

RECEIVED
FEC MAIL ROOM

2000 JUL 17 P 1:15

July 10, 2000

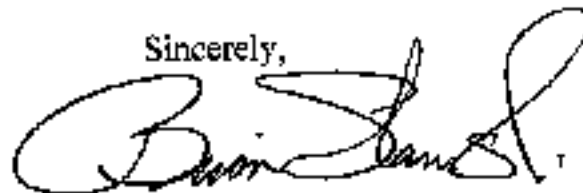
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

To Whom It May Concern:

Enclosed is the DuPont Good Government Fund's filing of
FEC Form 3X for the period April 1, 2000 through June 30, 2000.

Sincerely,



Brian J. Slominski
Custodian of Records

Enclosure

cc: Office of the Secretary of State
P.O. Box 898
Dover, DE 19903

State Board of Elections
Swan Street Building, Core 1
6 Empire State Plaza, Suite 201
Albany, NY 12223-0002

State Election Commission
P.O. Box 5987
Columbia, SC 29250

cc: Report Less Schedule A

Iowa Ethics & Campaign Disclosure Board
514 East Locust Street, Suite 104
Des Moines, IA 50309

Campaign Reporting Office
State Board of Elections
PO Box 2169
Raleigh, NC 27602-2169

Texas Ethics Commission
P.O. Box 12070
Capitol Station
Austin, TX 78711-2070

Bureau of Commissions, Elections and Legislation
304 North Office Building
Harrisburg, PA 17120-0029

Elections Division
P.O. Box 5616
Montgomery, AL 36103-5616

Elections Bureau
Office of the Secretary of State
P.O. Box 20126
Lansing, MI 48901-0726

Political Reform Division
Office of the Secretary of State
1500 11th Street, Room 495
Sacramento, CA 95814

Elections Division
Campaign Finance Unit
Office of the Secretary of State
30 Trinity Street
Hartford, CT 06106

Elections Division
Office of the Secretary of State
180 East Broad Street, 15th Floor
Columbus, OH 43215

State Board of Elections
P.O. Box 6486
Annapolis, MD 21401-0486

State Board of Elections
200 North Ninth Street, Suite 101
Richmond, VA 23219-3497

Elections Division
Office of the Secretary of State
180 State Office Building
100 Constitution Avenue
St. Paul, MN 55155-1299

Indiana Elections Division
Office of the Secretary of State
302 W. Washington Street, Room E-204
Indianapolis, IN 46204-2767

Wisconsin Elections Board
P.O. Box 2973
Madison, WI 53701-2973

Missouri Ethics Commission
P.O. Box 1254
Jefferson City, MO 65102

Division of Elections
Office of the Secretary of State
The Capitol, Room 1801
Tallahassee, FL 32399-0250

Office of the Secretary of State
Building 1, Room 157-K
1900 Kanawha Boulevard East
Charleston, WV 25305-0770

Office of the Secretary of State
P.O. Box 136
Jackson, MS 39205-0136

Office of Campaign Finance
2000 14th Street, N.W., Suite 420
Washington, D.C. 20510

Ethics Commission
2300 North Lincoln Boulevard, Room B-5
Oklahoma City, OK 73105-4812

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 JUL 17 P 1:15

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) DuPont Good Government Fund		2. FEC IDENTIFICATION NUMBER C00171928
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported DuPont Company, P.O. Box 80268		
CITY, STATE and ZIP CODE Wilmington, DE 19880-0268		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)


4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____ in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period <u>04/01/00</u> through <u>06/30/00</u>		This Period	Calendar Year-to-Date
6.	(a) Cash on Hand January 1, <u>2000</u>		\$ <u>37,460.12</u>
	(b) Cash on Hand at Beginning of Reporting Period	\$ <u>40,776.83</u>	
	(c) Total Receipts (from Line 19)	\$ <u>38,367.70</u>	\$ <u>66,303.41</u>
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>79,144.53</u>	\$ <u>103,783.53</u>
7.	Total Disbursements (from Line 20)	\$ <u>30,760.00</u>	\$ <u>55,399.00</u>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>48,364.53</u>	\$ <u>48,364.53</u>
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0.00</u>	For further information contact Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <u>0.00</u>	

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
John Korenko

Signature of Treasurer  Date 7/10/00

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE DuPont Good Government Fund		REPORT COVERING PERIOD		
		FROM	TO	
		04/01/00	06/30/00	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	13,181.00	21,523.00	11(a)(1)
ii.	Unitemized	24,714.50	44,025.00	11(a)(2)
iii.	Total (add i and ii) >	37,895.50	65,548.00	11(a)(3)
b.	Political Party Committees	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	11(c)
d.	Total Contributions (add a iii, b and c) >	37,895.50	65,548.00	11(d)
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13.	All Loans Received	0.00	0.00	13
14.	Loan Repayments Received	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	472.20	755.41	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	38,367.70	66,303.41	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	38,367.70	66,303.41	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	0.00	0.00	21(a)(1)
ii.	Non-Federal Share	0.00	519.00	21(a)(2)
b.	Other Federal Operating Expenditures	0.00	519.00	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	0.00	0.00	21(c)
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	27,000.00	51,000.00	23
24.	Independent Expenditures (use Schedule E)	0.00	0.00	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26.	Loan Repayments Made	0.00	0.00	26
27.	Loans Made	0.00	0.00	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b.	Political Party Committees	0.00	0.00	28(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	28(c)
d.	Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29.	Other Disbursements	3,780.00	3,800.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	30,780.00	55,399.00	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	30,780.00	55,399.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	37,895.50	65,548.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	37,895.50	65,548.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	519.00	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	0.00	519.00	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **9**
FOR LINE NUMBER **1121**

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)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DAVID MILLER 108 PRESTON RIDGE COURT CARY, NC 27513	DUPONT COMPANY	04/03/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date: \$ 250.00	
DAVID GILLESPIE 17104 CHISHOLAR TRAIL ROCKVILLE, VA 23146-1860	DUPONT COMPANY	05/12/00	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: RESEARCH FELLOW	Aggregate Year-to-Date: \$ 350.00	
BRUCE KAISER 4010 VALLEY GREEN ROAD WILMINGTON, DE 19807	DUPONT COMPANY	05/12/00	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER	Aggregate Year-to-Date: \$ 250.00	
MURRAY BROCKMAN 3805 CHARLESTON CT GREENVILLE, NC 27834	DUPONT	05/24/00	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR	Aggregate Year-to-Date: \$ 600.00	
HUGH CAMPBELL JR 7 APPLETON ACRES CT ELKTON, MD 21921	DUPONT COMPANY	Payroll Deduction	165.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ENVIRONMENTAL MANAGER	Aggregate Year-to-Date: \$ 330.00	(\$55.00 Monthly)
BERNARD REILLY 103 MONTANA DRIVE CHADDS FORD, PA 19317	DUPONT COMPANY	Payroll Deduction	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CORPORATE COUNSEL	Aggregate Year-to-Date: \$ 300.00	(\$50.00 Monthly)
JOHN WINSKE 311 ENDLESS RD COLLINSVILLE, VA 24078	DUPONT COMPANY	Payroll Deduction	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: PLANT MANAGER	Aggregate Year-to-Date: \$ 300.00	(\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) **1,915.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 9
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code GEORGE MAC CORMACK 12 COSSART MANOR RD CHADDS FORD, PA 19317	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 180.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 380.00		
B. Full Name, Mailing Address and ZIP Code THOMAS SAGER 3 BREEZE HILL RD WILMINGTON, DE 19807	Name of Employer DUPONT COMPANY Occupation ASSOCIATE GENERAL COUNSEL	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
C. Full Name, Mailing Address and ZIP Code PAUL TEBB 744 ISAAC TAYLOR DR WEST CHESTER, PA 19382	Name of Employer DUPONT COMPANY Occupation VP	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
D. Full Name, Mailing Address and ZIP Code TIMOTHY MC CANN 440 OLDFIELD POINT RD ELKTON, MD 21921	Name of Employer DUPONT COMPANY Occupation PRODUCT MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code WILLIAM MCCABE 41 HARRIS CIRCLE NEWARK, DE 19711	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 285.00		
F. Full Name, Mailing Address and ZIP Code ROBERT PAONESSA 2806 CHASSE RIDGE DR ORANGE, TX 77632	Name of Employer DUPONT COMPANY Occupation OPERATIONS SUPT	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 155.00 (\$52.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 258.00		
G. Full Name, Mailing Address and ZIP Code KATHRYN STONE 113 ROCKLAND CIRCLE WILMINGTON, DE 19803	Name of Employer DUPONT Occupation MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional) 1,056.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 9
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code EDL WASSERMAN 1904 ACADEMY PLACE WILMINGTON, DE 19806 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation SCIENCE ADVISOR Aggregate Year-to-Date > \$ 580.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 90.00 (\$30.00 Monthly)
B. Full Name, Mailing Address and ZIP Code JOHN JESSUP 7 CARRSAGE PATH CHADDS FORD, PA 19317 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT Occupation VP Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 300.00 (\$100.00 Monthly)
C. Full Name, Mailing Address and ZIP Code ROBERT HEINE 4109 FT WORTH PL ALEXANDRIA, VA 22304 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation DIRECTOR Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00 (\$40.00 Monthly)
D. Full Name, Mailing Address and ZIP Code JANET WATERS 14 MEADOWBROOK RD NEW FAIRFIELD, CT 06812 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT Occupation MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
E. Full Name, Mailing Address and ZIP Code STACEY NOBLEY 141 DEER VALLEY LANE WILMINGTON, DE 19807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation SR VP Aggregate Year-to-Date > \$ 480.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 240.00 (\$80.00 Monthly)
F. Full Name, Mailing Address and ZIP Code GERALD EHRMAN 8591 HUNTLEIGH WAY GERMANTOWN, TN 38138 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation PLANT MANAGER Aggregate Year-to-Date > \$ 363.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 213.00 (\$71.00 Monthly)
G. Full Name, Mailing Address and ZIP Code ALAN WOLK 1 WARWICK CT GREENVILLE, DE 19807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT Occupation DIRECTOR Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional) 1,263.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 9
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code JOHN SHANNON III 10925 DOMINION FAIRWAYS LN GLEN ALLEN, VA 23060-5499	Name of Employer DUPONT COMPANY Occupation MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 160.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
B. Full Name, Mailing Address and ZIP Code FORREST CHUMLEY 800 HOPETON RD WILMINGTON, DE 19807	Name of Employer DUPONT COMPANY Occupation RESEARCH SUPERVISOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 135.00 (\$45.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 270.00		
C. Full Name, Mailing Address and ZIP Code JOHN MOONEY 8 HOOPES DRIVE LANDENBERG, PA 19360	Name of Employer DUPONT COMPANY Occupation PLANT MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 210.00 (\$70.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 420.00		
D. Full Name, Mailing Address and ZIP Code JOHN SNYDER 4 GUYENNE RD WILMINGTON, DE 19807	Name of Employer DUPONT COMPANY Occupation VP	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 450.00 (\$150.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
E. Full Name, Mailing Address and ZIP Code HUNTER FICKE 230 MERCER MILL RD LANDENBERG, PA 19350	Name of Employer DUPONT COMPANY Occupation TECHNICAL MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 201.00 (\$67.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 308.00		
F. Full Name, Mailing Address and ZIP Code CARL LUKACH 106 CHALFONTE LANE KENNETT SQUARE, PA 19348	Name of Employer DUPONT COMPANY Occupation FINANCIAL MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code KATHLEEN FORTE 901 HOPETON RD WILMINGTON, DE 19807	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 105.00 (\$35.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		

SUBTOTAL of Receipts This Page (optional) 1,401.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 9
FOR LINE NUMBER 1121

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NAME OF COMMITTEE (in Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN HIMES 24 MCMULLAN FARM LANE WEST CHESTER, PA 19382 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT COMPANY Occupation: VP	Payroll Deduction	180.00 (\$60.00 Monthly)
Aggregate Year-to-Date > \$ 360.00			
MICHAEL DOYLE 1202 CARPENTER LANE WEST CHESTER, PA 19382 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT Occupation: DIRECTOR	Payroll Deduction	213.00 (\$71.00 Monthly)
Aggregate Year-to-Date > \$ 355.00			
JAMES COLLINS JR 1201 CROWN PT. DR HURRICANE, WV 25528 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT COMPANY Occupation: PROJECT MANAGER	Payroll Deduction	120.00 (\$40.00 Monthly)
Aggregate Year-to-Date > \$ 240.00			
ROBERT RIDOUT 129 EDGEWOOD ROAD WILMINGTON, DE 19803 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT COMPANY Occupation: DIRECTOR	Payroll Deduction	120.00 (\$40.00 Monthly)
Aggregate Year-to-Date > \$ 240.00			
GARY PFEIFFER 4 SHADOW LANE CHADDS FORD, PA 19317 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT Occupation: CFO	Payroll Deduction	150.00 (\$50.00 Monthly)
Aggregate Year-to-Date > \$ 300.00			
WILLIE MARTIN 19 SPRINGBROOK LANE NEWARK, DE 19711 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT Occupation: VP	Payroll Deduction	375.00 (\$125.00 Monthly)
Aggregate Year-to-Date > \$ 375.00			
THOMAS HUMPHREY 3 BITTERSWEET DR WEST CHESTER, PA 19382 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	DUPONT COMPANY Occupation: DIRECTOR	Payroll Deduction	105.00 (\$35.00 Monthly)
Aggregate Year-to-Date > \$ 210.00			

SUBTOTAL of Receipts This Page (optional) 1,263.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 9
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code W. DONALD JOHNSON 8 COSSART MANOR RD CHADDS FORD, PA 19317	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 369.00 (\$123.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 492.00	
B. Full Name, Mailing Address and ZIP Code JOHN HAGLE 616 LEVENHALL DR FAYETTEVILLE, NC 28314	Name of Employer DUPONT COMPANY Occupation SITE SUPPORT SUPT	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 240.00	
C. Full Name, Mailing Address and ZIP Code STEPHEN BRUBAKER 4 ESSEX DRIVE BEAR, DE 19701	Name of Employer DUPONT Occupation SR. CONSULTANT	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 129.00 (\$43.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 204.00	
D. Full Name, Mailing Address and ZIP Code JEFFREY KEEFER 1327 FIELDPOINT DR WEST CHESTER, PA 19382	Name of Employer DUPONT Occupation VPGM	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 300.00 (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 400.00	
E. Full Name, Mailing Address and ZIP Code A. VICTOR BELL 19 WITHERS WAY HOCKESSIN, DE 19707	Name of Employer DUPONT Occupation MANAGER	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 132.00 (\$44.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 220.00	
F. Full Name, Mailing Address and ZIP Code THOMAS CONNELLY 313 CLOVELLY ROAD RICHMOND, VA 23221	Name of Employer DUPONT Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 360.00 (\$120.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 720.00	
G. Full Name, Mailing Address and ZIP Code DAVID REA 119 ROCKLAND CIRCLE WILMINGTON, DE 19803	Name of Employer DUPONT COMPANY Occupation VP	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	

SUBTOTAL of Receipts This Page (optional) 1,590.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 9
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code WILLIAM KIRK BOX 779 UNIONVILLE, PA 19375	Name of Employer DUPONT COMPANY Occupation VP/GRM	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 300.00 (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 600.00	
B. Full Name, Mailing Address and ZIP Code RANDOLPH GUSCHL 701 BEVERSREDE KENNETT SQUARE, PA 19348	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 105.00 (\$35.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 210.00	
C. Full Name, Mailing Address and ZIP Code SAM SEVERANCE 2 ARDMOOR LANE CHADDS FORD, PA 19317	Name of Employer DUPONT Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 240.00 (\$80.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 400.00	
D. Full Name, Mailing Address and ZIP Code CHARLES HOLLIDAY PO BOX 2888 WILMINGTON, DE 19805	Name of Employer DUPONT COMPANY Occupation CEO	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 1,200.00 (\$400.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,400.00	
E. Full Name, Mailing Address and ZIP Code JOHN BROYLES 1100 COVERING AVE - 1600 WILMINGTON, DE 19806	Name of Employer DUPONT Occupation VP	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 160.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code JAMES PORTER JR PO BOX 1127 CHADDS FORD, PA 19317	Name of Employer DUPONT COMPANY Occupation DIRECTOR	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 130.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 220.00	
G. Full Name, Mailing Address and ZIP Code MARTHA REES 111 CARRIAGE WAY WILMINGTON, DE 19803	Name of Employer DUPONT COMPANY Occupation SENIOR COUNSEL	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 160.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

2,275.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code JAMES CLARK 1085 GALWAY BEAUMONT, TX 77708	Name of Employer DUPONT COMPANY	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation SR CONSULTANT	Payroll Deduction 	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		(\$40.00 Monthly)
B. Full Name, Mailing Address and ZIP Code TOM GILL JR MARKET STREET WILMINGTON, DE 19808	Name of Employer DUPONT	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation VPGM	Payroll Deduction 	240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 480.00		(\$80.00 Monthly)
C. Full Name, Mailing Address and ZIP Code WILLIAM HARRISON JR BOX 3597 GREENVILLE, DE 19807	Name of Employer DUPONT COMPANY	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation V.P. OPERATIONS	Payroll Deduction 	450.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 900.00		(\$150.00 Monthly)
D. Full Name, Mailing Address and ZIP Code BRENDA WILSON 6330 BENTWATER ORANGE, TX 77632	Name of Employer DUPONT COMPANY	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation OPERATIONS MANAGER	Payroll Deduction 	141.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 291.00		(\$47.00 Monthly)
E. Full Name, Mailing Address and ZIP Code JAMES SINEX II 1100 BLACKSHIRE ROAD WILMINGTON, DE 19805	Name of Employer DUPONT	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction 	166.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 285.00		(\$55.00 Monthly)
F. Full Name, Mailing Address and ZIP Code DENNIS BROUGHTON 712 CHAMPIONS ROW VICTORIA, TX 77904	Name of Employer DUPONT	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction 	180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		(\$0.00 Monthly)
G. Full Name, Mailing Address and ZIP Code ERIC MELIN 102 GIDEON DRIVE KENNETT SQUARE, PA 19348	Name of Employer DUPONT COMPANY	Date (month, day, year) 	Amount of Each Receipt this Period
	Occupation MANAGER	Payroll Deduction 	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		(\$50.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

1,448.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 9
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code FRED DEGIORGIO 13136 WILIFF DRIVE LAKEWOOD, CO 80228 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT Occupation MANAGER Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 120.00 (\$40.00 Monthly)
B. Full Name, Mailing Address and ZIP Code JEFFREY COE 28 GOLFVIEW DRIVE NEWARK, DE 19702 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT Occupation VPGM Aggregate Year-to-Date > \$ 604.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 252.00 (\$84.00 Monthly)
C. Full Name, Mailing Address and ZIP Code NANCIE JOHNSON 45 ROCKFORD ROAD WILMINGTON, DE 19806 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation VP Aggregate Year-to-Date > \$ 600.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 300.00 (\$100.00 Monthly)
D. Full Name, Mailing Address and ZIP Code JACK BAILEY 100 D CONGRESSIONAL DRIVE GREENVILLE, DE 19807 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation MANAGER Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
E. Full Name, Mailing Address and ZIP Code RICHARD WILDER 1685 WATERGLENN DRIVE WEST CHESTER, PA 19382 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer DUPONT COMPANY Occupation CHIEF MEDICAL OFFICER Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$50.00 Monthly)
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation ----- Aggregate Year-to-Date > \$	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation ----- Aggregate Year-to-Date > \$	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	972.00
TOTAL This Period (last page into line number only)	13,181.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILMINGTON TRUST RODNEY SQUARE NORTH WILMINGTON, DE 19890		04/01/00	100.06
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): INTEREST INCOME	Occupation	Aggregate Year-to-Date \$ 214.50	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILMINGTON TRUST RODNEY SQUARE NORTH WILMINGTON, DE 19890		04/30/00	129.58
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): INTEREST INCOME	Occupation	Aggregate Year-to-Date \$ 298.33	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILMINGTON TRUST RODNEY SQUARE NORTH WILMINGTON, DE 19890		05/31/00	110.60
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): INTEREST INCOME	Occupation	Aggregate Year-to-Date \$ 408.93	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILMINGTON TRUST RODNEY SQUARE NORTH WILMINGTON, DE 19890		06/30/00	131.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): INTEREST INCOME	Occupation	Aggregate Year-to-Date \$ 346.48	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional) 472.20

TOTAL This Period (last page this line number only) 472.20

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DICK ARNEY CAMPAIGN P.O. BOX 85 LEWISVILLE, TX 75067	Dick Arney, U.S. HOUSE 26th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	1,000.00
COMBEST CONGRESSIONAL COMMITTEE 3305 66TH STREET SUITE 1 LUBBOCK, TX 79413	Larry Combest, U.S. HOUSE 19th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	1,000.00
LLOYD DUGGETT FOR CONGRESS PO BOX 5843 AUSTIN, TX 78763	LLOYD DUGGETT, U.S. HOUSE 10th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
PEOPLE FOR GANSKE 521 EAST LOCUST STREET DES MOINES, IA 50309	Greg Ganske, U.S. HOUSE 4th IA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
GEHARDT FOR CONGRESS 7435 WATSON RD SUITE 107 ST LOUIS, MO 63119	RICHARD GEHARDT, U.S. HOUSE 3rd MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	3,000.00
CITIZENS FOR GILMAN P.O. BOX 3001 MIDDLETOWN, NY 10940	BEN GILMAN, U.S. HOUSE 20th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	1,000.00
HILLARD FOR CONGRESS CAMPAIGN PO BOX 11705 BIRMINGHAM, AL 35202-1705	Earl F. Hillard, U.S. HOUSE 7th AL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
RUBEN HINOJOSA FOR CONGRESS 4415 N MCALL ROAD MCALLEN, TX 78504	RUBEN HINOJOSA, U.S. HOUSE 15th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
JOHNSON FOR CONGRESS P.O. BOX 1986 NEWBRITAIN, CT 06060-1986	Nancy L. Johnson, U.S. HOUSE 6th CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	9,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **2** OF **5**
FOR LINE NUMBER **23**

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NAME OF COMMITTEE (in Full)
DuPart Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MIKE MCINTYRE FOR CONGRESS P.O. BOX 1 LUMBERTON, NC 28359	MIKE MCINTYRE, U.S. HOUSE 7th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
MORAN FOR CONGRESS 1225 19TH ST., N.W. FIFTH FLOOR WASHINGTON, DC 20036	JIM MORAN, U.S. HOUSE 8th VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
FRIENDS OF CONNIE MORELLA FOR CONGRESS 7101 WISCONSIN AVE SUITE 102 BETHESDA, MD 20814	CONNIE MORELLA, U.S. HOUSE 8th MD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
SUE MYRICK FOR CONGRESS PO BOX 37091 CHARLOTTE, NC 28237	SUE MYRICK, U.S. HOUSE 9th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
NOSSLE FOR CONGRESS COMMITTEE P.O. BOX 324 MANCHESTER, IA 52057	JIM NOSSLE, U.S. HOUSE 2nd IA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/28/00	500.00
FRIENDS OF JIM OBERSTAR PO BOX 465 DULUTH, MN 55802	JIM OBERSTAR, U.S. HOUSE 8th MN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
CITIZENS FOR TOM PETRI P.O. BOX 270 FOND DU LAC, WI 54936	Tom Petri, U.S. HOUSE 6th WI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
POMBO FOR CONGRESS 7527 WEST LINNE ROAD TRACY, CA 95376	Richard W. Pombo, U.S. HOUSE 11th CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
THOMAS C. SAWYER CAMPAIGN 1655 W. MARKET ST. SUITE J AKRON, OH 44313	TOM SAWYER, U.S. HOUSE 14th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	600.00

SUBTOTAL of Disbursements This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF CLAY SHAW PO BOX 2188 FT LAUDERDALE, FL 33303	E. Clay Shaw, U.S. HOUSE 22nd FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
FRIENDS OF DON SHERWOOD 81 WARRING STREET TUNKHANNOCK, PA 18667	DONALD SHERWOOD, U.S. HOUSE 10th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
SHUSTER FOR CONGRESS COMMITTEE PO BOX 329 ALTOONA, PA 16603	Bob Shuster, U.S. HOUSE 9th PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
CHARLIE STENHOLM FOR CONGRESS P.O. BOX 1032 STAMFORD, TX 79553	Charles W. Stenholm, U.S. HOUSE 17th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/01/00	500.00
FRIENDS OF BENNIE THOMPSON P.O. BOX 100 BOLTON, MS 39041	BENNIE THOMPSON, U.S. HOUSE 2nd MS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
COMMITTEE TO RE-ELECT ED TOWNS 400 FAIRCHILD BUILDING 499 SOUTH CAPITAL ST, SW SUITE 603 WASHINGTON, DC 20003	Edolpho Towns, U.S. HOUSE 10th NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
WATTS FOR CONGRESS PO BOX 720445 NORMAN, OK 73070	J.C. Watts, U.S. HOUSE 4th OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
FRIENDS OF FRANK WOLF PO BOX 6596 MCLEAN, VA 22102	FRANK WOLF, U.S. HOUSE 10th VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	500.00
ABRAHAM SENATE 2000 26555 EVERGREEN RD, #1220 SOUTHFIELD, MI 48076	SPENCER ABRAHAM, U.S. SENATE MI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00

SUBTOTAL of Disbursements This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	(blank)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ASHCROFT 2000 2326 MILLPARK DRIVE ST. LOUIS, MO 63043	JOHN ASHCROFT, U.S. SENATE MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
B. Full Name, Mailing Address and ZIP Code CASTLE CAMPAIGN FUND PO BOX 133 WILMINGTON, DE 19899	MIKE CASTLE, U.S. HOUSE AL DE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
C. Full Name, Mailing Address and ZIP Code TRENT LOTT FOR MISSISSIPPI PO BOX 22824 JACKSON, MS 39225	TRENT LOTT, U.S. SENATE MS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
D. Full Name, Mailing Address and ZIP Code FRIENDS OF LOGAR 1100 WEST 42ND STREET SUITE 335 INDIANAPOLIS, IN 46208	RICHARD LOGAR, U.S. SENATE IN Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
E. Full Name, Mailing Address and ZIP Code WATTS FOR CONGRESS PO BOX 720445 NORMAN, OK 73070	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	-1,000.00
F. Full Name, Mailing Address and ZIP Code FRIENDS OF J.C. WATTS PO BOX 720445 NORMAN, OK 73070	J.C. WATTS, U.S. HOUSE 4th OK Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
G. Full Name, Mailing Address and ZIP Code CHARLIE STENHOLM FOR CONGRESS P.O. BOX 1032 STAMFORD, TX 79553	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	-500.00
H. Full Name, Mailing Address and ZIP Code MIKE MCINTYRE FOR CONGRESS P.O. BOX 1 LUMBERTON, NC 28359	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	-500.00
I. Full Name, Mailing Address and ZIP Code HILLIARD FOR CONGRESS CAMPAIGN PO BOX 11705 BIRMINGHAM, AL 36202-1705	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	-500.00

SUBTOTAL of Disbursements This Page (optional)	2,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 6
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
DuPont Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CHARLIE STENHOLM FOR CONGRESS P.O. BOX 1032 STAMFORD, TX 79553	Charles W. Stenholm, U.S. HOUSE 17th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
MIKE MCINTYRE FOR CONGRESS P.O. BOX 1 LUMBERTON, NC 28359	MIKE MCINTYRE, U.S. HOUSE 7th NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
HILLIARD FOR CONGRESS CAMPAIGN PO BOX 11705 BIRMINGHAM, AL 35202-1705	Earl F. Hilliard, U.S. HOUSE 7th AL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	05/01/00	1,000.00
THE GRASSLEY COMMITTEE P.O. BOX 6193 ALEXANDRIA, VA 22306-0193	CHARLES GRASSLEY, U.S. SENATE IA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2004	05/04/00	1,000.00
LAMPSON FOR CONGRESS 2000 38 IVY STREET, SE WASHINGTON, DC 20003	Voided Check Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	-500.00
LAMPSON FOR CONGRESS 2000 38 IVY STREET, SE WASHINGTON, DC 20003	NICK LAMPSON, U.S. HOUSE 9th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	08/22/00	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	4,000.00
TOTAL This Period (last page this line number only)	27,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **29**

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NAME OF COMMITTEE (in Full)
DuPort Good Government Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JENKINS FOR JUSTICE PO BOX 11521 CHARLESTON, WV 25339	EVAN JENKINS, SUPREME COURT WV Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	04/18/00	1,000.00
FRIENDS OF COLIN BONINI 265 SOUTH SHORE DRIVE DOVER, DE 19901	COLIN BONINI, STATE SENATE DE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	250.00
FRIENDS OF ADAMS FOR SENATOR PO BOX 367 BRIDGEVILLE, DE 19933	Voided Check - PRINT ERROR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	-200.00
CITIZENS FOR SORENSON 417 SNUFF MILL HILL HOCKESSIN, DE 19707	Voided Check PRINT ERROR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	-150.00
FRIENDS OF COLIN BONINI 255 SOUTH SHORE DRIVE DOVER, DE 19901	Voided Check PRINT ERROR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	-250.00
FRIENDS OF COLIN BONINI 255 SOUTH SHORE DRIVE DOVER, DE 19901	COLIN BONINI, STATE SENATE DE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	06/22/00	250.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	900.00
TOTAL This Period (last page this line number only)	900.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) 4/14/00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>KPE</i> PREPARER	 4-14-00 DATE PREPARED