

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL ROOM

2002 JAN 31 2:10
Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

A L I G E M A N U F A C T U R I N G C O M P A N Y I N C P O L I T I C A L
A C T I O N C O M M I T T E E

ADDRESS (number and street) P O B O X 3 6 9
E A S L E Y S C 2 9 6 4 1 - 0 3 6 9

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C 0 0 1 6 7 2 2 1

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(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)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

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

Primary (12P)

Convention (12C)

General (12G)

Special (12S)

Runoff (12R)

Election on

M M I D D I Y Y Y Y

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M I D D I Y Y Y Y

In the State of

5. Covering Period

0 7 0 1 2 0 0 1

through

1 2 3 1 2 0 0 1

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 JOHN A. ROLLINS

Signature of Treasurer

John A. Rollins

Date

0 1 0 2 2 0 0 2

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 (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Page 2

FEC Form 3X (Revised 1/01)

Write or Type Committee Name Alice Manufacturing Company, Inc.
Political Action Committee

Report Covering the Period: From: 07 01 2001 To: 12 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2001</u>		3,254.48
(b) Cash on Hand at Beginning of Reporting Period	2,254.33	
(c) Total Receipts (from Line 19)	None	None
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2,254.33	3,254.48
7. Total Disbursements (from Line 30)	1,000.00	2,000.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1,254.33	1,254.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	None	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	None	

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 Disbursements

FEC Form 3X (Revised 1/01)

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		1.5
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		1.5
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	2,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (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. Total Disbursements (add Line 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	1,000.00	2,000.85
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	1,000.00	2,000.15

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	None	None
33. Total Contribution Refunds (from Line 28(d))	None	None
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	None	None
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	None	1.5
36. Offsets to Operating Expenditures (from Line 15, page 3)	None	None
37. Net Operating Expenditures (subtract Line 36 from Line 35)	None	1.5

**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 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				

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) **Alice manufacturing Company, Inc.
Political Action Committee**

A.

Full Name (Last, First, Middle Initial) **Lindsey Graham for Senate**

Date of Disbursement
M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 1

Mailing Address
PO Box 1155

City **Seneca, S.C. 29679** State Zip Code

Purpose of Disbursement **Lindsey Graham Campaign Contribution** Category/Type **0 1 1**

Candidate Name **Lindsey Graham**

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

State: **S.C.** District:

Amount of Each Disbursement this Period
1,000.00

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement
M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

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

State: District:

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement
M M / D D / Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

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

State: District:


Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	1,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 1/3/02
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	1/31/02 DATE PREPARED