

AUG 3 1 20 1995

July 31, 1995

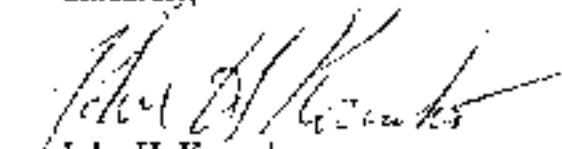
**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

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 January 1, 1995 through June 30, 1995.

Sincerely,



John H. Korenko  
Treasurer

Enclosure

cc: Office of the Secretary of State  
P.O. Box 1401  
Dover, DE 19901

New York State Board of Elections  
Swan Street Building, Core 1  
Empire State Building  
Albany, NY 12223-0002

State Ethics Commission  
1122 Lady Street, Suite 930  
Columbia, SC 29201

9 3 0 3 9 9 1 3 8 1 0

cc: Report Less Schedule A

Office of the Secretary of State  
State House, Room 204  
Concord, NH 03301

Commissioner of Political Practices  
1205 8th Avenue  
Helena, MT 59620

Registry of Election Finance  
404 James Robertson Parkway  
Suite 1614  
Nashville, TN 37243-1360

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

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

Political Reform Division  
Office of the Secretary of State  
P.O. Box 1467  
Sacramento, CA 95812-1467

Elections Division  
Office of the Secretary of State  
30 East Broad Street, 14th Floor  
Columbus, OH 43266-0418

Elections Division  
Office of the Secretary of State  
State Capitol Building, Room 026  
Little Rock, AR 72201

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Elections Division  
Office of the Secretary of State  
P.O. Box 94125  
Baton Rouge, LA 70804-9125

Elections Division  
Office of the Secretary of State  
Capitol, 2nd Floor  
Topeka, KS 66612-1594

State Election Board  
302 W. Washington Street #E032  
Indianapolis, IN 46204

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

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

Campaign Reporting Office  
State Board of Elections  
P.O. Box 2169  
Raleigh, NC 27602-2169

Ethics Commission  
State Capitol Building, Room B-2A  
Oklahoma City, OK 73105-4802

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# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

Aug 3 1 20 1995

1. NAME OF COMMITTEE (in full) <b>DuPont Good Government Fund</b>		2. FEC IDENTIFICATION NUMBER <b>C00171926</b>
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported <b>DuPont Company, 1007 Market St. N-10539</b>		
CITY, STATE and ZIP CODE <b>Wilmington, DE 19898</b>		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See PRC 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

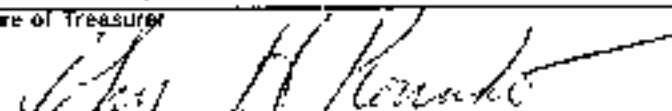
Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     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 This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <b>01/01/95</b> through <b>06/30/95</b>		
6. (a) Cash on Hand January 1, 19 <b>95</b> .....		\$ <b>12,407.87</b>
(b) Cash on Hand at Beginning of Reporting Period.....	\$ <b>12,407.87</b>	
(c) Total Receipts (from line 19).....	\$ <b>33,514.63</b>	\$ <b>33,514.63</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$ <b>45,922.50</b>	\$ <b>45,922.50</b>
7. Total Disbursements (from Line 30).....	\$ <b>19,698.00</b>	\$ <b>19,698.00</b>
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))..	\$ <b>26,224.50</b>	\$ <b>26,224.50</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ <b>0.00</b>	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ <b>0.00</b>	
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 <b>John H. Korenko, Treasurer</b>		
Signature of Treasurer 		Date <b>7/31/95</b>

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

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FEC FORM 3X

(Revised 9/93)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE <b>DuPont Good Government Fund</b>	REPORT COVERING PERIOD	
	FROM: <b>01/01/95</b>	TO: <b>06/30/95</b>
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	5,877.50	5,877.50
ii. Unitemized.....	27,208.50	27,208.50
iii. Total..... (add i and ii) >	33,086.00	33,086.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions..... (add all i, b and c) >	33,086.00	33,086.00
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.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other PACs.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	428.63	428.63
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	33,514.63	33,514.63
20. Total Federal Receipts..... (subtract line 18 from line 19) >	33,514.63	33,514.63
II. Disbursements		
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	0.00
c. Total Operating Expenditures..... (Add ai, aii, and b) >	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other PACs.....	19,600.00	19,600.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
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 a, b, and c) >	0.00	0.00
29. Other Disbursements.....	98.00	98.00
30. Total Disbursements..... (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	19,698.00	19,698.00
31. Total Federal Disbursements..... (Subtract line 21 aii from line 30) >	19,698.00	19,698.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans) (from line 11d).....	33,086.00	33,086.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32).....	33,086.00	33,086.00
35. Total Federal Operating Expenditures..... (add 21 ai and 21 b) >	0.00	0.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures..... (subtract line 36 from 35) >	0.00	0.00

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**

<p>A. Full Name, Mailing Address and Zip Code <b>JACK KROL</b> 1001 GENERAL STEVENS DR WEST CHESTER, PA 19382</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>VICE CHAIRMAN</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>1,500.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>1,500.00</b></p>		<p><b>(\$250.00 Monthly)</b></p>
<p>B. Full Name, Mailing Address and Zip Code <b>ROBERT LUFT</b> 917 BRIDLE LANE WEST CHESTER, PA 19382</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>SR VP</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>1,500.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>1,500.00</b></p>		<p><b>(\$250.00 Monthly)</b></p>
<p>C. Full Name, Mailing Address and Zip Code <b>CONSTANTINE NICANDROS</b> 5745 INDIAN CIRCLE HOUSTON, TX 77252</p>	<p>Name of Employer <b>CONOCO</b></p> <p>Occupation <b>PRESIDENT</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>1,000.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>1,200.00</b></p>		<p><b>(\$200.00 Monthly)</b></p>
<p>D. Full Name, Mailing Address and Zip Code <b>STACEY MOBLEY</b> 141 DEER VALLEY LANE WILMINGTON, DE 19807</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>SR VP</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>320.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>480.00</b></p>		<p><b>(\$80.00 Monthly)</b></p>
<p>E. Full Name, Mailing Address and Zip Code <b>HOWARD RUDGE</b> 302 CENTENNIAL CIRCLE WILMINGTON, DE 19807</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>SR VP</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>340.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>510.00</b></p>		<p><b>(\$85.00 Monthly)</b></p>
<p>F. Full Name, Mailing Address and Zip Code <b>JOHN HIMES</b> 15 FERN HILL RD KENNETT SQUARE, PA 19348</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>VP</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>180.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>360.00</b></p>		<p><b>(\$60.00 Monthly)</b></p>
<p>G. Full Name, Mailing Address and Zip Code <b>WILLIAM KIRK</b> BOX 779 UNIONVILLE, PA 19375</p>	<p>Name of Employer <b>DUPONT COMPANY</b></p> <p>Occupation <b>VP/GM</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>180.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>360.00</b></p>		<p><b>(\$60.00 Monthly)</b></p>
<p>SUB TOTAL of Receipts This Page (Optional).....&gt;</p>			<p><b>5,020.00</b></p>
<p>TOTAL this Period (Last page this line number only).....&gt;</p>			<p></p>

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**DuPont Good Government Fund**

<b>A. Full Name, Mailing Address and Zip Code</b> <b>JOHN LONDON</b> <b>PO BOX 707</b> <b>MENDENHALL, PA 19357</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$511.00 Monthly)
	Occupation <b>VP/GM</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>B. Full Name, Mailing Address and Zip Code</b> <b>J. MICHAEL BOWMAN</b> <b>2929 FAULKLAND RD</b> <b>WILMINGTON, DE 19808</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$50.00 Monthly)
	Occupation <b>VP/GM</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>C. Full Name, Mailing Address and Zip Code</b> <b>TED DAVIS</b> <b>2830 PLANTATION LAKES DR</b> <b>MISSOURI CITY, TX 77459</b>	Name of Employer <b>CONOCO</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$50.00 Monthly)
	Occupation <b>VICE PRESIDENT</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>D. Full Name, Mailing Address and Zip Code</b> <b>RICHARD SEVERANCE</b> <b>12219 BROKEN ARROW</b> <b>HOUSTON, TX 77024</b>	Name of Employer <b>CONOCO</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$50.00 Monthly)
	Occupation <b>GENERAL MANAGER</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>E. Full Name, Mailing Address and Zip Code</b> <b>WILLIAM BRISTER</b> <b>203 REMINGTON DR</b> <b>DR</b> <b>LAFAYETTE, LA 70503</b>	Name of Employer <b>CONOCO</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$50.00 Monthly)
	Occupation <b>DIVISION MANAGER</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>F. Full Name, Mailing Address and Zip Code</b> <b>THOMAS KNUDSON</b> <b>518 WEST FOREST DR</b> <b>HOUSTON, TX 77079</b>	Name of Employer <b>CONOCO</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 100.00 (\$50.00 Monthly)
	Occupation <b>VICE PRESIDENT</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
<b>G. Full Name, Mailing Address and Zip Code</b> <b>ROBERT HEINE</b> <b>4109 FT WORTH PL</b> <b>ALEXANDRIA, VA 22304</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
	Occupation <b>DIRECTOR</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>240.00</b>		
SUB TOTAL of Receipts This Page (Optional).....>			<b>640.00</b>
TOTAL this Period (Last page this line number only).....>			

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**DuPont Good Government Fund**

A. Full Name, Mailing Address and Zip Code <b>THOMAS HUMPHREY</b> <b>3 BITTERSWEET DR</b> <b>WEST CHESTER, PA 19382</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  35.00 (\$35.00 Monthly)
	Occupation <b>DIRECTOR</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>210.00</b>		
B. Full Name, Mailing Address and Zip Code <b>ROGER GREGG</b> <b>435 FOX MEADOW LANE</b> <b>WEST CHESTER, PA 19382</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  40.00 (\$40.00 Monthly)
	Occupation <b>DIRECTOR</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>240.00</b>		
C. Full Name, Mailing Address and Zip Code <b>KARL HAAS</b> <b>2605 COLLEGE DR</b> <b>VICTORIA, TX 77901</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  37.50 (\$37.50 Monthly)
	Occupation <b>TECH FELLOW</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>225.00</b>		
D. Full Name, Mailing Address and Zip Code <b>DENNIS REILLEY</b> <b>6 DOGWOOD HILL LANE</b> <b>CHADDS FORD, PA 19317</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  35.00 (\$35.00 Monthly)
	Occupation <b>VP/GM</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>210.00</b>		
E. Full Name, Mailing Address and Zip Code <b>JOSEPH GLAS</b> <b>1010 LAMBOURNE RD</b> <b>WEST CHESTER, PA 19382</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  35.00 (\$35.00 Monthly)
	Occupation <b>VP/GM</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>210.00</b>		
F. Full Name, Mailing Address and Zip Code <b>JAMES FLYNN</b> <b>24 QUARTZ MILL RD</b> <b>NEWARK, DE 19711</b>	Name of Employer <b>DUPONT COMPANY</b>	Date (Month day, Year)	Amount of Each Receipt this Period  35.00 (\$35.00 Monthly)
	Occupation <b>ENGINEERING DIRECTOR</b>	Payroll Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>210.00</b>		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
SUB TOTAL of Receipts This Page (Optional).....>			<b>217.50</b>
TOTAL this Period (Last page this line number only).....>			<b>5,877.50</b>



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in full)  
**DuPont Good Government Fund**

A. Full Name, Mailing Address and Zip Code <b>WILMINGTON TRUST                      RODNEY SQUARE NORTH                      WILMINGTON, DE 19890</b>	Name of Employer	Date (Month day, Year) <b>05/05/95</b>	Amount of Each Receipt this Period  <b>76.01</b>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>428.63</b>		
B. Full Name, Mailing Address and Zip Code <b>WILMINGTON TRUST                      RODNEY SQUARE NORTH                      WILMINGTON, DE 19890</b>	Name of Employer	Date (Month day, Year) <b>06/06/95</b>	Amount of Each Receipt this Period  <b>93.22</b>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>428.63</b>		
C. Full Name, Mailing Address and Zip Code <b>WILMINGTON TRUST                      RODNEY SQUARE NORTH                      WILMINGTON, DE 19890</b>	Name of Employer	Date (Month day, Year) <b>06/30/95</b>	Amount of Each Receipt this Period  <b>101.75</b>
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>428.63</b>		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
SUB TOTAL of Receipts This Page (Optional).....>			<b>270.98</b>
TOTAL this Period (Last page this line number only).....>			<b>270.98</b>

6  
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1  
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Use separate schedule(s) for each category of the Detailed Summary Page

**SCHEDULE B ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in full)

**DuPont Good Government Fund**

<p>A. Full Name, Mailing Address and Zip Code <b>FRIENDS OF BILL ZELIFF</b> P.O. BOX 818 MANCHESTER, NH 03105</p>	<p>Purpose of Disbursement <b>Bill Zeff, U.S. HOUSE 1st NH</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>02/16/95</b></p>	<p>Amount of Each Disb. this Period <b>1,000.00</b></p>
<p>B. Full Name, Mailing Address and Zip Code <b>LAUGHLIN FOR CONGRESS</b> 501 CAPITOL COURT, NE, SUITE 200 WASHINGTON, DC 20002</p>	<p>Purpose of Disbursement <b>Greg Laughlin, U.S. HOUSE 14th TX</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>03/09/95</b></p>	<p>Amount of Each Disb. this Period <b>1,000.00</b></p>
<p>C. Full Name, Mailing Address and Zip Code <b>COMMITTEE TO REELECT TOM BECK</b> 651 GREENHOUSE ROAD DEER LODGE, MT 59722</p>	<p>Purpose of Disbursement <b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1994</p>	<p>Date (Month day, Year) <b>03/31/95</b></p>	<p>Amount of Each Disb. this Period <b>-150.00</b></p>
<p>D. Full Name, Mailing Address and Zip Code <b>COMMITTEE TO ELECT ZACH WAMP</b> P.O. BOX 4331 CHATTANOOGA, TN 37405</p>	<p>Purpose of Disbursement <b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1994</p>	<p>Date (Month day, Year) <b>03/31/95</b></p>	<p>Amount of Each Disb. this Period <b>-500.00</b></p>
<p>E. Full Name, Mailing Address and Zip Code <b>DICK ARMEY CAMPAIGN</b> P.O. BOX 85 LEWISVILLE, TX 75067</p>	<p>Purpose of Disbursement <b>Dick Arney, U.S. HOUSE 26th TX</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period <b>2,000.00</b></p>
<p>F. Full Name, Mailing Address and Zip Code <b>FRIENDS OF CONGRESSMAN CLINGER</b> P.O. BOX 631 WARREN, PA 19365</p>	<p>Purpose of Disbursement <b>William F. Clinger, U.S. HOUSE 5th PA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period <b>1,000.00</b></p>
<p>G. Full Name, Mailing Address and Zip Code <b>CHRISTOPHER COX CONGRESSIONAL COMMITTEE</b> P.O. BOX 8088 NEWPORT BEACH, CA 92658</p>	<p>Purpose of Disbursement <b>Christopher Cox, U.S. HOUSE 47th CA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period <b>500.00</b></p>
<p>H. Full Name, Mailing Address and Zip Code <b>CITIZENS FOR KASICH</b> 865 MACON ALLEY COLUMBUS, OH 43206</p>	<p>Purpose of Disbursement <b>John R. Kasich, U.S. HOUSE 12th OH</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period <b>1,000.00</b></p>
<p>I. Full Name, Mailing Address and Zip Code <b>LAMBERT TO WIN</b> P.O. BOX 118 HELENA, AR 72342</p>	<p>Purpose of Disbursement <b>Blanche Lambert, U.S. HOUSE 1st AR</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996</p>	<p>Date (Month day, Year) <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period <b>500.00</b></p>

SUB TOTAL of Disbursements this page (Optional).....> **6,350.00**

TOTAL this Period (Last page this line number only).....>

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE	OF
2	4
FOR LINE NUMBER	
23	

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NAME OF COMMITTEE (In Full)  
**DuPont Good Government Fund**

<p>A. Full Name, Mailing Address and Zip Code  <b>FRIENDS OF BOB LIVINGSTON</b>  <b>5163 GENERAL DEGAULLE DR, SUITE 210</b>  <b>NEW ORLEANS, LA 70131</b></p>	<p>Purpose of Disbursement  <b>Robert L. Livingston, U.S. HOUSE 1st LA</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>B. Full Name, Mailing Address and Zip Code  <b>BROWNBACK FOR CONGRESS</b>  <b>P.O. BOX 2008</b>  <b>TOPEKA, KS 66601</b></p>	<p>Purpose of Disbursement  <b>Sam Brownback, U.S. HOUSE 2nd KS</b>                  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (Specify) <b>DEBT RETIREMENT</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>C. Full Name, Mailing Address and Zip Code  <b>MCINTOSH FOR CONGRESS</b>  <b>P.O. BOX 2424</b>  <b>MUNCIE, IN 47307</b></p>	<p>Purpose of Disbursement  <b>David M. McIntosh, U.S. HOUSE 2nd IN</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>D. Full Name, Mailing Address and Zip Code  <b>MICA FOR CONGRESS</b>  <b>P.O. BOX 181546</b>  <b>CASSELBERRY, FL 32718</b></p>	<p>Purpose of Disbursement  <b>John L. Mica, U.S. HOUSE 7th FL</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>E. Full Name, Mailing Address and Zip Code  <b>PAXON FOR CONGRESS</b>  <b>P.O. BOX 1995</b>  <b>WILLIAMSVILLE, NY 14231</b></p>	<p>Purpose of Disbursement  <b>Bill Paxon, U.S. HOUSE 27th NY</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>F. Full Name, Mailing Address and Zip Code  <b>STOCKMAN FOR CONGRESS</b>  <b>P.O. BOX 57135</b>  <b>WEBSTER, TX 77598</b></p>	<p>Purpose of Disbursement  <b>Steve Stockman, U.S. HOUSE 9th TX</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>500.00</b></p>
<p>G. Full Name, Mailing Address and Zip Code  <b>WALKER FOR CONGRESS COMMITTEE</b>  <b>P.O. BOX 51</b>  <b>MILLERSVILLE, PA 17551</b></p>	<p>Purpose of Disbursement  <b>Robert S. Walker, U.S. HOUSE 16th PA</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>H. Full Name, Mailing Address and Zip Code  <b>BLILEY FOR CONGRESS</b>  <b>8330 INGALLS AVE.</b>  <b>ALEXANDRIA, VA 22302</b></p>	<p>Purpose of Disbursement  <b>Thomas J. Bliley, U.S. HOUSE 7th VA</b>                  Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>
<p>I. Full Name, Mailing Address and Zip Code  <b>TOM DELAY CONGRESSIONAL COMMITTEE</b>  <b>4010 FRANCONIA ROAD</b>  <b>ALEXANDRIA, VA 22310-2136</b></p>	<p>Purpose of Disbursement  <b>Tom DeLay, U.S. HOUSE 22nd TX</b>                  Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (Specify) <b>1996</b></p>	<p>Date (Month day, Year)  <b>04/06/95</b></p>	<p>Amount of Each Disb. this Period  <b>1,000.00</b></p>

<p>SUB TOTAL of Disbursements this page (Optional)..... &gt;</p>	<p><b>6,500.00</b></p>
<p>TOTAL this Period (Last page this line number only)..... &gt;</p>	<p></p>

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 4  
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 Disb. this Period
<b>OXLEY FOR CONGRESS</b> P.O. BOX 1994 FINDLEY, OH 45839	Michael G. Oxley, U.S. HOUSE 4th OH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	1,000.00
<b>CHARLES TAYLOR FOR CONGRESS</b> P.O. BOX 2355 ASHEVILLE, NC 28802	Charles H. Taylor, U.S. HOUSE 11th NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	500.00
<b>FRIENDS OF JOHN BOEHNER</b> 7908 CINCINNATI DAYTON RD, SUITE 1 WEST CHESTER, OH 45069	John A. Boehner, U.S. HOUSE 8th OH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	1,000.00
<b>PAT ROBERTS FOR CONGRESS</b> P.O. BOX 15 DODGE CITY, KS 67801	Pat Roberts, U.S. HOUSE 1st KS Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	1,000.00
<b>BREWSTER FOR CONGRESS</b> P.O. BOX 10 MADILL, OK 73446	Bill Brewster, U.S. HOUSE 3rd OK Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	500.00
<b>CONDIT FOR CONGRESS</b> 104 N. WEST STREET ALEXANDRIA, VA 22314	Gary Condit, U.S. HOUSE 18th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	500.00
<b>JIMMY HAYES FOR CONGRESS COMMITTEE</b> P.O. BOX 30476 LAFAYETTE, LA 70593	Jimmy Hayes, U.S. HOUSE 7th LA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	1,000.00
<b>BILLY TAUZIN COMMITTEE</b> P.O. BOX 1407 THIBODEAUX, LA 70302	W.J. "Billy" Tauzin, U.S. HOUSE 3rd LA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	500.00
<b>L.F. PAYNE FOR CONGRESS</b> P.O. BOX 2884 WASHINGTON, DC 20013	Donald M. Payne, U.S. HOUSE 10th NJ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	04/06/95	500.00

SUB TOTAL of Disbursements this page (Optional).....> **6,500.00**

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	OF
4	4
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 Disb. this Period
<b>TN HOUSE REPUBLICAN CAUCUS 107 WAR MEMORIAL BUILDING NASHVILLE, TN 37219</b>	<b>TN HOUSE REPUBLICAN CAUCUS</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>04/06/95</b>	<b>100.00</b>
<b>TN HOUSE-SENATE DEMOCRATIC CAUCUS P.O. BOX 305172, DEPT. 46 NASHVILLE, TN 37230-5172</b>	<b>TN HOUSE-SENATE DEMOCRATIC CAUCUS</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	<b>04/06/95</b>	<b>150.00</b>
C. 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 Disb. this Period
D. 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 Disb. this Period
E. 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 Disb. this Period
F. 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 Disb. this Period
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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional)..... > **250.00**

TOTAL this Period (Last page this line number only)..... > **19,600.00**

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.

Hand Delivered

DATE OF RECEIPT

First Class Mail

POSTMARKED

Registered/Certified Mail

POSTMARKED

7-31-95

No Postmark

Postmark Illegible

Received from the House Office of Records  
and Registration

DATE OF RECEIPT

Received from the Senate Office of Public  
Records

DATE OF RECEIPT

Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

*JTB*  
PREPARER

8-3-95  
DATE PREPARED