

# STATEMENT OF ORGANIZATION

(see reverse side for instructions)

1. (a) Name of Committee (in Full) <input type="checkbox"/> Check if name or address is changed. <b>Good Government 2000</b>	2. Date <b>9/29/99</b>
(b) Address (Number and Street) <b>1401 H Street, NW, #1200</b>	3. FEC ID NUMBER <b>C00346718</b>
(c) City, State and ZIP Code <b>Washington, DC 20005</b>	4. Is this an election year? <b>YES</b> <input type="checkbox"/> NO <input type="checkbox"/>

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**FEDERAL ELECTION**  
**COMMISSION MAIL ROOM**  
 2000 OCT 2 2:15

5. TYPE OF COMMITTEE (check one):

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate	Candidate Party Affiliation	Office Sought	State/District

(c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee.  
(name of candidate)

(d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party.  
(National, State or subordinate) (Democratic, Republican, etc.)

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund nor a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
See Attached		

If the registering political committee has identified a "connected organization" above, please indicate type of organization:

Corporation    Corporation w/o Capital Stock    Labor Organization    Membership Organization    Trade Association    Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position, (the person in possession of committee books and records).

Full Name	Mailing Address and ZIP Code	Title or Position
Matthew P. Fink	See Below	Treasurer

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address and ZIP Code	Title or Position
Matthew P. Fink	1401 H Street, NW, #1200 Washington, DC 20005	Treasurer

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Union National Bank of Washington	740 15th Street, NW Washington, DC 20005

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Matthew P. Fink *MPF* Sept 30, 1999  
Type or Print Name of Treasurer **SIGNATURE OF TREASURER** Date

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

ATTACHMENT  
Amended Statement of Organization dated 9/24/99

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Good Government 2000  
1401 H Street, NW, #1200  
Washington, DC 20005

C00346718

6. Affiliated Committees

Good Government 2000 is the fundraising representative for a joint fundraising effort. The participating committees, which are affiliated for joint fundraising purposes are:

<u>Affiliated Committee</u>	<u>Mailing Address</u>
a. Friends of Roy Blunt	P.O. Box 278 Strafford, MO 65757
b. Ehrlich for Congress	8600 La Salle Road, #103 Baltimore, MD 21286
c. John Shadegg for Congress	5251 N. 16th Street, #707 Phoenix, AZ 85016
d. Volunteers for John Shimkus	P.O. Box 5458 Springfield, IL 62705
e. Heather Wilson for Congress	P.O. Box 14070 Albuquerque, NM 87191

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-4-99</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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>M</i> PREPARER	<i>10-4-99</i> DATE PREPARED