

# 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  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fun-

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 02 01 2008 through 02 29 2008

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 Christine Held

Signature of Treasurer Electronically Filed by Christine Held Date 03 13 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**

Write or Type Committee Name

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		44536.89
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	54101.31									
(c) Total Receipts (from Line 19) .....	13448.29	27162.71								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	67549.60	71699.60								
7. Total Disbursements (from Line 31) .....	14250.00	18400.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	53299.60	53299.60								
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

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

Report Covering the Period: From:    To:

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	4214.31	7272.62
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	9231.57	19885.41
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13445.88	27158.03
(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) .....	13445.88	27158.03
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.) .....	2.41	4.68
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)) .....	13448.29	27162.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13448.29	27162.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	150.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	150.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	16000.00
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.....	1750.00	2250.00
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))..	14250.00	18400.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14250.00	18400.00

**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 .....	13445.88	27158.03
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13445.88	27158.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	150.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL SANCHEZ

Mailing Address 3980 NORTH MAJOR DRIVE  
SUITE 610

City State Zip Code  
BEAUMONT TX 77713-3695

FEC ID number of contributing federal political committee. C

Name of Employer DuPont Company      Occupation Plant Manager

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

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

**Transaction ID:** PR1112910020191

Amount of Each Receipt this Period 208.33

P/R Deduction (\$104.16 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
LINDA FISHER

Mailing Address 3225 IDAHO AVE NW

City State Zip Code  
WASHINGTON DC 20016-0000

FEC ID number of contributing federal political committee. C

Name of Employer DuPont Company      Occupation VP & Chief Sustainability Officer

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

**Transaction ID:** PR1113151620191

Amount of Each Receipt this Period 300.00

P/R Deduction (\$300.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
THOMAS SAGER

Mailing Address 3903 HEATHER DRIVE

City State Zip Code  
WILMINGTON DE 19807-2117

FEC ID number of contributing federal political committee. C

Name of Employer Dupont Company      Occupation VP & Assistant General Counsel

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.66

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

**Transaction ID:** PR366876620191

Amount of Each Receipt this Period 208.33

P/R Deduction (\$208.33 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... 716.66

**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 / 16
	<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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN SHANNON	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1109 KELLY DR	<b>Transaction ID:</b> PR366903720191
	City NEWARK State DE Zip Code 19711-0000	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$208.33 Monthly)
Name of Employer DUPONT COMPANY Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.66	

<b>B.</b>	Full Name (Last, First, Middle Initial) LINDA BANKSTON	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2 CAITLYN CT	<b>Transaction ID:</b> PR366903920191
	City AVONDALE State PA Zip Code 19311-9737	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$150.00 Monthly)
Name of Employer DUPONT COMPANY Occupation MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CARL LUKACH	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address P O BOX 223	<b>Transaction ID:</b> PR366908220191
	City ROCKLAND State DE Zip Code 19732-0000	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$300.00 Monthly)
Name of Employer DUPONT COMPANY Occupation FINANCIAL MANAGER		
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>658.33</b>
<b>TOTAL</b> 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 8 / 16
	<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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) ELLEN KULLMAN	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1116 BERKELEY ROAD	<b>Transaction ID:</b> PR366910220191
	City State Zip Code WILMINGTON DE 19807-0000	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 300.00	P/R Deduction (\$150.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) WILLIE MARTIN	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 19 SPRINGBROOK LN	<b>Transaction ID:</b> PR366917420191
	City State Zip Code NEWARK DE 19711-2497	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation DUPONT COMPANY VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	P/R Deduction (\$125.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) W DON JOHNSON	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address DUPONT JAPAN PO BOX 11570	<b>Transaction ID:</b> PR366920020191
	City State Zip Code WILMINGTON DE 19850-0000	Amount of Each Receipt this Period 139.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 278.00	P/R Deduction (\$139.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>414.00</b>
<b>TOTAL</b> 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 9 / 16
	<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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) R CLIFTON WEBB	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 6870 FRASE DR	<b>Transaction ID:</b> PR366921920191
	City State Zip Code FALLS CHURCH VA 22043-0000	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$75.00 Bi-Weekly)
Name of Employer DUPONT COMPANY	Occupation WASHINGTON REP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) THOMAS CONNELLY	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 201 CHANDLER LANE	<b>Transaction ID:</b> PR366929720191
	City State Zip Code GREENVILLE DE 19807-1109	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$416.66 Monthly)
Name of Employer DUPONT COMPANY	Occupation DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	

<b>C.</b>	Full Name (Last, First, Middle Initial) MATTHEW KOENINGS	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 379 CASPARUS WAY	<b>Transaction ID:</b> PR366937420191
	City State Zip Code ELKTON MD 21921-7564	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$150.00 Monthly)
Name of Employer DUPONT	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>716.66</b>
<b>TOTAL</b> 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 10 / 16
	<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)  
E.I. du Pont de Nemours Company Good Government Fund (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	State	Zip Code
	ROCKLAND	DE	19732-0000
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer DUPONT COMPANY		Occupation CEO	<b>Transaction ID:</b> PR366941520191
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 800.00	Amount of Each Receipt this Period <input type="text"/> 400.00
			P/R Deduction (\$400.00 Monthly)

<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	State	Zip Code
	CHADDS FORD	PA	19317-0659
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer DUPONT COMPANY		Occupation DIRECTOR	<b>Transaction ID:</b> PR366942120191
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00	Amount of Each Receipt this Period <input type="text"/> 300.00
			P/R Deduction (\$300.00 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. MARTHA REES		Date of Receipt
	Mailing Address 111 CARRIAGE WAY		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	WILMINGTON	DE	19803-3354
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer DUPONT COMPANY		Occupation SENIOR COUNSEL	<b>Transaction ID:</b> PR366942720191
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	Amount of Each Receipt this Period <input type="text"/> 150.00
			P/R Deduction (\$150.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>850.00</b>
<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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 16  
(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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

**A.**

Full Name (Last, First, Middle Initial)  
JAMES BOREL

Mailing Address 1012 WYLIE RD

City WEST CHESTER State PA Zip Code 19382-8130

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

Name of Employer DUPONT COMPANY Occupation Vice President/General Manager

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

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

**Transaction ID:** PR366956820191

Amount of Each Receipt this Period: 416.66

P/R Deduction (\$416.66 Monthly)

**B.**

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

Mailing Address 1203 WILLIAM ST

City FREDERICKSBURG State VA Zip Code 22401-5429

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

Name of Employer DUPONT ADVANCED FIBER SYSTEMS Occupation Military Market Segment Leader

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 284.00

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

**Transaction ID:** PR799630320191

Amount of Each Receipt this Period: 142.00

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

**C.**

Full Name (Last, First, Middle Initial)  
UMA CHOWDHRY

Mailing Address 104 REDWOOD LN

City KENNETT SQUARE State PA Zip Code 19348-2731

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

Name of Employer Dupont Occupation Vice President - CR&D

Receipt For:  
 Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

**Transaction ID:** PR949577720191

Amount of Each Receipt this Period: 300.00

P/R Deduction (\$300.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>858.66</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4214.31</b>

**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 12 / 16

<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)

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) John Spratt for Congress</p> <p>Mailing Address P.O. Box 10986</p> <p>City Rock Hill State SC Zip Code 29731</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John McKee Spratt, Jr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 15009323</p> <p>Date of Disbursement 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>Contribution</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Jim Oberstar</p> <p>Mailing Address 1017 8th Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JIM OBERSTAR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 15088523</p> <p>Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Carper for Senate</p> <p>Mailing Address 19 East Commons Blvd Second Floor</p> <p>City New Castle State DE Zip Code 19720</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Thomas Carper</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 15088521</p> <p>Date of Disbursement 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>

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

5000.00

**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)

<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)

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<b>A.</b> Full Name (Last, First, Middle Initial) Texans for Senator John Cornyn <hr/> Mailing Address 6850 Austin Center Blvd. Suite 180 <hr/> City Austin State TX Zip Code 78731 <hr/> Purpose of Disbursement Contribution Candidate Name Mr. John Cornyn <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15088522 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) DeMint For Senate Committee, Inc. <hr/> Mailing Address P.O. Box 12425 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. James DeMint <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15088524 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Poe For Congress <hr/> Mailing Address P.O. Box 14222 <hr/> City Humble State TX Zip Code 77347 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Ted Poe <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15089070 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Contribution

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

4500.00

**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)

<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)  
E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

A.	Full Name (Last, First, Middle Initial) Conaway For Congress	Transaction ID: 15088647 Date of Disbursement
	Mailing Address PO Box 51272	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Midland State TX Zip Code 79710	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Rep. Michael Conaway	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Contribution
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Oberweis For Congress	Transaction ID: 15088547 Date of Disbursement
	Mailing Address 335 N River Road Ste 203	<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City Batavia State IL Zip Code 60510	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name James Oberweis	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Contribution
	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2008	

SUBTOTAL of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only) .....	<input type="text" value="12500.00"/>

# 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)

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

<b>A.</b>	Full Name (Last, First, Middle Initial) Texans For Tommy Williams  Mailing Address P O Box 8069  City The Woodlands State TX Zip Code 77387  Purpose of Disbursement Thomas Williams, STATE SENATE 4th TX Candidate Name TX Rep. Thomas Williams Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District:	Transaction ID: 15009322 Date of Disbursement 02 / 12 / 2008  Amount of Each Disbursement this Period 1000.00  Thomas Williams, STATE SENATE 4th TX	011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Re-Election of Justice Spike Maynard  Mailing Address PO Box 1743  City Charleston State WV Zip Code 25661  Purpose of Disbursement Void - Check Written 10/22/2007 Candidate Name SPIKE MAYNARD Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 15089072 Date of Disbursement 02 / 29 / 2008  Amount of Each Disbursement this Period -1000.00  Void - Check Written 10/2-2/2007	011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Texans for Greg Abbott  Mailing Address P O Box 308  City Austin State TX Zip Code 78767  Purpose of Disbursement Greg Abbott, ATTORNEY GENERAL TX Candidate Name Greg Abbott Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 15089071 Date of Disbursement 02 / 29 / 2008  Amount of Each Disbursement this Period 1000.00  Greg Abbott, ATTORNEY GENERAL TX	011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<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 16 / 16

<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)

E.I. du Pont de Nemours Company Good Government Fund (Dupont Good Government Fund)

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect Steve Reinhard

Mailing Address 3904 State Route 19

City Bucyrus State OH Zip Code 44820

Purpose of Disbursement  
Steven Reinhard, STATE HOUSE 82 OH

Candidate Name  
OH Rep. Steven Reinhard

Office Sought:  House  
 Senate  
 President

State: OH District: 82

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 15088845

Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

750.00

Steven Reinhard, STATE HOUSE 82 OH

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

750.00

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

1750.00