

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

2007 JUL 31 AM 8:10

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

INMAN MILLS GOOD GOVERNMENT FUND

ADDRESS (number and street) PO BOX 207

Check if different than previously reported. (ACC) INMAN SC 29349

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00142893

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 Year-End 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 (12S)

Election on MM / DD / YYYY in the State of XX

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of XX

5. Covering Period MM / DD / YYYY 01 / 01 / 2007 through MM / DD / YYYY 06 / 30 / 2007

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 JAMES C. PACE, JR.

Signature of Treasurer *James C Pace*

Date MM / DD / YYYY 07 / 25 / 2007

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							
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FEC FORM 3X
Rev. 12/2004

27039492125

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INMAN MILLS GOOD GOVERNMENT FUND

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2007

To:

MM / DD / YYYY
06 / 30 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2007"/>		4593.13
(b) Cash on Hand at Beginning of Reporting Period.....	4593.13	
(c) Total Receipts (from Line 19)	1905.00	1905.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6498.13	6498.13
7. Total Disbursements (from Line 31).....	1600.00	1600.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4898.13	4893.13
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

27039492126

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

INMAN MILLS GOOD GOVERNMENT FUND

Report Covering the Period: From:

MM	DD	YY
01	01	2007

 To:

MM	DD	YY
06	30	2007

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).....
 - (ii) Unitemized
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1905.00

1905.00

1905.00

1905.00

- (b) Political Party Committees
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1905.00

1905.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1905.00

1905.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1905.00

1905.00

27039492127

DETAILED SUMMARY PAGE
of Disbursements

27039492128

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1600.00	1600.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (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 Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1600.00	1600.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1600.00	1600.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

27039492129

**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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
A. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
83.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
83.00

Full Name (Last, First, Middle Initial)
B. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
166.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
83.00

Full Name (Last, First, Middle Initial)
C. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
249.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
83.00

SUBTOTAL of Receipts This Page (optional).....▶

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

27039492130

**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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial) A. DAVID BLACKWELL			Date of Receipt 02 / 01 / 2007
Mailing Address 130 BLACKWELL PLACE			Amount of Each Receipt this Period 30.00
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
Name of Employer INMAN MILLS	Occupation I T MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 30.00	

Full Name (Last, First, Middle Initial) B. DAVID BLACKWELL			Date of Receipt 03 / 31 / 2007
Mailing Address 130 BLACKWELL PLACE			Amount of Each Receipt this Period 30.00
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
Name of Employer INMAN MILLS	Occupation I T MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 60.00	

Full Name (Last, First, Middle Initial) C. DAVID BLACKWELL			Date of Receipt 05 / 31 / 2007
Mailing Address 130 BLACKWELL PLACE			Amount of Each Receipt this Period 30.00
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
Name of Employer INMAN MILLS	Occupation I T MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 90.00	

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

27039492131

**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	OF
	<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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
A. PATRICIA H. ROBBINS

Mailing Address
307 MITCHELL ROAD

City State Zip Code
INMAN SC 29349

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

Name of Employer Occupation
INMAN MILLS CORPORATE SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
24.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
24.00

Full Name (Last, First, Middle Initial)
B. PATRICIA H. ROBBINS

Mailing Address
307 MITCHELL ROAD

City State Zip Code
INMAN SC 29349

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

Name of Employer Occupation
INMAN MILLS CORPORATE SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
24.00

Full Name (Last, First, Middle Initial)
C. PATRICIA H. ROBBINS

Mailing Address
307 MITCHELL ROAD

City State Zip Code
INMAN SC 29349

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

Name of Employer Occupation
INMAN MILLS CORPORATE SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
72.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
24.00

SUBTOTAL of Receipts This Page (optional).....▶

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

27039492132

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

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

FOR LINE NUMBER:		PAGE	OF
(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)
INMAN MILLS GOOD GOVERNMENT FUND

A. WILLIAM E. BOWEN, JR.

Full Name (Last, First, Middle Initial)
Mailing Address
137 MARSHALL BRIDGE DRIVE

City **GREENVILLE** State **SC** Zip Code **29605**

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

Name of Employer **INMAN MILLS** Occupation **VP PURCHASING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
48.00

B. WILLIAM E. BOWEN, JR.

Full Name (Last, First, Middle Initial)
Mailing Address
137 MARSHALL BRIDGE DRIVE

City **GREENVILLE** State **SC** Zip Code **29605**

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

Name of Employer **INMAN MILLS** Occupation **VP PURCHASING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
96.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
48.00

C. WILLIAM E. BOWEN, JR.

Full Name (Last, First, Middle Initial)
Mailing Address
137 MARSHALL BRIDGE DRIVE

City **GREENVILLE** State **SC** Zip Code **29605**

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

Name of Employer **INMAN MILLS** Occupation **VP PURCHASING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
144.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
48.00

SUBTOTAL of Receipts This Page (optional).....▶ **48.00**

TOTAL This Period (last page this line number only).....▶ **48.00**

27039492133

**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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16
				<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
INMAN MILLS GOOD GOVERNMENT FUND

A. BRAD BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address
PO BOX 308

City ENOREE State SC Zip Code 29335

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
40.00

B. BRAD BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address
PO BOX 308

City ENOREE State SC Zip Code 29335

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
80.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
40.00

C. BRAD BURNETT
Full Name (Last, First, Middle Initial)

Mailing Address
PO BOX 308

City ENOREE State SC Zip Code 29335

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
120.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **40.00**

TOTAL This Period (last page this line number only)..... ▶ **40.00**

27039492134

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

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

FOR LINE NUMBER: PAGE OF

(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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
A. ROBERT H. CHAPMAN, III

Mailing Address
543 OTIS BLVD.

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
95.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
95.00

Full Name (Last, First, Middle Initial)
B. ROBERT H. CHAPMAN, III

Mailing Address
543 OTIS BLVD.

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
190.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
95.00

Full Name (Last, First, Middle Initial)
C. ROBERT H. CHAPMAN, III

Mailing Address
543 OTIS BLVD.

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
95.00

SUBTOTAL of Receipts This Page (optional).....▶ **95.00**

TOTAL This Period (last page this line number only).....▶ **95.00**

27039492135

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

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

FOR LINE NUMBER:		PAGE	OF
<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)
INMAN MILLS GOOD GOVERNMENT FUND

27039492136

Full Name (Last, First, Middle Initial) A. NORMAN H. CHAPMAN		Date of Receipt 02 / 01 / 2007
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 78.00
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 78.00
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NORMAN H. CHAPMAN		Date of Receipt 03 / 31 / 2007
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 78.00
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 156.00
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NORMAN H. CHAPMAN		Date of Receipt 05 / 31 / 2007
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 78.00
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 234.00
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	
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	OF
<input 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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial) A. MICHAEL D. ELLIOTT		Date of Receipt MM / DD / YYYY 02 / 01 / 2007
Mailing Address PO BOX 85		Amount of Each Receipt this Period 25.00
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation PERSONNEL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

Full Name (Last, First, Middle Initial) B. MICHAEL D. ELLIOTT		Date of Receipt MM / DD / YYYY 03 / 31 / 2007
Mailing Address PO BOX 85		Amount of Each Receipt this Period 25.00
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation PERSONNEL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) C. MICHAEL D. ELLIOTT		Date of Receipt MM / DD / YYYY 05 / 31 / 2007
Mailing Address PO BOX 85		Amount of Each Receipt this Period 25.00
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation PERSONNEL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

SUBTOTAL of Receipts This Page (optional).....▶

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

27039492137

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

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

FOR LINE NUMBER:		PAGE	OF
<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)
INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
DON FOSTER

Mailing Address
214 SPRINGS LAKE LOOP

City **SIMPSONVILLE** State **SC** Zip Code **29681**

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

Name of Employer **INMAN MILLS** Occupation **CORP. HR DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **30.00**

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
DON FOSTER

Mailing Address
214 SPRINGS LAKE LOOP

City **SIMPSONVILLE** State **SC** Zip Code **29681**

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

Name of Employer **INMAN MILLS** Occupation **CORP. HR DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **60.00**

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
DON FOSTER

Mailing Address
214 SPRINGS LAKE LOOP

City **SIMPSONVILLE** State **SC** Zip Code **29681**

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

Name of Employer **INMAN MILLS** Occupation **CORP. HR DIRECTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **90.00**

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶ **30.00**

TOTAL This Period (last page this line number only).....▶ **30.00**

27039492138

**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	OF
	<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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
A. WILLIAM C. HIGHTOWER, III

Mailing Address
206 THORNHILL DR.

City State Zip Code
SPARTANBURG SC 29301

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

Name of Employer Occupation
INMAN MILLS PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
36.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
36.00

Full Name (Last, First, Middle Initial)
B. WILLIAM C. HIGHTOWER, III

Mailing Address
206 THORNHILL DR.

City State Zip Code
SPARTANBURG SC 29301

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

Name of Employer Occupation
INMAN MILLS PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
72.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
36.00

Full Name (Last, First, Middle Initial)
C. WILLIAM C. HIGHTOWER, III

Mailing Address
206 THORNHILL DR.

City State Zip Code
SPARTANBURG SC 29301

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

Name of Employer Occupation
INMAN MILLS PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
108.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
36.00

SUBTOTAL of Receipts This Page (optional).....▶ **36.00**

TOTAL This Period (last page this line number only).....▶ **36.00**

27039492139

**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	OF
	<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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial) A. JAMES C. PACE, JR.		Date of Receipt MM / DD / YYYY 02 / 01 / 2007
Mailing Address 234 NORTH LAKE EMORY DRIVE		Amount of Each Receipt this Period 44.00
City INMAN	State Zip Code SC 29394	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 44.00
Name of Employer INMAN MILLS	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JAMES C. PACE, JR.		Date of Receipt MM / DD / YYYY 03 / 31 / 2007
Mailing Address 234 NORTH LAKE EMORY DRIVE		Amount of Each Receipt this Period 44.00
City INMAN	State Zip Code SC 29394	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 88.00
Name of Employer INMAN MILLS	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JAMES C. PACE, JR.		Date of Receipt MM / DD / YYYY 05 / 31 / 2007
Mailing Address 234 NORTH LAKE EMORY DRIVE		Amount of Each Receipt this Period 44.00
City INMAN	State Zip Code SC 29394	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 132.00
Name of Employer INMAN MILLS	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	44.00
TOTAL This Period (last page this line number only).....▶	44.00

27039492140

**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	OF
	<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)
INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial)
KEMP SMITH

Mailing Address
PO BOX 187

City **ENOREE** State **SC** Zip Code **29335**

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **34.00**

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
34.00

B. Full Name (Last, First, Middle Initial)
KEMP SMITH

Mailing Address
PO BOX 187

City **ENOREE** State **SC** Zip Code **29335**

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **68.00**

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
34.00

C. Full Name (Last, First, Middle Initial)
KEMP SMITH

Mailing Address
PO BOX 187

City **ENOREE** State **SC** Zip Code **29335**

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

Name of Employer **INMAN MILLS** Occupation **PLANT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **102.00**

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
34.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **34.00**

TOTAL This Period (last page this line number only)..... ▶ **34.00**

27039492141

**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	OF
	<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)
INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name (Last, First, Middle Initial) BEN TRUSLOW		Date of Receipt 02 / 01 / 2007	
Mailing Address 22 COBBLE HILL ROAD			
City FAIRVIEW	State NC	Zip Code 28730	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00	
Name of Employer INMAN MILLS	Occupation SALESMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 42.00		

B. Full Name (Last, First, Middle Initial) BEN TRUSLOW		Date of Receipt 03 / 31 / 2007	
Mailing Address 22 COBBLE HILL ROAD			
City FAIRVIEW	State NC	Zip Code 28730	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00	
Name of Employer INMAN MILLS	Occupation SALESMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 84.00		

C. Full Name (Last, First, Middle Initial) BEN TRUSLOW		Date of Receipt 05 / 31 / 2007	
Mailing Address 22 COBBLE HILL ROAD			
City FAIRVIEW	State NC	Zip Code 28730	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00	
Name of Employer INMAN MILLS	Occupation SALESMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 126.00		

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

27039492142

**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	OF
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
INMAN MILLS GOOD GOVERNMENT FUND

A. MICHAEL KEITH WOODS
Full Name (Last, First, Middle Initial)

Mailing Address
13 A STREET

City INMAN State SC Zip Code 29349

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

Name of Employer INMAN MILLS Occupation QUALITY CONTROL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
26.00

Date of Receipt
02 / 01 / 2007

Amount of Each Receipt this Period
26.00

B. MICHAEL KEITH WOODS
Full Name (Last, First, Middle Initial)

Mailing Address
13 A STREET

City INMAN State SC Zip Code 29349

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

Name of Employer INMAN MILLS Occupation QUALITY CONTROL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
52.00

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
26.00

C. MICHAEL KEITH WOODS
Full Name (Last, First, Middle Initial)

Mailing Address
13 A STREET

City INMAN State SC Zip Code 29349

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

Name of Employer INMAN MILLS Occupation QUALITY CONTROL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
78.00

Date of Receipt
05 / 31 / 2007

Amount of Each Receipt this Period
26.00

SUBTOTAL of Receipts This Page (optional)..... ▶

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

1905.00

27039492143

**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 OF

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

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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. HUNTER FOR PRESIDENT EXPLORATORY COMMITTEE

Date of Disbursement

01 / 25 / 2007

Mailing Address
9340 FUERTE DR. SUITE 302

City State Zip Code
LA MESA CA 91941-4164

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

1100.00

Candidate Name
DUNCAN HUNTER

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. LINDSEY GRAHAM FOR SENATE

Date of Disbursement

03 / 08 / 2007

Mailing Address
PO BOX 5587

City State Zip Code
SPARTANBURG SC 29304

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/
Type

Amount of Each Disbursement this Period

500.00

Candidate Name
LINDSEY GRAHAM

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

 / /

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

1600.00

27039492144

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/26/07
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> Delivery Confirmation™ or Signature Confirmation™ Label	<input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jms
 PREPARER

7/31/07
 DATE PREPARED

27039492145