151
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name GOODE FOR CONGRESS		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 05		

Full Name (Last, First, Middle Initial) <b>B. PEOPLE FOR ENGLISH</b>		<b>Transaction ID: SB23.4899</b>
Mailing Address PO BOX 1940		Date of Disbursement 09 / 26 / 2007
City ERIE	State PA	Zip Code 16507
Purpose of Disbursement		Amount of Each Disbursement this Period 1000.00
Candidate Name PEOPLE FOR ENGLISH		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2000.00

# 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)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A. Branscom for Commonwealth Attorney</b>		<b>Transaction ID: SB29.4904</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7	
Mailing Address 456 Griffith Rd		Amount of Each Disbursement this Period 250.00	
City Check	State VA		Zip Code 24072
Purpose of Disbursement State Candidate Contribution			Category/ Type
Candidate Name			
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) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>B. Chaz for Clerk</b>		<b>Transaction ID: SB29.4912</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 7	
Mailing Address 718 Hickory Hill Dr		Amount of Each Disbursement this Period 250.00	
City Harrisonburg	State VA		Zip Code 22801
Purpose of Disbursement State Candidate Contribution			Category/ Type
Candidate Name			
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) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>C. Keen for Clerk</b>		<b>Transaction ID: SB29.4906</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7	
Mailing Address PO Box 123		Amount of Each Disbursement this Period 250.00	
City Salem	State VA		Zip Code 24153
Purpose of Disbursement State Candidate Contribution			Category/ Type
Candidate Name			
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) ▼		
State: _____ District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
GOOD FUND, THE

Full Name (Last, First, Middle Initial) <b>A. Rodney McNeil for Board</b>		<b>Transaction ID:</b> SB29.4910
Mailing Address 5540 Arthur St		Date of Disbursement 09 / 20 / 2007
City Roanoke	State VA	Zip Code 24018
Purpose of Disbursement State Candidate Contribution		Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Virginia Republican Senate Leadership Trust</b>		<b>Transaction ID:</b> SB29.4908
Mailing Address 4551 Cox Rd, Ste 110		Date of Disbursement 09 / 20 / 2007
City Glen Allen	State VA	Zip Code 23060
Purpose of Disbursement State Committee Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	
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) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2000.00