

# 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

DuPont Good Government Fund

ADDRESS (number and street)

1007 Market Street

Check if different than previously reported. (ACC)

Wilmington

DE

19898

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIPCODE

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:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input checked="" type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3)            | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4)            | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on    in the State of

- (d) 30-Day Post-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on    in the State of

5. Covering Period

01

01

2007

through

01

31

2007

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 Mr. Thomas M. Rossiter

Signature of Treasurer Electronically Filed by Mr. Thomas M. Rossiter

Date

02

07

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.

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
DuPont Good Government Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	1

D	D
3	1

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		17478.34
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	17478.34									
(c) Total Receipts (from Line 19) .....	12428.99	12428.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	29907.33	29907.33								
7. Total Disbursements (from Line 31) .....	150.00	150.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	29757.33	29757.33								
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  
DuPont Good Government Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	1

D	D
3	1

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	2733.32	2733.32
(i) Itemized (use Schedule A) .....	9694.71	9694.71
(ii) Unitemized .....	12428.03	12428.03
(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) .....	12428.03	12428.03
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.) .....	0.96	0.96
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)) .....	12428.99	12428.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12428.99	12428.99

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	150.00	150.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	150.00	150.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	150.00	150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	150.00	150.00

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	12428.03	12428.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12428.03	12428.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	150.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	150.00	150.00

# 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 6 / 8
	<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)  
DuPont Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) LINDA FISHER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1113151618396	
Mailing Address 3225 IDAHO AVE NW		Amount of Each Receipt this Period 300.00	
City WASHINGTON	State DC	Zip Code 20016-3720	P/R Deduction (\$300.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00	
Name of Employer DuPont Company	Occupation VP & Chief Sustainability Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) THOMAS SAGER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR366876618396	
Mailing Address 3903 Heather Drive		Amount of Each Receipt this Period 208.33	
City Wilmington	State DE	Zip Code 19807-2117	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 208.33	
Name of Employer Dupont Company	Occupation VP & Assistant General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) JOHN SHANNON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR366903718396	
Mailing Address 1109 KELLY DRIVE		Amount of Each Receipt this Period 208.33	
City NEWARK	State DE	Zip Code 19711-2423	P/R Deduction (\$208.33 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 208.33	
Name of Employer DUPONT COMPANY	Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	716.66
<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 / 8
	<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. CARL LUKACH</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P O BOX 223		<b>Transaction ID: PR366908218396</b>	
City <b>ROCKLAND</b>	State <b>DE</b>	Zip Code <b>19732-0223</b>	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer <b>DUPONT COMPANY</b>	Occupation <b>FINANCIAL MANAGER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$300.00 Monthly)	

Full Name (Last, First, Middle Initial) <b>B. THOMAS CONNELLY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 201 CHANDLER LANE		<b>Transaction ID: PR366929718396</b>	
City <b>GREENVILLE</b>	State <b>DE</b>	Zip Code <b>19807-1109</b>	Amount of Each Receipt this Period _____ 416.66
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer <b>DUPONT COMPANY</b>	Occupation <b>DIRECTOR</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 416.66		
		P/R Deduction (\$416.66 Monthly)	

Full Name (Last, First, Middle Initial) <b>C. CHARLES HOLLIDAY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO BOX 333		<b>Transaction ID: PR366941518396</b>	
City <b>ROCKLAND</b>	State <b>DE</b>	Zip Code <b>19732-0333</b>	Amount of Each Receipt this Period _____ 400.00
FEC ID number of contributing federal political committee. <b>C</b> _____			
Name of Employer <b>DUPONT COMPANY</b>	Occupation <b>CEO</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 400.00		
		P/R Deduction (\$400.00 Monthly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>1116.66</b>
<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 / 8
	<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. JAMES PORTER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address PO BOX 1127		<b>Transaction ID: PR366942118396</b>
City <b>CHADDS FORD</b>	State <b>PA</b>	Zip Code <b>19317-0659</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ <b>300.00</b>
Name of Employer <b>DUPONT COMPANY</b>	Occupation <b>DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>300.00</b>	
		P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial) <b>B. JAMES FORSMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 18 WITHERS WAY SANFORD RIDGE		<b>Transaction ID: PR454418718396</b>
City <b>HOCKESSIN</b>	State <b>DE</b>	Zip Code <b>19707-2510</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ <b>300.00</b>
Name of Employer <b>DUPONT SAFETY RESOURCES BUSINESS</b>	Occupation <b>GLOBAL BUSINESS DIRECTOR</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>300.00</b>	
		P/R Deduction (\$300.00 Monthly)

Full Name (Last, First, Middle Initial) <b>C. UMA CHOWDHRY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 104 REDWOOD LN		<b>Transaction ID: PR949577718396</b>
City <b>KENNETT SQUARE</b>	State <b>PA</b>	Zip Code <b>19348-2731</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ <b>300.00</b>
Name of Employer Dupont	Occupation <b>Vice President - CR&amp;D</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>300.00</b>	
		P/R Deduction (\$300.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2733.32</b>