

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

DuPont Good Government Fund

ADDRESS (Number and street)

Rt. 141 & Lancaster Pike

(Check if address is changed)

BMP30-1318

Wilmington

DE

19805

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

0-

2. DATE 10 / 13 / 2003

3. FEC IDENTIFICATION NUMBER C C00171926

4. IS THIS STATEMENT NEW (N) OR X 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 Mr. Thomas M. Rossiter

Signature of Treasurer Electronically Filed by Mr. Thomas M. Rossiter Date 10 / 13 / 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
Only

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

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (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 candidate information below.)

Name of Candidate _____

Candidate	Office				State
Party Affiliation	Sought:	House	Senate	President	District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) 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

DuPont _____

Mailing Address _____ 1007 Market Street _____

Wilmington _____ DC _____ 19898 - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____ Connected Organization _____

Type of Connected Organization:

- Corporation
- Membership Organization
- Corporation w/o Capital Stock
- Trade Association
- Labor Organization
- Cooperative

Write or Type Committee Name

DuPont Good Government Fund

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name Ms Cresta Heltemes

Mailing Address Political Action Committee Service
7700 Old Branch Avenue Suite D-103
Clinton MD 20735

Title or Position ▼ PAC Administrator CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 301 - 868 - 1888

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Mr. Thomas M. Rossiter

Mailing Address DuPont - Room BMP30-1318
Rt. 141 & Lancaster Pike
Wilmington DE 19805

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 302 - 992 - 2226

Full Name of Designated Agent Jacqueline Harris

Mailing Address DuPont Good Government Fund
1007 Market Street D-6032
Wilmington DE 19898

Title or Position ▼ Assistant Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 302 - 773 - 0246

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 of America

Mailing Address

7810 Old Branch Avenue

Clinton

MD

20735 -

CITY Δ

STATE Δ

ZIP CODE Δ