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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

1. NAME OF COMMITTEE (in full) (Check if name is changed) Examples: If typing, type over the lines

12FE4M5

The Good Fund

ADDRESS (number and street) PO Box 3404

(Check if address is changed)

Alexandria VA 22302

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

N/A

COMMITTEE'S WEB PAGE ADDRESS (URL)

N/A

COMMITTEE'S FAX NUMBER

2028637509

2. DATE 01 27 2005

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Christopher J. Ward

Signature of Treasurer

Date 01 27 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2005)