

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
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 469 Hospital Dr.
Suite C
Gastonia NC 28054
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00405555
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 07 01 2009 through 12 31 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 Kimberly L. Pettit

Signature of Treasurer Electronically Filed by Kimberly L. Pettit Date 01 26 2010

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

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2009"/>		41891.47
(b) Cash on Hand at Beginning of Reporting Period	73703.96	
(c) Total Receipts (from Line 19)	14790.00	64310.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	88493.96	106201.47
7. Total Disbursements (from Line 31)	25500.00	43207.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62993.96	62993.96
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	

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: To:

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)	12685.00	52185.00
(ii) Unitemized	2105.00	2125.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14790.00	54310.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14790.00	64310.00
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.) (Carry Totals to Line 37, page 5)	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.)	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))	14790.00	64310.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14790.00	64310.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	39500.00
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)	3000.00	3000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	3000.00	3000.00
29. Other Disbursements.....	0.00	707.51
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))..	25500.00	43207.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25500.00	43207.51

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	14790.00	64310.00
34. Total Contribution Refunds (from Line 28(d))	3000.00	3000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11790.00	61310.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<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	

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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Victor M Almeida		Date of Receipt	
	Mailing Address 166 Robin Way		M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5135
	Jefferson	GA	30549	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer Buhler Quality Yarns		Occupation Manager		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00		

B.	Full Name (Last, First, Middle Initial) Roger Berrier, Jr.		Date of Receipt	
	Mailing Address 148 Broadmoor Dr.		M M / D D / Y Y Y Y Y 1 2 / 1 4 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5161
	Advance	NC	27006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Unifi, Inc.		Occupation Manager		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Werner Bieri		Date of Receipt	
	Mailing Address 385 Oak Ridge Dr.		M M / D D / Y Y Y Y Y 0 9 / 0 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5098
	Maysville	GA	30558	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2000.00	
Name of Employer Buhler Quality Yarns		Occupation CEO		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)	▶	2450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 24
(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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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Greg Boozer

Mailing Address 124 Fort William Ave

City Belmont State NC Zip Code 28012

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

Name of Employer Wellstone Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 05 / 2009

Transaction ID: SA11AI.5153

Amount of Each Receipt this Period 500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Wallace Darneille

Mailing Address 9208 York Place

City Lubbock State TX Zip Code 79424

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

Name of Employer Plains Cotton Cooperative Assn Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 18 / 2009

Transaction ID: SA11AI.5152

Amount of Each Receipt this Period 500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Allen Gant, Jr.

Mailing Address 1022 W. Davis St.

City Burlington State NC Zip Code 27215

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

Name of Employer Glen Raven, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 17 / 2009

Transaction ID: SA11AI.5096

Amount of Each Receipt this Period 2000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Joshua T. Hamilton	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 10 Everleigh Court	Transaction ID: SA11AI.5157
	City State Zip Code Simpsonville SC 29681	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Wellstone Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) Diana Huckins	Date of Receipt MM / DD / YYYY 09 / 01 / 2009
	Mailing Address PO Box 811	Transaction ID: SA11AI.5101
	City State Zip Code Jefferson GA 30549	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Buhler Yarns Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 150.00	

C.	Full Name (Last, First, Middle Initial) Frederick Indemaur	Date of Receipt MM / DD / YYYY 12 / 10 / 2009
	Mailing Address 6218 Fox Branch Court	Transaction ID: SA11AI.5162
	City State Zip Code Midlothian VA 23112	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Unifi, Inc. Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Roberta R Irwin	Date of Receipt MM / DD / YYYY 10 / 01 / 2009
	Mailing Address 4807 Water Oak Rd. #7	Transaction ID: SA11AI.5138
	City State Zip Code Charlotte NC 28211	Amount of Each Receipt this Period 340.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Radicispandex Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00

B.	Full Name (Last, First, Middle Initial) William L Jasper	Date of Receipt MM / DD / YYYY 12 / 03 / 2009
	Mailing Address 1502 Morning nDove Circle	Transaction ID: SA11AI.5160
	City State Zip Code Wilmington NC 28403	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Unifi, Inc. Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 07 / 30 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5086
	City State Zip Code Washington DC 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

SUBTOTAL of Receipts This Page (optional)	▶	890.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 24		
	<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

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 08 / 31 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5094
	City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 400.00	

B.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 09 / 30 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5097
	City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 450.00	

C.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5134
	City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 24
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 11 / 30 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5151
	City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 550.00	

B.	Full Name (Last, First, Middle Initial) Cass M. Johnson	Date of Receipt MM / DD / YYYY 12 / 30 / 2009
	Mailing Address 2202 Cathedral Ave. NW	Transaction ID: SA11AI.5246
	City Washington State DC Zip Code 20008	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer NCTO Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 600.00	

C.	Full Name (Last, First, Middle Initial) Naiden Kremenliev	Date of Receipt MM / DD / YYYY 11 / 05 / 2009
	Mailing Address 17 Crescent Avenue	Transaction ID: SA11AI.5155
	City Greenville State SC Zip Code 29805	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Wellstone Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 24
(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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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Reto Kunz

Mailing Address PO Box 811

City State Zip Code
Jefferson GA 30549

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

Name of Employer Occupation
Buhler Yarns Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2009

Transaction ID: SA11AI.5137

Amount of Each Receipt this Period
500.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Carl P. Lehner

Mailing Address 505 Huntington Rd.

City State Zip Code
Greenville SC 29615

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

Name of Employer Occupation
Leigh Fibers Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
08 / 20 / 2009

Transaction ID: SA11AI.5095

Amount of Each Receipt this Period
1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Charles McCoy

Mailing Address 5938 Tarleton Drive

City State Zip Code
Oak Ridge NC 27310

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

Name of Employer Occupation
Unifi, Inc. Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
12 / 10 / 2009

Transaction ID: SA11AI.5164

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Russell W. Mims, Jr.
 Mailing Address PO Box 332
 City Jefferson State GA Zip Code 30549
 Date of Receipt 09 / 01 / 2009
Transaction ID: SA11AI.5100
 Amount of Each Receipt this Period 500.00
 Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Buhler Yarns Occupation VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

B. Full Name (Last, First, Middle Initial)
 Martin J. Moran
 Mailing Address 9420 Ivy Ridge Place
 City Charlotte State NY Zip Code 28269
 Date of Receipt 10 / 01 / 2009
Transaction ID: SA11AI.5140
 Amount of Each Receipt this Period 500.00
 Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radicispandex Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 500.00

C. Full Name (Last, First, Middle Initial)
 Louis D Pannell
 Mailing Address 293 Creek View Dr.
 City Hoschton State GA Zip Code 30548
 Date of Receipt 09 / 01 / 2009
Transaction ID: SA11AI.5099
 Amount of Each Receipt this Period 350.00
 Contribution
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Buhler Quality Yarns Occupation Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 350.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 14 / 24

(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

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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David E Sasso		Date of Receipt	
	Mailing Address 1071 Arizona Bend		M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5136
	Bogart	GA	30622	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer Buhler Quality Yarns		Occupation Manager		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

B.	Full Name (Last, First, Middle Initial) Mark J Sidden		Date of Receipt	
	Mailing Address 1080 Reynolds Price Dr.		M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5166
	Kernersville	NC	27284	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Unifi, Inc.		Occupation Manager		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Ronald L Smith		Date of Receipt	
	Mailing Address 3900 Katie Dr.		M M / D D / Y Y Y Y Y 1 2 / 0 3 / 2 0 0 9	
	City	State	Zip Code	Transaction ID: SA11AI.5159
	Greensboro	NC	27410	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Unifi, Inc.		Occupation Manager		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
James Taylor

Mailing Address 5236 18th St.

City Lubbock State TX Zip Code 79416

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

Name of Employer Plains Cotton Cooperative Assn Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 150.00

Date of Receipt 09 / 24 / 2009
Transaction ID: SA11AI.5102
 Amount of Each Receipt this Period 150.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Joseph T Wyrick

Mailing Address 1684 Willisshire

City Germantown State TN Zip Code 38139

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

Name of Employer EWR Cotton Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt 07 / 06 / 2009
Transaction ID: SA11AI.5087
 Amount of Each Receipt this Period 495.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 645.00

TOTAL This Period (last page this line number only) ► 12685.00

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)

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) BOB ETHERIDGE FOR CONGRESS COMMITTEE	Transaction ID: SB23.5105 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2009	
	Mailing Address POST OFFICE BOX 28001 PO BOX 28001	
City RALEIGH State NC Zip Code 27611	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 09/16/09 BBQ Candidate Name BOB ETHERIDGE FOR CONGRESS COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 02	011 Category/Type	

B. Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM	Transaction ID: SB23.5090 Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2009	
	Mailing Address P.O.Box 2106	
City Montgomery State AL Zip Code 36102	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name BRIGHT FOR CONGRESS.COM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 02	011 Category/Type	

C. Full Name (Last, First, Middle Initial) BUTTERFIELD FOR CONGRESS COMMITTEE	Transaction ID: SB23.5089 Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2009	
	Mailing Address PO Box 2571	
City Wilson State NC Zip Code 27894	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution Candidate Name BUTTERFIELD FOR CONGRESS COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 01	011 Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 17 / 24

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHILDERS, TRAVIS W	Transaction ID: SB23.5132 Date of Disbursement 09 / 16 / 2009
	Mailing Address 201 HIDDEN HILLS	Amount of Each Disbursement this Period 1000.00
	City BOONEVILLE State MS Zip Code 38829	
	Purpose of Disbursement 09/23/09 Breakfast Candidate Name	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) COBLE FOR CONGRESS	Transaction ID: SB23.5104 Date of Disbursement 09 / 14 / 2009
	Mailing Address PO Box 1177 PO Box 1177	Amount of Each Disbursement this Period 1000.00
	City Greensboro State NC Zip Code 27402	
	Purpose of Disbursement 09/16/09 BBQ Candidate Name COBLE FOR CONGRESS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) COLLINS FOR SENATOR	Transaction ID: SB23.5083 Date of Disbursement 07 / 22 / 2009
	Mailing Address PO BOX 1096	Amount of Each Disbursement this Period 1000.00
	City BANGOR State ME Zip Code 04402	
	Purpose of Disbursement 7/22/09 Luncheon Candidate Name COLLINS FOR SENATOR	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**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 18 / 24

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN</p> <p>Mailing Address PO BOX 871</p> <p>City BISMARCK State ND Zip Code 58502</p> <p>Purpose of Disbursement 09/28/09</p> <p>Candidate Name FRIENDS OF BYRON DORGAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5111</p> <p>Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF SHERROD BROWN</p> <p>Mailing Address PO BOX 76187 Suite 800</p> <p>City WASHINGTON State DC Zip Code 20013</p> <p>Purpose of Disbursement 09/23/09 Dinner</p> <p>Candidate Name FRIENDS OF SHERROD BROWN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5109</p> <p>Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FUND FOR AMERICAS FUTURE</p> <p>Mailing Address P.O. Box 1373</p> <p>City Columbia State SC Zip Code 29202</p> <p>Purpose of Disbursement 10/22 Breakfast</p> <p>Candidate Name VIRGINIA FOXX</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5143</p> <p>Date of Disbursement 10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**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)

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) GINGREY FOR CONGRESS	Transaction ID: SB23.5117 Date of Disbursement 09 / 17 / 2009
	Mailing Address PO Box U	Amount of Each Disbursement this Period 1000.00
	City Marietta State GA Zip Code 30060	
	Purpose of Disbursement 09/22/09 Dinner Candidate Name GINGREY FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) GRAVES FOR CONGRESS	Transaction ID: SB23.5122 Date of Disbursement 09 / 16 / 2009
	Mailing Address 2345 Grand, Suite 2400	Amount of Each Disbursement this Period 1000.00
	City Kansas City State MO Zip Code 64108	
	Purpose of Disbursement 09/24/09 Luncheon Candidate Name GRAVES FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) HEATH SHULER FOR CONGRESS	Transaction ID: SB23.5141 Date of Disbursement 10 / 12 / 2009
	Mailing Address PO Box 8446	Amount of Each Disbursement this Period 1500.00
	City Asheville State NC Zip Code 28814	
	Purpose of Disbursement 10/14/09 Luncheon Candidate Name HEATH SHULER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

**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 20 / 24

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) INGLIS FOR CONGRESS COMMITTEE INC.	Transaction ID: SB23.5082 Date of Disbursement
	Mailing Address PO Box 210	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Travelers Rest State SC Zip Code 29690	Amount of Each Disbursement this Period
	Purpose of Disbursement 7/29/09 Breakfast	<input type="text" value="1000.00"/>
	Candidate Name INGLIS FOR CONGRESS COMMITTEE INC.	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INGLIS FOR CONGRESS COMMITTEE INC.	Transaction ID: SB23.5244 Date of Disbursement
	Mailing Address PO Box 210	<input type="text" value="12"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Travelers Rest State SC Zip Code 29690	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name INGLIS FOR CONGRESS COMMITTEE INC.	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 04	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KATHY DAHLKEMPER FOR CONGRESS	Transaction ID: SB23.5106 Date of Disbursement
	Mailing Address PO Box 1045	<input type="text" value="09"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Erie State PA Zip Code 16512	Amount of Each Disbursement this Period
	Purpose of Disbursement 09/17/09 Luncheon	<input type="text" value="1000.00"/>
	Candidate Name KATHY DAHLKEMPER FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS	Transaction ID: SB23.5118 Date of Disbursement																			
	Mailing Address P.O. Box 1530	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	0	9												
	City Biscoe State NC Zip Code 27209	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 09/29/09 Reception	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name KISSELL FOR CONGRESS	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) MICHAUD FOR CONGRESS	Transaction ID: SB23.5243 Date of Disbursement																			
	Mailing Address 213 Lisbon Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	9												
	City Lewiston State ME Zip Code 04240	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 12/08/09 Luncheon	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name MICHAUD FOR CONGRESS	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS INC.	Transaction ID: SB23.5103 Date of Disbursement																			
	Mailing Address POB 640	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	9												
	City Totowa State NJ Zip Code 07511	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 09/10/09 Luncheon	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name PASCRELL FOR CONGRESS INC.	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)

<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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RICHARD BURR COMMITTEE, THE</p> <p>Mailing Address Post Office Box 5928</p> <p>City Winston-Salem State NC Zip Code 27113</p> <p>Purpose of Disbursement 09/30/09 Dinner</p> <p>Candidate Name RICHARD BURR COMMITTEE, THE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5113</p> <p>Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) SPRATT FOR CONGRESS COMMITTEE</p> <p>Mailing Address PO BOX 830</p> <p>City YORK State SC Zip Code 29745</p> <p>Purpose of Disbursement 10/06/09 Reception</p> <p>Candidate Name SPRATT FOR CONGRESS COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5114</p> <p>Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) TIM MURPHY FOR CONGRESS</p> <p>Mailing Address PO Box 24551</p> <p>City Pttsburgh State PA Zip Code 15234</p> <p>Purpose of Disbursement 09/23/09 Breakfast</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5128</p> <p>Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

**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 23 / 24

<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)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

WALTER JONES FOR CONGRESS COMMITTEE (2008)

Transaction ID: SB23.5146

Date of Disbursement

Mailing Address PO BOX 99667

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	9

City State Zip Code
RALEIGH NC 27624

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
11/2 Dinner/Reception

011
Category/ Type

Candidate Name
WALTER JONES FOR CONGRESS COMMITTEE (2008)

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: NC District: 03

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

22500.00

**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 24 / 24

<input 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Parkdale PAC

Mailing Address PO Box 1787

City State Zip Code
Gastonia NC 28053

Purpose of Disbursement
PAC Refund per FEC

Candidate Name
PARKDALE MILLS INC POLITICAL ACTION COMMITTEE

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB28C.5149

Date of Disbursement

^M 1	^M 1	/	^D 0	^D 4	/	^Y 2	^Y 0	^Y 0	^Y 9
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Amount of Each Disbursement this Period

3000.00

010
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00