

# 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** C00171926  
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 04 01 2006 through 04 30 2006

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 05 10 2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
DuPont Good Government Fund

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		66889.28
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	63527.29									
(c) Total Receipts (from Line 19) .....	10753.46	43375.47								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	74280.75	110264.75								
7. Total Disbursements (from Line 31) .....	7253.00	43237.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	67027.75	67027.75								
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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	3636.62	10613.39
(i) Itemized (use Schedule A) .....	7110.39	32735.49
(ii) Unitemized .....	10747.01	43348.88
(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) .....	10747.01	43348.88
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.) .....	6.45	26.59
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)) .....	10753.46	43375.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10753.46	43375.47

**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.....	53.00	137.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	53.00	137.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	32000.00
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.....	2200.00	11100.00
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))..	7253.00	43237.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7253.00	43237.00

**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) .....	10747.01	43348.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10747.01	43348.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	53.00	137.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	53.00	137.00

**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 / 20
	<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. KAREN WRIGLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 8400 SEAVIEW DR		<b>Transaction ID: PR1111740116771</b>
City <b>CHESTERFIELD</b>	State <b>VA</b>	Zip Code <b>23838-5165</b>
Amount of Each Receipt this Period _____ <b>83.33</b>		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Dupont Company	Occupation Kelvar Manufacturing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>333.32</b>	P/R Deduction (\$41.67 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>B. LINDA FISHER</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 3225 IDAHO AVE NW		<b>Transaction ID: PR1113151616771</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20016-3720</b>
Amount of Each Receipt this Period _____ <b>300.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		
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) ▼	Aggregate Year-to-Date ▼ _____ <b>1200.00</b>	P/R Deduction (\$300.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) <b>C. Mr. HUGH CAMPBELL</b>		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 7 Appleton Acres Court		<b>Transaction ID: PR366873416771</b>
City <b>Elkton</b>	State <b>MD</b>	Zip Code <b>21921-2111</b>
Amount of Each Receipt this Period _____ <b>65.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer DUPONT COMPANY	Occupation ENVIRONMENTAL MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ <b>260.00</b>	P/R Deduction (\$65.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>448.33</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 7 / 20
	<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. THOMAS SAGER</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 3903 Heather Drive		<b>Transaction ID: PR366876616771</b>
City Wilmington	State DE	Zip Code 19807-2117
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 208.33
Name of Employer Dupont Company	Occupation VP & Assistant General Counsel	P/R Deduction (\$208.33 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	

Full Name (Last, First, Middle Initial) <b>B. JOHN JESSUP</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 7 CARRIAGE PATH		<b>Transaction ID: PR366884816771</b>
City CHADDS FORD	State PA	Zip Code 19317-9194
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer DUPONT COMPANY	Occupation VP	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN MCCOOEY</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 170 OLDBURY DR		<b>Transaction ID: PR366885416771</b>
City WILMINGTON	State DE	Zip Code 19808-1435
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 54.50
Name of Employer DUPONT	Occupation MANAGER	P/R Deduction (\$54.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>362.83</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 9 / 20
	<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

**A.** Full Name (Last, First, Middle Initial)  
JOHN SHANNON

Mailing Address 1109 KELLY DRIVE

City State Zip Code  
NEWARK DE 19711-2423

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

Name of Employer Occupation  
DUPONT COMPANY MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 333.32

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR366903716771

Amount of Each Receipt this Period  
83.33

P/R Deduction (\$83.33 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
JOHN MOONEY

Mailing Address 250 POSSUM PARK ROAD

City State Zip Code  
NEWARK DE 19711-3820

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

Name of Employer Occupation  
DUPONT COMPANY PLANT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR366907016771

Amount of Each Receipt this Period  
70.00

P/R Deduction (\$70.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
HUNTER FICKE

Mailing Address 136 EAST 3RD STREET

City State Zip Code  
NEW CASTLE DE 19720-4537

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

Name of Employer Occupation  
DUPONT COMPANY TECHNICAL MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 311.80

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR366908116771

Amount of Each Receipt this Period  
77.95

P/R Deduction (\$77.95 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>231.28</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 10 / 20
	<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: PR366908216771</b>	
City State Zip Code ROCKLAND DE 19732-0223		Amount of Each Receipt this Period _____ 150.00	
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation DUPONT COMPANY FINANCIAL MANAGER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 600.00	
		P/R Deduction (\$150.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>B. ELLEN KULLMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5 GUYENNE RD		<b>Transaction ID: PR366910216771</b>	
City State Zip Code GREENVILLE DE 19807-1413		Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation DUPONT COMPANY VPGM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 400.00	
		P/R Deduction (\$100.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) <b>C. ROBERT RIDOUT</b>		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 304 LAVENDER DR		<b>Transaction ID: PR366915816771</b>	
City State Zip Code KENNETT SQUARE PA 19348-2583		Amount of Each Receipt this Period _____ 106.00	
FEC ID number of contributing federal political committee. C _____			
Name of Employer Occupation DUPONT COMPANY DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 424.00	
		P/R Deduction (\$106.00 Bi-Weekly)	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	_____ <b>356.00</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 12 / 20
	<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. ANDRE V BELL</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 108 HALLE DRIVE		<b>Transaction ID: PR366929116771</b>
City KENNETT SQUARE	State PA	Zip Code 19348-1878
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.67	
Name of Employer DUPONT	Occupation MANAGER	P/R Deduction (\$50.67 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.68	

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: PR366929716771</b>
City GREENVILLE	State DE	Zip Code 19807-1109
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 120.00	
Name of Employer DUPONT COMPANY	Occupation DIRECTOR	P/R Deduction (\$120.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>C. MATTHEW KOENINGS</b>		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 379 CASPARUS WAY		<b>Transaction ID: PR366937416771</b>
City ELKTON	State MD	Zip Code 21921-7564
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 150.00	
Name of Employer DUPONT	Occupation MANAGER	P/R Deduction (\$150.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>320.67</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 13 / 20
	<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

<b>A.</b> Full Name (Last, First, Middle Initial) CHARLES HOLLIDAY		Date of Receipt
Mailing Address PO BOX 333		<input type="text"/> / <input type="text"/> / <input type="text"/>
City ROCKLAND	State DE	Zip Code 19732-0333
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR366941516771
Name of Employer DUPONT COMPANY		Occupation CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> 400.00
Aggregate Year-to-Date ▼		P/R Deduction (\$400.00 Bi-Weekly)
<input type="text"/> 1600.00		

<b>B.</b> Full Name (Last, First, Middle Initial) JAMES PORTER		Date of Receipt
Mailing Address PO BOX 1127		<input type="text"/> / <input type="text"/> / <input type="text"/>
City CHADDS FORD	State PA	Zip Code 19317-0659
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR366942116771
Name of Employer DUPONT COMPANY		Occupation DIRECTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> 416.66
Aggregate Year-to-Date ▼		P/R Deduction (\$416.66 Bi-Weekly)
<input type="text"/> 1649.98		

<b>C.</b> Full Name (Last, First, Middle Initial) CYNTHIA GREEN		Date of Receipt
Mailing Address 14 OKIE DR		<input type="text"/> / <input type="text"/> / <input type="text"/>
City LANDENBERG	State PA	Zip Code 19350-9307
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> PR366943016771
Name of Employer DUPONT		Occupation Global Business Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> 83.33
Aggregate Year-to-Date ▼		P/R Deduction (\$83.33 Bi-Weekly)
<input type="text"/> 333.32		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 899.99
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 14 / 20
	<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

**A.** Full Name (Last, First, Middle Initial)  
Ms. NANCIE JOHNSON

Mailing Address 109 QUEEN ST

City State Zip Code  
ALEXANDRIA VA 22314-2610

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

Name of Employer Occupation  
DUPONT COMPANY VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR366968816771

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
JACK BAILEY

Mailing Address 107 HARTEFELD DR

City State Zip Code  
AVONDALE PA 19311-1407

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

Name of Employer Occupation  
DUPONT COMPANY MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR366971016771

Amount of Each Receipt this Period  
55.00

P/R Deduction (\$55.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
Ms. A T HAHN

Mailing Address 12918 CROWNE RIDGE LOOP  
APT #103

City State Zip Code  
MIDLOTHIAN VA 23112-8225

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

Name of Employer Occupation  
DUPONT ADVANCED FIBER SYS-TEMS Military Market Segment Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 568.00

Date of Receipt  
M M / D D / Y Y Y Y Y

**Transaction ID:** PR799630316771

Amount of Each Receipt this Period  
142.00

P/R Deduction (\$71.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>297.00</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:		PAGE 15 / 20	
	(check only one)			
<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)  
DuPont Good Government Fund

**A.** Full Name (Last, First, Middle Initial)  
Mr. WILLIAM STANHOUSE

Mailing Address 4202 COLUMBIA PARK ROAD

City State Zip Code  
POMFRET MD 20675-3237

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

Name of Employer DuPont Occupation Govt. Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y

**Transaction ID: PR937281216771**

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	3636.62

**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 16 / 20

<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. Friends of Roy Blunt</b>		Transaction ID: 12385438 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6	
Mailing Address PO Box 50100		Amount of Each Disbursement this Period 5000.00	
City Springfield	State MO	Zip Code 65805	Contribution
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Roy Blunt			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 7	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00



# 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 / 20

<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. W.A. Edmondson for Attorney General</b>		Transaction ID: 12336844 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 6
Mailing Address PO Box 18922		Amount of Each Disbursement this Period 1000.00
City Oklahoma City	State OK	
Zip Code 73154	Purpose of Disbursement W Edmondson, ATTORNEY GENERAL OK	
Candidate Name W A Edmondson		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	W Edmondson, ATTORNEY GENERAL OK
State: OK District:		

Full Name (Last, First, Middle Initial) <b>B. Tom Craddick Campaign</b>		Transaction ID: 12504710 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 3108 Stanolind Avenue		Amount of Each Disbursement this Period -2000.00
City Midland	State TX	
Zip Code 78705	Purpose of Disbursement Void - Tom Craddick Campaign	
Candidate Name Tom Craddick		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Void - Tom Craddick Campaign
State: TX District: 82		

Full Name (Last, First, Middle Initial) <b>C. Committee To Elect Mike Hall</b>		Transaction ID: 12373588 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 12 Stonegate Drive		Amount of Each Disbursement this Period 500.00
City Hurricane	State WV	
Zip Code 25526	Purpose of Disbursement MIKE HALL, STATE HOUSE 14th WV	
Candidate Name MIKE HALL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MIKE HALL, STATE HOUSE 14th WV
State: WV District: 14		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 / 20

<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Kim Holmes</b>		<b>Transaction ID:</b> 12373435 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 411 E. 8th Street		Amount of Each Disbursement this Period 300.00
City Belle State WV Zip Code 25015	011 Category/ Type	
Purpose of Disbursement Kim Holmes, STATE HOUSE 30th WV		
Candidate Name Kim Holmes		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Kim Holmes, STATE HOUSE 30th WV

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Mike Stuart</b>		<b>Transaction ID:</b> 12373611 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 11 South Cove Lane		Amount of Each Disbursement this Period 300.00
City South Charleston State WV Zip Code 25309	011 Category/ Type	
Purpose of Disbursement Mike Stuart, STATE HOUSE 30th WV		
Candidate Name Mike Stuart		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 30	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Mike Stuart, STATE HOUSE 30th WV

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Troy Andes</b>		<b>Transaction ID:</b> 12373673 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 8 Meadow Ridge Drive		Amount of Each Disbursement this Period 300.00
City Hurricane State WV Zip Code 25526	011 Category/ Type	
Purpose of Disbursement Troy Andes, STATE HOUSE 14th WV		
Candidate Name Troy Andes		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 14	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Troy Andes, STATE HOUSE 14th WV

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.00
<b>TOTAL</b> 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 19 / 20

<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)  
DuPont Good Government Fund

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Lynwood Woody Ireland</b>		<b>Transaction ID:</b> 12373853 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address RR 1 Box 29		Amount of Each Disbursement this Period 300.00
City Pullman State WV Zip Code 26421	Lynwood Ireland, STATE HO-USE 7th WV	
Purpose of Disbursement Lynwood Ireland, STATE HOUSE 7th WV		011 Category/Type
Candidate Name Lynwood Woody Ireland		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 7		

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Edd Nye</b>		<b>Transaction ID:</b> 12385442 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address 209 Ben Street		Amount of Each Disbursement this Period 500.00
City Elizabethtown State NC Zip Code 28337	Edd Nye, STATE HOUSE 22nd NC	
Purpose of Disbursement Edd Nye, STATE HOUSE 22nd NC		011 Category/Type
Candidate Name Edd Nye		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 22		

Full Name (Last, First, Middle Initial) <b>C. Committee to Elect Dave Higgins</b>		<b>Transaction ID:</b> 12385441 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 6
Mailing Address 18 Norwood Road		Amount of Each Disbursement this Period 500.00
City Charleston State WV Zip Code 25314	Dave Higgins, STATE SENATE WV	
Purpose of Disbursement Dave Higgins, STATE SENATE WV		011 Category/Type
Candidate Name Dave Higgins		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1300.00
<b>TOTAL</b> 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 20 / 20

<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)  
DuPont Good Government Fund

**A.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Senator Tony Rand

Mailing Address 2014 Litho Place

City Fayetteville State NC Zip Code 28304

Purpose of Disbursement  
Anthony Rand, STATE SENATE NC

Candidate Name  
Anthony Rand

Office Sought:  House  
 Senate  
 President

State: NC District: 19

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

Transaction ID: 12412087

Date of Disbursement

<sup>M</sup> 0	<sup>M</sup> 4	/	<sup>D</sup> 2	<sup>D</sup> 1	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 6
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Amount of Each Disbursement this Period

500.00
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011
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Category/  
Type

Anthony Rand, STATE SENATE  
NC

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

500.00
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**TOTAL** This Period (last page this line number only) .....

2200.00
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