

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

SECRETARY OF THE SENATE

00 JUL 14 PM 4:28

USE FEC FINANCING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
 Good Government Fund

ADDRESS (number and street)  Check if different than previously reported  
 P.O. Box 75103  
 CITY, STATE and ZIP CODE  
 Washington, DC 20013

2. FEC IDENTIFICATION NUMBER  
 C00358937

3.  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

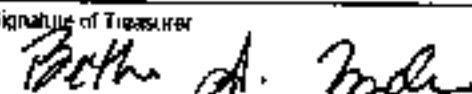
## SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>06/15/00</u> through <u>06/30/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		
(b) Cash on Hand at Beginning of Reporting Period	\$ -0-	
(c) Total Receipts (from line 10)	\$ 9,000.00	\$ 9,000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and lines 6(a) and 6(c) for Column B)	\$ 9,000.00	\$ 9,000.00
7. Total Disbursements (from Line 30)	\$ -0-	\$ -0-
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 9,000.00	\$ 9,000.00
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule G and/or Schedule D)	\$ -0-	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule G and/or Schedule D)	\$ -0-	

For further information CONTACT:  
 Federal Election Commission  
 910 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  
 Beth A. Lydon

Signature of Treasurer  


Date  
 07/14/00

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 <b>Good Government Fund</b>		REPORT COVERING PERIOD	
		FROM: <b>06/15/00</b>	TO: <b>06/30/00</b>
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	9,000.00	9,000.00
ii.	Unitemized		
iii.	Total (add i and ii)	9,000.00	9,000.00
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a iii, b and c)	9,000.00	9,000.00
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)		
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	9,000.00	9,000.00
20.	Total Federal Receipts (subtract line 18 from line 19)	9,000.00	9,000.00
<b>II. Disbursements</b>			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures		
c.	Total Operating Expenditures (Add a i, ii, and b)		
22.	Transfers In Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds (Add a, b and c)		
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		
31.	Total Federal Disbursements (subtract line 21 a i from line 30)		
<b>III. Net Contributions/Operating Expenditures</b>			
32.	Total Contributions (other than loans) (from line 11d)	9,000.00	9,000.00
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans) (subtract line 33 from 32)	9,000.00	9,000.00
35.	Total Federal Operating Expenditures (add 21 a i and 21 b)		
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35)		

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
 Good Government Fund FEC ID No. C00358937

A. Full Name, Mailing Address and ZIP Code John F. Boyle, Jr. 1718 Cripple Creek Irving, TX 75061		Name of Employer Boyle & Lowry LLP	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Brunawick Homes, LLC 6390 LBJ Freeway Suite 105 Dallas, TX 75240		Name of Employer See Memo Schedule	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Web Carr 8333 Douglas Avenue Suite 950 Dallas, TX 75225		Name of Employer Carr Petroleum Corporation	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Oil & Gas Production	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Al G. Hill, Jr. 1601 Elm street Suite 3400 Dallas, TX 75201		Name of Employer A. G. Hill Company	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Owner	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Margaret B. Hill 1601 Elm Street Suite 3400 Dallas, TX 75201		Name of Employer Self employed	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Investor	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Dee J. Kelly, Jr. 915 Billcrest Street Fort Worth, TX 76107		Name of Employer Information Requested	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Info Requested	Aggregate Year-To-Date $\geq$ \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code John Ford Lacy 3710 Shenandoah Dallas, TX 75205		Name of Employer Akin, Gump, Strauss, Bauer	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date $\geq$ \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)	7,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)  
 Good Government Fund

FEC ID No. C00358937

A. Full Name, Mailing Address and ZIP Code Cece Smith Lacy 3710 Shenandoah Dallas, TX 75205	Name of Employer Phillips-Smith	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
	Occupation Venture Capital Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 1,000.00		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Robert B. Power 1311 West Irving Blvd. Irving, TX 75061	Name of Employer Self employed	Date (month, day, year) 06/28/00	Amount of Each Receipt this Period 1,000.00
	Occupation Attorney Aggregate Year-To-Date <input checked="" type="checkbox"/> \$ 1,000.00		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-To-Date <input checked="" type="checkbox"/> \$		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-To-Date <input checked="" type="checkbox"/> \$		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-To-Date <input checked="" type="checkbox"/> \$		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-To-Date <input checked="" type="checkbox"/> \$		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Aggregate Year-To-Date <input checked="" type="checkbox"/> \$		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	9,000.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)  
 Good Government Fund MEMO SCHEDULE  
 FEC ID No. C00358937

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Moore c/o 6390 LBJ Freeway Suite 105 Dallas, TX 75240 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Attribution of contribution from Brunswick Homes, LLC Occupation	06/28/00	1,000.00
Aggregate Year-To-Date > \$		1,000.00	
B. Full Name, Mailing Address and ZIP Code			
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-To-Date > \$	
C. Full Name, Mailing Address and ZIP Code			
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-To-Date > \$	
D. Full Name, Mailing Address and ZIP Code			
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			
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			
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			
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-To-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

**HAND DELIVERED** 7/14/00  
Date of Receipt

**FAX (48-HOUR NOTICES)** \_\_\_\_\_  
Date of Receipt

**INSIDE MAIL** \_\_\_\_\_  
Date of Receipt

**RECEIVED FROM THE LEGISLATIVE RESOURCE  
CENTER** \_\_\_\_\_  
Date of Receipt

**RECEIVED FROM THE FEDERAL ELECTION  
COMMISSION** \_\_\_\_\_  
Date of Receipt

**FIRST CLASS MAIL** \_\_\_\_\_  
Postmarked

**REGISTERED/CERTIFIED MAIL** \_\_\_\_\_  
Postmarked

**NO POSTMARK**       **POSTMARK ILLEGIBLE**

**OTHER (Specify):** \_\_\_\_\_

**AIRBORNE EXPRESS**

**EXPRESS MAIL**

**FEDERAL EXPRESS**

**UPS**

\_\_\_\_\_  
Postmark and/or Date of Receipt

RD      7/14/00  
Preparer      Date Prepared