# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 13 P 1:18

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Carolina First Bank PAC

ADDRESS (number and street) ☐ Check if different than previously reported
102 S. Main St.

CITY, STATE and ZIP CODE
Greenville, SC 29601

2. FEC IDENTIFICATION NUMBER
C00311738

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:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election 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 7/1/00 through 9/30/00 | | |
| 6. (a) Cash on Hand January 1, 19____ | | $ 4250 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 2850 | |
| (c) Total Receipts (from Line 19) | $ 0 | $ 0 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 2850 | $ 4250 |
| 7. Total Disbursements (from Line 30) | $- 1100 | $- 2500 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 1750 | $ 1750 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | $ 0 | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

*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
William S. Hummerstiff

Signature of Treasurer
[signature]

Date
10/10/..

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

**FEC FORM 3X**
(revised 8/99)

FE9AN108

# DETAILED SUMMARY PAGE
## OF RECEIPTS AND DISBURSEMENTS
### PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: Carolina First Blue PAC

REPORT COVERING PERIOD FROM 7/1/00 TO: 9/30/00

| 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) | 0 | 0 | 11(a)(i) |
| ii. Unitemized | 0 | 0 | 11(a)(ii) |
| iii. Total (add i and ii) ➤ | 0 | 0 | 11(a)(iii) |
| b. Political Party Committees | 0 | 0 | 11(b) |
| c. Other Political Committees (such as PACs) | 0 | 0 | 11(c) |
| d. Total Contributions (add a iii, b and c) ➤ | 0 | 0 | 11(d) |
| 12. Transfers From Affiliated/Other Party Committees | 0 | 0 | 12 |
| 13. All Loans Received | 0 | 0 | 13 |
| 14. Loan Repayments Received | 0 | 0 | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0 | 0 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0 | 0 | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0 | 0 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0 | 0 | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 0 | 0 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 0 | 0 | 20 |
| **II. Disbursements** | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | 0 | 0 | 21(a)(i) |
| ii. Non-Federal Share | 0 | 0 | 21(a)(ii) |
| b. Other Federal Operating Expenditures | 0 | 0 | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) ➤ | 0 | 0 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | 0 | 0 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 1100 | 2500 | 23 |
| 24. Independent Expenditures (use Schedule E) | 0 | 0 | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0 | 0 | 25 |
| 26. Loan Repayments Made | 0 | 0 | 26 |
| 27. Loans Made | 0 | 0 | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | 0 | 0 | 28(a) |
| b. Political Party Committees | 0 | 0 | 28(b) |
| c. Other Political Committees (such as PACs) | 0 | 0 | 28(c) |
| d. Total Contribution Refunds (add a, b and c) ➤ | 0 | 0 | 28(d) |
| 29. Other Disbursements | 0 | 0 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 1100 | 2500 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 1100 | 2500 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 0 | 0 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0 | 0 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 0 | 0 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | 0 | 0 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0 | 0 | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | 0 | 0 | 37 |

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SCHEDULE B

# ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
CAROLINA FIRST BANK PAC

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Committee to Elect Lindsey Graham<br>PO BOX 1155<br>SENECA, SC 29679 | Purpose of Disbursement<br>SC 3RD CONG. DISTRICT<br>Disbursement for: ☐ Primary ☑ General ☐ Other (specify) | Date (month, day, year)<br>7/11/00 | Amount of Each Disbursement This Period<br>$1000 |
| B. Full Name, Mailing Address and ZIP Code<br>FRIENDS OF JIM CLYBURN<br>1355 EAST McIVER RD.<br>DARLINGTON, SC 29540 | Purpose of Disbursement<br>SC 6TH CONG DISTRICT<br>Disbursement for: ☐ Primary ☑ General ☐ Other (specify) | Date (month, day, year)<br>8/17/00 | Amount of Each Disbursement This Period<br>$100 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

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

TOTAL This Period (last page this line number only) ..... 1100

FEDAN103

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 10/10/00 |
| ☐ | Registered/Certified Mail | POSTMARKED (R/C) |
| ☐ | 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 |
| ☐ | Electronic Filing | |

PREPARER

10/13/00
DATE PREPARED

(6/2000)