

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

GOOD FUND, THE

ADDRESS (number and street)

PO BOX 3404

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22302

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00409185

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)     May 20 (M5)     Aug 20 (M8)     Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)     Jun 20 (M6)     Sep 20 (M9)     Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)     Jul 20 (M7)     Oct 20 (M10)     Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)     General (12G)     Runoff (12R)

Convention (12C)     Special (12G)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post-Election Report for the:

General (30G)     Runoff (30R)     Special (30S)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period

11

01

2009

through

11

30

2009

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 Laura McMenamin

Signature of Treasurer Electronically Filed by Laura McMenamin

Date

12

15

2009

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

Office Use Only

FEC FORM 3X  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GOOD FUND, THE

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		38208.06
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	49159.19									
(c) Total Receipts (from Line 19) .....	3150.00	108085.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	52309.19	146293.06								
7. Total Disbursements (from Line 31) .....	1507.50	95491.37								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50801.69	50801.69								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
GOOD FUND, THE

Report Covering the Period: From: 

M	M
1	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	1

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	1000.00	16250.00
(ii) Unitemized .....	150.00	4335.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1150.00	20585.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2000.00	86000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	3150.00	106585.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	1000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	3150.00	108085.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3150.00	108085.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	507.50	52491.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	507.50	52491.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	24000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (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 Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	19000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1507.50	95491.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1507.50	95491.37

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	3150.00	106585.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3150.00	106585.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	507.50	52491.37
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	507.50	51991.37

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 9  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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 FUND, THE

**A.** Full Name (Last, First, Middle Initial)  
Dr. Edward G. Murphy

Mailing Address 5575 Salisbury Drive

City	State	Zip Code
Roanoke	VA	24018

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Doctor
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	9

Transaction ID: 973

Amount of Each Receipt this Period

1000.00
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Aggregate Year-to-Date ▼

1000.00
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 9
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

<b>A.</b>	Full Name (Last, First, Middle Initial) WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT		Date of Receipt
	Mailing Address 702 S.W. 8th Street		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bentonville	AR	72716
	FEC ID number of contributing federal political committee.		<input type="text" value="C00093054"/>
Name of Employer		Occupation	Transaction ID: 979
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2000.00"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

A.

Full Name (Last, First, Middle Initial)  
Political Compliance Services

Mailing Address PO Box 373

City State Zip Code  
Fairfax Station VA 22039

Purpose of Disbursement  
Consultant: Compliance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 988

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> /	<sup>D</sup> 0	<sup>D</sup> 2	<sup>Y</sup> /	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 9
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Amount of Each Disbursement this Period

500.00
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SUBTOTAL of Disbursements This Page (optional) .....

500.00

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

500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 9

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
GOOD FUND, THE

A.

Full Name (Last, First, Middle Initial)  
DOUG HOFFMAN FOR CONGRESS

Transaction ID: 961

Date of Disbursement

Mailing Address 111 RIVER STREET

<sup>M</sup> 1	<sup>M</sup> /	<sup>D</sup> 0	<sup>D</sup> 1	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 9
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City State Zip Code  
SARANAC LAKE NY 12983

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Political Contributions

Category/  
Type

Candidate Name  
DOUGLAS L HOFFMAN

Office Sought:  House  
 Senate  
 President

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

State: NY District: 23

SPECIAL

SUBTOTAL of Disbursements This Page (optional) ..... ►

1000.00
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TOTAL This Period (last page this line number only) ..... ►

1000.00
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