

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 09 01 2006 through 09 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 Christopher J. Ward

Signature of Treasurer Electronically Filed by Christopher J. Ward Date 01 21 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
GOOD FUND, THE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

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		36743.23
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	48524.39									
(c) Total Receipts (from Line 19)	10500.00	160005.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	59024.39	196748.68								
7. Total Disbursements (from Line 31)	15119.00	152843.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43905.39	43905.39								
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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

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	500.00	21750.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	500.00	21750.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	10000.00	138255.45
(c) Other Political Committees (such as PACs)	10500.00	160005.45
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
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))	10500.00	160005.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10500.00	160005.45

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.....	5119.00	94093.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5119.00	94093.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	57500.00
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.....	0.00	1250.00
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))..	15119.00	152843.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15119.00	152843.29

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	10500.00	160005.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10500.00	160005.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5119.00	94093.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5119.00	94093.29

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 13
(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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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)
Steven K. Berry

Mailing Address 3604 Annandale Rd

City State Zip Code
Annandale VA 22003

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

Name of Employer Cellular Telecom Occupation Sr VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2006

Transaction ID: SA11AI.4645

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00

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

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

FOR LINE NUMBER: PAGE 7 / 13
(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)
DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION
 Mailing Address 1111 19TH STREET NW SUITE 1100
 City State Zip Code
 WASHINGTON DC 20036
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 25 / 2006
Transaction ID: SA11C.4641
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C** C00235309
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE
 Mailing Address 1101 Pennsylvania Avenue NW Suite 200
 City State Zip Code
 Washington DC 20004
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 29 / 2006
Transaction ID: SA11C.4644
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C** C00034405
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)
 Mailing Address 655 15th Street NW Suite 445
 City State Zip Code
 Washington DC 20005
 Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 29 / 2006
Transaction ID: SA11C.4643
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C** C00236489
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5000.00
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 8 / 13	
	(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)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address Three Commercial Place

City State Zip Code
Norfolk VA 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 ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2006

Transaction ID: SA11C.4642

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5000.00
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 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)
Design Marketing

Mailing Address 3636 Aerial Way Dr

City State Zip Code
Roanoke VA 24018

Purpose of Disbursement
Generic Printing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB21B.4638
Date of Disbursement

MM / DD / YYYY
09 / 27 / 2006

Amount of Each Disbursement this Period

4619.00

B.

Full Name (Last, First, Middle Initial)
Political Compliance Services

Mailing Address PO Box 373

City State Zip Code
Fairfax Station VA 22039

Purpose of Disbursement
Accounting & Compliance Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB21B.4639
Date of Disbursement

MM / DD / YYYY
09 / 29 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

5119.00

TOTAL This Period (last page this line number only)

5119.00

**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 10 / 13

<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) CUBIN FOR CONGRESS INC	Transaction ID: SB23.4653 Date of Disbursement
	Mailing Address POST OFFICE BOX 4657	<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2006"/>
	City CASPER State WY Zip Code 82604	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF FRANK WOLF	Transaction ID: SB23.5065 Date of Disbursement
	Mailing Address P.O. Box 710235	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
	City Oak Hill State VA Zip Code 20171	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GOODE FOR CONGRESS	Transaction ID: SB23.4659 Date of Disbursement
	Mailing Address 235 South Main Street	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
	City Rocky Mount State VA Zip Code 24151	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" 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)

PAGE 11 / 13

<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) HEATHER WILSON FOR CONGRESS Mailing Address P.O. BOX 14070 City ALBUQUERQUE State NM Zip Code 87191 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4652 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00

B. Full Name (Last, First, Middle Initial) MUSGRAVE FOR CONGRESS Mailing Address 118 West Charlotte Street City Johnstown State CO Zip Code 80534 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4650 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
	Amount of Each Disbursement this Period 1000.00

C. Full Name (Last, First, Middle Initial) NORTHUP FOR CONGRESS Mailing Address PO Box 7313 City Louisville State KY Zip Code 40257 Purpose of Disbursement Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4647 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
	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) ▶	(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 13 / 13

<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)
THELMA DRAKE FOR CONGRESS

Transaction ID: SB23.4658

Date of Disbursement

Mailing Address P.O. Box 61480

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	0	6

City Virginia Beach State VA Zip Code 23466

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: VA District: 02

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

10000.00
