

APR 12 11 22 AM '96

April 9, 1996

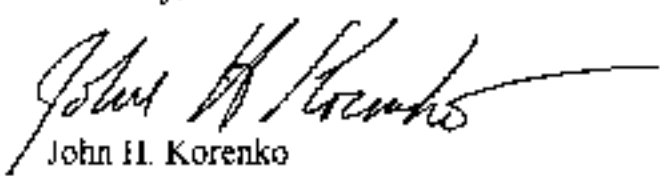
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

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, 1996 through March 31, 1996.

Sincerely,



John H. Korenko
Treasurer

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 Ethics Commission
P.O. Box 5987
Columbia, SC 29250

9 4 9 9 0 3 0 0 4 9

cc: Report Less Schedule A

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

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

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

Office of Campaign Finance
Reeves Municipal Center, Room 420
2000 14th Street, NW
Washington, DC 20009

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

FEDERAL ELECTION COMMISSION
APR 12 11 23 AM '96

1. NAME OF COMMITTEE (in full) DuPont Good Government Fund		2. FEC IDENTIFICATION NUMBER C00171926
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported DuPont Company, 1007 Market St. N-10539		
CITY, STATE and ZIP CODE Wilmington, DE 19898		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 100)

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 _____

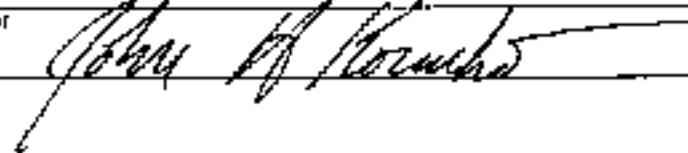
(b) Is this Report an Amendment? YES NO

95030394905

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/96 through 03/31/96		
6. (a) Cash on Hand January 1, 1996		\$ 14,956.71
(b) Cash on Hand at Beginning of Reporting Period	\$ 14,956.71	
(c) Total Receipts (from line 18)	\$ 23,353.79	\$ 23,353.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 38,310.50	\$ 38,310.50
7. Total Disbursements (from line 30)	\$ 889.00	\$ 889.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 37,421.50	\$ 37,421.50
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 H. Koronko, Treasurer		Date 4/9/96
Signature of Treasurer		

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 11/1/91

NAME OF COMMITTEE	REPORT COVERING PERIOD	
The Port Good Government Fund	FROM: 01/01/96	TO: 03/31/96
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	4,180.00	4,180.00
ii. Unitemized.....	18,780.00	18,780.00
iii. Total.....(add i and ii) >	22,960.00	22,960.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add aiii,b and c) >	22,960.00	22,960.00
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 Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	393.79	393.79
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) >	23,353.79	23,353.79
20. Total Federal Receipts.....(subtract line 18 from line 19) >	23,353.79	23,353.79
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.....	389.00	389.00
c. Total Operating Expenditures.....(Add a,i,ii, and b) >	389.00	389.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.44 1a)(I use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a,b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c,22,23,24,25,26,27,28d, and 29) >	889.00	889.00
31. Total Federal Disbursements.....(Subtract line 21 eil from line 30) >	889.00	889.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans) (from line 11d).....	22,960.00	22,960.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32).....	22,960.00	22,960.00
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	389.00	389.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35) >	389.00	389.00

950309496

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)
 DuPont Good Government Fund

9 6 0 3 0 5 9 4 9 3 7

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
JACK KROL 1001 GENERAL STEVENS DR WEST CHESTER, PA 19382	DUPONT COMPANY	Payroll	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation VICE CHAIRMAN	Deduction	(\$250.00)
	Aggregate Year-to-date > \$	750.00	Monthly
ROBERT LUFT 917 BRIDLE LANE WEST CHESTER, PA 19382	DUPONT COMPANY	Payroll	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation SR VP	Deduction	(\$250.00)
	Aggregate Year-to-date > \$	750.00	Monthly
HOWARD RUDGE 302 CENTENNIAL CIRCLE WILMINGTON, DE 19807	DUPONT COMPANY	Payroll	675.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation SR VP	Deduction	(\$225.00)
	Aggregate Year-to-date > \$	675.00	Monthly
WILLIAM HARRISON JR BOX 3597 GRENNVILLE, DE 19807	DUPONT COMPANY	Payroll	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation V.P. OPERATIONS	Deduction	(\$150.00)
	Aggregate Year-to-date > \$	450.00	Monthly
RICHARD KNOWLES 1303 DELAWARE AVE, APT #1312 WILMINGTON, DE 19806	DUPONT COMPANY	03/27/96	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation DIRECTOR	Aggregate Year-to-date > \$	350.00
EDEL WASSERMAN 1904 ACADEMY PLACE WILMINGTON, DE 19806	DUPONT COMPANY	03/27/96	325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation SCIENCE ADVISOR	Aggregate Year-to-date > \$	400.00
MARK NELSON 6700 BONAVENTURE CT BETHESDA, MD 20817	DUPONT COMPANY	03/27/96	750.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation VP FEDERAL AFFAIRS	Aggregate Year-to-date > \$	750.00

SUB TOTAL of Receipts This Page (Optional).....> **3,900.00**

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

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
DuPont Good Government Fund

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A. Full Name, Mailing Address and Zip Code EDEL WASSERMAN 1914 ACADEMY PLACE WILMINGTON, DE 19806		Name of Employer DUPONT COMPANY		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 25.00 (\$25.00 Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation SCIENCE ADVISOR		Aggregate Year-to-date > \$ 400.00			
B. Full Name, Mailing Address and Zip Code STACEY MORLEY 141 DEER VALLEY LANE WILMINGTON, DE 19817		Name of Employer DUPONT COMPANY		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 80.00 (\$80.00 Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation SR VP		Aggregate Year-to-date > \$ 240.00			
C. Full Name, Mailing Address and Zip Code WILLIAM KIRK BOX 779 UNIONVILLE, PA 19375		Name of Employer DUPONT COMPANY		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 75.00 (\$75.00 Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation VP/GM		Aggregate Year-to-date > \$ 225.00			
D. Full Name, Mailing Address and Zip Code JOSEPH GLAS 1010 LAMBOURNE RD WEST CHESTER, PA 19382		Name of Employer DUPONT COMPANY		Date (Month day, Year) Payroll Deduction		Amount of Each Receipt this Period 100.00 (\$100.00 Monthly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation VP/GM		Aggregate Year-to-date > \$ 235.00			
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 > \$			

SUB TOTAL of Receipts This Page (Optional)	280.00
TOTAL this Period (Last page this line number only)	4,180.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in full)
DuPont Good Government Fund

9 6 0 3 0 3 9 4 9 0 9

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		02/29/96	116.10
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	393.79
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		03/31/96	126.61
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	393.79
C. 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 > \$	
D. 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 > \$	
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 > \$	

SUB TOTAL of Receipts This Page (Optional).....>	242.71
TOTAL this Period (Last page this line number only).....>	242.71

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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A. Full Name, Mailing Address and Zip Code WILMINGTON TRUST	Purpose of Disbursement 1995 FEDERAL INCOME TAX Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year) 03/12/96	Amount of Each Disb. this Period 287.00
B. Full Name, Mailing Address and Zip Code WILMINGTON TRUST	Purpose of Disbursement Voided Check Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year) 03/12/96	Amount of Each Disb. this Period -287.00
C. Full Name, Mailing Address and Zip Code WILMINGTON TRUST	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year) 03/12/96	Amount of Each Disb. this Period 287.00
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).....>	287.00
TOTAL this Period (Last page this line number only).....>	287.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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)
Dufford Good Government Fund

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
FRIENDS OF PHIL GRAMM PO BOX 565087 DALLAS, TX 75356	Voided Check Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	02/29/96	-2,000.00
FRIENDS OF PHIL GRAMM PO BOX 565087 DALLAS, TX 75356	Phil Gramm, U.S. SENATE TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	02/29/96	1,000.00
FRIENDS OF PHIL GRAMM PO BOX 565087 DALLAS, TX 75356	Phil Gramm, U.S. SENATE TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	02/29/96	1,000.00
COMMITTEE FOR CONGRESSMAN CHARLIE ROY PO BOX 1891 FAYETTEVILLE, NC 28302	Voided Check Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	03/15/96	-500.00
PORTMAN FOR CONGRESS PO BOX 2365 CINCINNATI, OH 45201	Voided Check Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	03/15/96	-500.00
FRIENDS OF SENATOR ROCKEFELLER 245 SECOND STREET, SUITE 300 WASHINGTON, DC 20002	John D. Rockefeller, U.S. SENATE WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	03/28/96	1,000.00
LAUGHLIN FOR CONGRESS 501 CAPITOL COURT, NE, SUITE 200 WASHINGTON, DC 20002	Greg Laughlin, U.S. HOUSE (4th TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	03/28/96	500.00
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).....	500.00
TOTAL this Period (Last page this line number only).....	500.00

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

4/9/96

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

JMN
PREPARER

4-12-96
DATE PREPARED

96030394972