

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
GOOD FUND, THE

ADDRESS (number and street) PO BOX 3404
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22302

2. **FEC IDENTIFICATION NUMBER** C00409185
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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2007 through 07 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 Laura McMenamin

Signature of Treasurer Electronically Filed by Laura McMenamin Date 04 18 2008

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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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
GOOD FUND, THE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	7

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		21760.44
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	43349.97									
(c) Total Receipts (from Line 19)	70161.59	112661.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	113511.56	134422.03								
7. Total Disbursements (from Line 31)	46145.54	67056.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67366.02	67366.02								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	7

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	5780.70	20780.70
(i) Itemized (use Schedule A)		
(ii) Unitemized	285.89	285.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6066.59	21066.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	64095.00	91595.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	70161.59	112661.59
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))	70161.59	112661.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70161.59	112661.59

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	35995.54	44656.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	35995.54	44656.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	14000.00
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.....	150.00	8400.00
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))..	46145.54	67056.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46145.54	67056.01

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)	70161.59	112661.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70161.59	112661.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	35995.54	44656.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35995.54	44656.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 29
	<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)
GOOD FUND, THE

A.	Full Name (Last, First, Middle Initial) Bob Burgin		Date of Receipt MM / DD / YYYY 07 / 20 / 2007
	Mailing Address PO Box 766		Transaction ID: SA11AI.4842
	City Meadows of Dan	State VA	Zip Code 24120
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 283.29
	Name of Employer Chateau Morrisette	Occupation Owner	In-kind - Catering Costs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 283.29	

B.	Full Name (Last, First, Middle Initial) Gaston Cantens		Date of Receipt MM / DD / YYYY 07 / 23 / 2007
	Mailing Address 11750 SW 29th St		Transaction ID: SA11AI.4857
	City Miami	State FL	Zip Code 33175
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
	Name of Employer Florida Crystals	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

C.	Full Name (Last, First, Middle Initial) Drucilla DeLay		Date of Receipt MM / DD / YYYY 07 / 23 / 2007
	Mailing Address 3331 Bridgeberry Ln		Transaction ID: SA11AI.4856
	City Houston	State TX	Zip Code 77082
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3783.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 29
	<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

A.	Full Name (Last, First, Middle Initial) Doug Flemer	Date of Receipt MM / DD / YYYY 07 / 20 / 2007
	Mailing Address 5872 Leedstown Rd	Transaction ID: SA11AI.4830
	City State Zip Code Oak Grove VA 22443	Amount of Each Receipt this Period 238.77
	FEC ID number of contributing federal political committee. C	In-kind - Catering Costs
	Name of Employer Ingleside Plantation Vineyards Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.77	

B.	Full Name (Last, First, Middle Initial) Tim Putschta	Date of Receipt MM / DD / YYYY 07 / 20 / 2007
	Mailing Address 1947 Frene Creek Rd	Transaction ID: SA11AI.4845
	City State Zip Code Hermann MO 65041	Amount of Each Receipt this Period 311.76
	FEC ID number of contributing federal political committee. C	In-kind - Catering Costs
	Name of Employer Adam Putschta & Son Winery Co Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 311.76	

C.	Full Name (Last, First, Middle Initial) Emma Randel	Date of Receipt MM / DD / YYYY 07 / 20 / 2007
	Mailing Address 3659 South Ox Rd	Transaction ID: SA11AI.4827
	City State Zip Code Edinburg VA 22824	Amount of Each Receipt this Period 230.88
	FEC ID number of contributing federal political committee. C	In-kind - Catering Costs
	Name of Employer Shenandoah Vineyards Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.88	

SUBTOTAL of Receipts This Page (optional)	781.41
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 29
	(check only one)
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A.

Full Name (Last, First, Middle Initial) Jeff Stone		Date of Receipt MM / DD / YYYY 07 / 20 / 2007
Mailing Address 462 Winery Ln		Transaction ID: SA11AI.4839
City Nellysford	State VA	Zip Code 22958
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 216.00
Name of Employer Wintergreen Winery	Occupation Owner	In-kind - Catering Costs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

B.

Full Name (Last, First, Middle Initial) Carlyle P. Thorsen		Date of Receipt MM / DD / YYYY 07 / 23 / 2007
Mailing Address 3906 Aspen St		Transaction ID: SA11AI.4854
City Chevy Chase	State MD	Zip Code 20815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer American Continental Group	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1216.00
TOTAL This Period (last page this line number only)	5780.70

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 29
	(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

A.

Full Name (Last, First, Middle Initial) 3M COMPANY		Date of Receipt MM / DD / YYYY 07 / 20 / 2007
Mailing Address PAC 3M Center Building 224-5N-40		Transaction ID: SA11C.4849
City St. Paul	State MN	Zip Code 55144
FEC ID number of contributing federal political committee. C C00084475		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

B.

Full Name (Last, First, Middle Initial) ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 07 / 03 / 2007
Mailing Address 120 Park Avenue		Transaction ID: SA11C.4772
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C C00089136		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

C.

Full Name (Last, First, Middle Initial) AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt MM / DD / YYYY 07 / 30 / 2007
Mailing Address 325 Seventh Street NW Suite 700		Transaction ID: SA11C.4861
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00106146		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	9000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 29
(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

A. Full Name (Last, First, Middle Initial)
AMERICAN MEAT INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1150 Connecticut Ave.
Suite 1200

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00024281

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 30 / 2007

Transaction ID: SA11C.4793

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AUCTION MARKETS POLITICAL ACTION COMMITTEE OF THE CHICAGO BOARD OF TRADE A/K/A AUCTION RECEIPTS

Mailing Address 1455 PENNSYLVANIA AVENUE NW
SUITE 1225

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00059832

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2007

Transaction ID: SA11C.4768

Amount of Each Receipt this Period
3000.00

C. Full Name (Last, First, Middle Initial)
BABCOCK AND WILCOX COMPANY GOOD GOVERNMENT FUND ;THE

Mailing Address 2016 Mt. Athos Rd

City Lynchburg State VA Zip Code 24504

FEC ID number of contributing federal political committee. **C** C00063461

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 03 / 2007

Transaction ID: SA11C.4769

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► 13000.00

TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 11 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A. Full Name (Last, First, Middle Initial)
CROPLIFE AMERICA POLITICAL ACTION COMMITTEE
 Mailing Address 1156 15TH STREET NW SUITE 400
 City State Zip Code
 WASHINGTON DC 20005
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 09 / 2007
Transaction ID: SA11C.4767
 Amount of Each Receipt this Period
 4000.00
 FEC ID number of contributing federal political committee. **C** C00248849
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

B. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICES ROUNDTABLE PAC
 Mailing Address 1001 Pennsylvania Avenue NW
 Suite 500 South
 City State Zip Code
 Washington DC 20004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 23 / 2007
Transaction ID: SA11C.4852
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C** C00193177
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

C. Full Name (Last, First, Middle Initial)
GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE
 Mailing Address 1299 Pennsylvania Ave NW
 Ste 1100
 City State Zip Code
 Washington DC 20004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2007
Transaction ID: SA11C.4795
 Amount of Each Receipt this Period
 3000.00
 FEC ID number of contributing federal political committee. **C** C00024869
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

SUBTOTAL of Receipts This Page (optional) ► 9500.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 12 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A. Full Name (Last, First, Middle Initial)
GODADDY.COM INC PAC

Mailing Address 14455 NORTH HAYDEN ROAD SUITE 219

City State Zip Code
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C** C00432328

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 3 0 / 2 0 0 7

Transaction ID: SA11C.4796

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MCGUIREWOODS LLP

Mailing Address One James Center
901 E. Cary Street

City State Zip Code
Richmond VA 23219

FEC ID number of contributing federal political committee. **C** C00225342

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 3 0 / 2 0 0 7

Transaction ID: SA11C.4792

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MIDNIGHT SUN POLITICAL ACTION COMMITTEE

Mailing Address 203 Maryland Avenue NE

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00345199

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 2 0 / 2 0 0 7

Transaction ID: SA11C.4850

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00

TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 13 / 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 07 / 23 / 2007
Transaction ID: SA11C.4859
 Amount of Each Receipt this Period: 3000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL RIFLE ASSOCIATION OF AMERICA POLITICAL VICTORY FUND

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 07 / 30 / 2007
Transaction ID: SA11C.4798
 Amount of Each Receipt this Period: 3000.00

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address Three Commercial Place

City Norfolk State VA Zip Code 23510

FEC ID number of contributing federal political committee. **C** C00009282

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 07 / 30 / 2007
Transaction ID: SA11C.4860
 Amount of Each Receipt this Period: 3000.00

SUBTOTAL of Receipts This Page (optional) ► 9000.00

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 29
	<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

A.	Full Name (Last, First, Middle Initial) OLSSON FRANK AND WEEDA PC FREEDOM PAC	Date of Receipt MM / DD / YYYY 07 / 19 / 2007
	Mailing Address 1400 16TH STREET NW SUITE 400	Transaction ID: SA11C.4779
	City State Zip Code WASHINGTON DC 20036	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C C00273136	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

B.	Full Name (Last, First, Middle Initial) ORACLE CORPORATION POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 07 / 20 / 2007
	Mailing Address 1015 15th Street Northwest Suite 200	Transaction ID: SA11C.4848
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00323048	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

C.	Full Name (Last, First, Middle Initial) QUALCOMM INCORPORATED POLITICAL ACTION COMMITTEE (QPAC)	Date of Receipt MM / DD / YYYY 07 / 03 / 2007
	Mailing Address 2001 PENNSYLVANIA AVE. NW SUITE 650	Transaction ID: SA11C.4771
	City State Zip Code WASHINGTON DC 20006	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C C00339085	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00

SUBTOTAL of Receipts This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 29
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GOOD FUND, THE

A. Full Name (Last, First, Middle Initial)
SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)

Mailing Address 1050 CONNECTICUT AVE NW SUITE 1200

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00359075

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 23 / 2007

Transaction ID: SA11C.4853

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
TEXANS FOR LAMAR SMITH

Mailing Address 5170 Broadway Ste 26

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing federal political committee. **C** C00197160

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 95.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 20 / 2007

Transaction ID: SA11C.4901

Amount of Each Receipt this Period
95.00

In-kind - Event Supplies

C. Full Name (Last, First, Middle Initial)
UNITED STATES SUGAR CORP-EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE

Mailing Address 111 PONCE DE LEON AVENUE

City State Zip Code
CLEWISTON FL 33440

FEC ID number of contributing federal political committee. **C** C00234120

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 19 / 2007

Transaction ID: SA11C.4777

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **6595.00**

TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 29	
	(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"/> 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)
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COMMITTEE)

Mailing Address 1150 17TH STREET NW SUITE 400

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For:
 Primary
 General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 30 / 2007

Transaction ID: SA11C.4794

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	64095.00

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 17 / 29

<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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bob Burgin</p> <p>Mailing Address PO Box 766</p> <p>City Meadows of Dan State VA Zip Code 24120</p> <p>Purpose of Disbursement In-kind - Catering Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4844</p> <p>Date of Disbursement 07 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 283.29</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Design Marketing</p> <p>Mailing Address 3636 Aerial Way Dr</p> <p>City Roanoke State VA Zip Code 24018</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4786</p> <p>Date of Disbursement 07 / 28 / 2007</p> <p>Amount of Each Disbursement this Period 3849.63</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Design Marketing</p> <p>Mailing Address 3636 Aerial Way Dr</p> <p>City Roanoke State VA Zip Code 24018</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4787</p> <p>Date of Disbursement 07 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 2556.25</p>

SUBTOTAL of Disbursements This Page (optional) **6689.17**

TOTAL 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 18 / 29

<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

<p>A. Full Name (Last, First, Middle Initial) Digital Image Printing</p> <p>Mailing Address 1615 Roanoke Rd</p> <p>City Daleville State VA Zip Code 24083</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4803</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="816.13"/></p>
<p>B. Full Name (Last, First, Middle Initial) Doug Flemer</p> <p>Mailing Address 5872 Leedstown Rd</p> <p>City Oak Grove State VA Zip Code 22443</p> <p>Purpose of Disbursement In-kind - Catering Costs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4832</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="238.77"/></p>
<p>C. Full Name (Last, First, Middle Initial) Goodlatte for Congress</p> <p>Mailing Address PO Box 292</p> <p>City Roanoke State VA Zip Code 24002</p> <p>Purpose of Disbursement List Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4821</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1341.50"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL 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 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

A.	Full Name (Last, First, Middle Initial) Hinaman & Company	Transaction ID: SB21B.4781 Date of Disbursement
	Mailing Address 703 Day Lane	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Strategic Planning Consultant Fees	<input type="text" value="12000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Randy Hinaman	Transaction ID: SB21B.4801 Date of Disbursement
	Mailing Address 703 Day Ln	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Reimbursement	<input type="text" value="256.35"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Laura Bell Consulting	Transaction ID: SB21B.4782 Date of Disbursement
	Mailing Address 4618 Latrobe Place	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Alexandria State VA Zip Code 22311	Amount of Each Disbursement this Period
	Purpose of Disbursement Generic Fundraising Consultant Fees	<input type="text" value="12000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="24256.35"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 20 / 29

<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

A.	Full Name (Last, First, Middle Initial) Laura Bell Consulting	Transaction ID: SB21B.4783 Date of Disbursement
	Mailing Address 4618 Latrobe Place	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Alexandria State VA Zip Code 22311	Amount of Each Disbursement this Period
	Purpose of Disbursement Travel Reimbursement	<input type="text" value="362.67"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Laura Bell Consulting	Transaction ID: SB21B.4784 Date of Disbursement
	Mailing Address 4618 Latrobe Place	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Alexandria State VA Zip Code 22311	Amount of Each Disbursement this Period
	Purpose of Disbursement Federal Express Reimbursement	<input type="text" value="126.85"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Laura Bell Consulting	Transaction ID: SB21B.4785 Date of Disbursement
	Mailing Address 4618 Latrobe Place	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Alexandria State VA Zip Code 22311	Amount of Each Disbursement this Period
	Purpose of Disbursement Kinkos Printing Reimbursement	<input type="text" value="24.57"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="514.09"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 21 / 29

<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

A.	Full Name (Last, First, Middle Initial) Political Compliance Services	Transaction ID: SB21B.4776 Date of Disbursement
	Mailing Address PO Box 373	<input type="text" value="07"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Fairfax Station State VA Zip Code 22039	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting & Compliance Fees	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tim Puchtla	Transaction ID: SB21B.4847 Date of Disbursement
	Mailing Address 1947 Frene Creek Rd	<input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Hermann State MO Zip Code 65041	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - Catering Costs	<input type="text" value="311.76"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Emma Randel	Transaction ID: SB21B.4829 Date of Disbursement
	Mailing Address 3659 South Ox Rd	<input type="text" value="07"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="07"/>
	City Edinburg State VA Zip Code 22824	Amount of Each Disbursement this Period
	Purpose of Disbursement In-kind - Catering Costs	<input type="text" value="230.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1542.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 22 / 29

<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

A.

Full Name (Last, First, Middle Initial)
Jeff Stone

Mailing Address 462 Winery Ln

City Nellysford State VA Zip Code 22958

Purpose of Disbursement
In-kind - Catering Costs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4841

Date of Disbursement

07 / 20 / 2007

Amount of Each Disbursement this Period

216.00

SUBTOTAL of Disbursements This Page (optional)

216.00

TOTAL This Period (last page this line number only)

35614.65

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 23 / 29

<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

A. Full Name (Last, First, Middle Initial)
CHARLIE DENT FOR CONGRESS

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.4817

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER SHAYS FOR CONGRESS

Mailing Address 98 East Avenue Rear Building
98 East Avenue Rear Building

City Norwalk State CT Zip Code 06851

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.4808

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF MIKE FERGUSON

Mailing Address c/o Ron Gravino P.O. Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB23.4810

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL 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)

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<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

A.

Full Name (Last, First, Middle Initial)
HELLER FOR CONGRESS

Transaction ID: SB23.4812

Date of Disbursement

Mailing Address 7840 Red Leaf Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	7

City Las Vegas State NV Zip Code 89131

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
KIRK FOR CONGRESS

Transaction ID: SB23.4814

Date of Disbursement

Mailing Address P.O. Box 8

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	7

City Winnetka State IL Zip Code 60093

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
KUHLMAN FOR CONGRESS

Transaction ID: SB23.4806

Date of Disbursement

Mailing Address 10 GANESVOORT STREET
SUITE 101

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	0	7

City BATH State NY Zip Code 14810

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

TOTAL 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)

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<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

A.	Full Name (Last, First, Middle Initial) MUSGRAVE FOR CONGRESS	Transaction ID: SB23.4805 Date of Disbursement
	Mailing Address 118 West Charlotte Street	<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Johnstown State CO Zip Code 80534	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THELMA DRAKE FOR CONGRESS	Transaction ID: SB23.4819 Date of Disbursement
	Mailing Address P.O. Box 61480	<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Virginia Beach State VA Zip Code 23466	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERN BUCHANAN FOR CONGRESS	Transaction ID: SB23.4816 Date of Disbursement
	Mailing Address P. O. Box 48928	<input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City Sarasota State FL Zip Code 34230	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 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

A.

Full Name (Last, First, Middle Initial)
WALSH FOR CONGRESS COMMITTEE

Mailing Address 306 WINKWORTH PARKWAY

City SYRACUSE State NY Zip Code 13215

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.4804

Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

10000.00

**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)

<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

A.	Full Name (Last, First, Middle Initial) Brandon Bell for Senate	Transaction ID: SB29.4826 Date of Disbursement 07 / 18 / 2007
	Mailing Address PO Box 20855	Amount of Each Disbursement this Period 184.20
	City Roanoke State VA Zip Code 24018	
	Purpose of Disbursement List Contribution to State Candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Chaz for Clerk	Transaction ID: SB29.4825 Date of Disbursement 07 / 18 / 2007
	Mailing Address 718 Hickory Hill Dr	Amount of Each Disbursement this Period 6.20
	City Harrisonburg State VA Zip Code 22801	
	Purpose of Disbursement List Contribution to State Candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Emmett Hanger for Senate	Transaction ID: SB29.4824 Date of Disbursement 07 / 18 / 2007
	Mailing Address PO Box 2	Amount of Each Disbursement this Period 14.20
	City Mt Solon State VA Zip Code 22843	
	Purpose of Disbursement List Contribution to State Candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL 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)

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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

A.

Full Name (Last, First, Middle Initial)
Friends of Morgan Griffith

Transaction ID: SB29.4789

Date of Disbursement

Mailing Address PO Box 2411

^M 0	^M 7	/	^D 3	^D 0	/	^Y 2	^Y 0	^Y 0	^Y 7
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City Salem State VA Zip Code 24153

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement
State Candidate Contribution

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

150.00

TOTAL This Period (last page this line number only)

150.00

Form/Schedule: **F3XA**

Transaction ID:

In response to your letter we have changed the political consultant description per your instructions, we have added the word generic to the fundraising consultant fees to show that they are for the benefit of the committee only. Also, the disbursements for List Rental and Printing were for the fundraising benefit of the committee not for any public communications or voter drive activity. 4-18-08 memo text: The amendments filed today are necessitated by the self-initiated review of this Committee's reports due to minor discrepancies found in reports prepared and filed by the Committee's prior treasurer.