FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instru	Office use only		
NAME OF COMMITTEE (in fu	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
E.I. du Pont de	Nemours Company Good G	overnment Fund (Dupont Goo	od Gove-	
ADDRESS (number and str	1007 Market Stre	et		
(Check if addres is changed)	s Wilmington		DE 19898	
COMMITTEE E MAII	ADDRESS	CITY▲	STATE▲ ZIP CODE ▲	
committee's e-mail dupont@myfeci				
COMMITTEE'S WEB P.	AGE ADDRESS (URL)			
COMMITTEE'S FAX NU	MBER			
بنا لبنا				
2. DATE 0 7	/ D D / Y Y Y Y Y Y 2007			
3. FEC IDENTIFICAT	ON NUMBER	C C00171926		
4. IS THIS STATEME	NT NEW (N) O	R X AMENDED (A)		
I certify that I have examine	ed this Statement and to the best of my	y knowledge and belief it is true, correct a	and complete	
Type or Print Name of Ti	reasurer Christine Hel	d		
Signature of Treasurer	Electronically Filed by Christ	ine Held	Date 07 / 31 / Y Y Y Y	
NOTE: Submission of false	·	n may subject the person signing this Sta	atement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS	
Office Use Only		For further information Federal Election Commi Toll Free 800-424-9530		

	FEOFori	m 1 (Revised 02/2003)	Page 2					
5.	TYPE OF CO	MMITTEE (Check One)						
	(a)	This committee is a principal campaign committee. (Complete the candidate information below	.)					
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the cand information below.)								
Name of  Candidate								
	Candidate Party Affiliatio	n Office Sought: House Senate Presi	State State District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate							
	(d) X	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
	(e)	This committee is a separate segregated fund						
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.							
6. Name of Any Connected Organization or Affiliated Committee								
 			<u> </u>					
_		1007 Market Street						
	Mailing Addre	ss						
CITY STATE STATE ZIP CODE A  Relationship Connected Organization  Type of Connected Organization:								
						X Corpo	oration Corporation w/o Capital Stock Labor	Organization
						Mem	bership Organization Trade Association Coop	erative

	FEC Form	1 (Revised 02)	/2003)			Page 3	
٧	Vrite or Type Comn	nittee Name					
	E.I. du Pont (	de Nemours	Company Good Government	Fund (Dupont Good Go	vernment	Fun-	
7.	Custodian of Re		ntify by name, address, (phone roooks and records.	number optional), and p	osition of t	he person in	
	Full Name  Ms Cresta Miller						
	Mailing Address		PAC Services, LLC	<u> </u>			
			7700 Old Branch	Avenue Suite D-103			
			Clinton		MD	20735	
	Title or Position	♥	CITY A	ST	TATE A	ZIP CODE A	
		Custodian	of Records	Telephone number	301	868 1888 	<b>;</b>
	Full Name of Treasurer  Christine Held  Mailing Address  Dupont Good Governm			vernment Fund			
	Mailing Address		PO Box 80705				
			Wilmington		DE	19880 0705	
	Title or Position	♥	CITY A	ST	TATE <b>A</b>	ZIP CODE A	
		Treasurer		Telephone number	302	999 6647	,
	Full Name of Designated Agent	Jacquel	ine Harris				
	Mailing Address		DuPont Good Gov	ernment Fund			
			1007 Market Stree	t D-13048			
			Wilmington		DE _	19898	
	Title or Position	<b>∀</b>	CITY A	ST	ATE 🛦	ZIP CODE A	
		Assistant T	reasurer	Talonboom	302	773 0246	j

	FEC Form 1 (Revised 0)	2/2003)	Page 4	
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.			
	Name of Bank, Depository, etc.	•		
	Bank o	of America		
	Mailing Address	7810 Old Branch Avenue		
		Clinton MD 2	20735	
		CITY 🗠 STATE 🚄	ZIP CODE △	