

# 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) 2500 LOWELL ROAD  
 Check if different than previously reported. (ACC)  
GASTONIA NC 28054

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 2008 through 09 30 2008

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 10 13 2008

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)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		6326.09
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	53074.75									
(c) Total Receipts (from Line 19) .....	4095.00	73657.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	57169.75	79983.09								
7. Total Disbursements (from Line 31) .....	15269.28	38082.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	41900.47	41900.47								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	3230.00	60592.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	865.00	1065.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4095.00	61657.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4095.00	73657.00
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)) .....	4095.00	73657.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4095.00	73657.00

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	15000.00	37400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	269.28	682.62
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))..	15269.28	38082.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15269.28	38082.62

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	4095.00	73657.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4095.00	73657.00
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 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark C Berry		Date of Receipt
	Mailing Address 2709 Bloomtown Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2008
	City	State	Zip Code
	East Bend	NC	27108
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4818
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles R Biggs		Date of Receipt
	Mailing Address 102 Crest St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2008
	City	State	Zip Code
	Mayodan	NC	27027
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4810
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Kent Castevens		Date of Receipt
	Mailing Address 6032 Jay Bird Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 11 / 2008
	City	State	Zip Code
	Hamptonville	NC	27020
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4802
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 100.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 7 / 31
	<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**

<b>A.</b>	Full Name (Last, First, Middle Initial) Lonnie B Chestnut		Date of Receipt MM / DD / YYYY 09 / 11 / 2008		
	Mailing Address 8925 Magennis Grove Court		<b>Transaction ID:</b> SA11AI.4852		
	City Charlotte	State NC	Zip Code 28216	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Unifi, Inc.	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 20.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Bob Cottle		Date of Receipt MM / DD / YYYY 09 / 11 / 2008		
	Mailing Address 8400 Lismore St.		<b>Transaction ID:</b> SA11AI.4808		
	City Clemmons	State NC	Zip Code 27012	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Unifi, Inc.	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Carlene A Davis		Date of Receipt MM / DD / YYYY 09 / 11 / 2008		
	Mailing Address 5025 Courtney Huntsville Rd.		<b>Transaction ID:</b> SA11AI.4762		
	City Yadkinville	State NC	Zip Code 27055	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Unifi, Inc.	Occupation Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.00
<b>TOTAL</b> 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 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Craig T Dickens		Date of Receipt	
	Mailing Address 390 Water Works Rd.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4806
	Reidsville	NC	27320	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		25.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Eugene Doss		Date of Receipt	
	Mailing Address 1224 Village Rd.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4744
	Yadkinville	NC	27055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Roy Gibson		Date of Receipt	
	Mailing Address 122 Prince Ave.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4794
	State Rd.	NC	28676	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		25.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> 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 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) John F Glenn	Date of Receipt
	Mailing Address 2487 Ascot Dr.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Florence SC 29501	<b>Transaction ID:</b> SA11AI.4828
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 50.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 50.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher G Groce	Date of Receipt
	Mailing Address 5745 E. Old US 421 Hwy.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code East Bend NC 27018	<b>Transaction ID:</b> SA11AI.4790
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 20.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 20.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Edward Y Hardy	Date of Receipt
	Mailing Address Lime Rock Rd.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Yadkinville NC 27055	<b>Transaction ID:</b> SA11AI.4792
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 25.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 25.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 95.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 31  
(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)  
 Alan Hensley  
 Mailing Address 324 Cassandra Rd.  
 City Madison State NC Zip Code 27025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unifi, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00  
 Date of Receipt 09 / 11 / 2008  
**Transaction ID: SA11AI.4832**  
 Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
 Darrell Hobson  
 Mailing Address 3005 Lime Rock Rd.  
 City Boonville State NC Zip Code 27011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unifi, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00  
 Date of Receipt 09 / 11 / 2008  
**Transaction ID: SA11AI.4846**  
 Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
 Leonard Horsley  
 Mailing Address 163 Legrande Dr.  
 City Eden State NC Zip Code 27288  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unifi, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00  
 Date of Receipt 09 / 11 / 2008  
**Transaction ID: SA11AI.4800**  
 Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00  
**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 / 31  
(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**

<p><b>A.</b> Full Name (Last, First, Middle Initial) David N Hudson</p> <p>Mailing Address 1561 New Garden Rd. Apt 3E</p> <p>City Greensboro State NC Zip Code 27410</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Unifi, Inc. Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">75.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 11 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4766</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">75.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Charlie R Hutchens</p> <p>Mailing Address 2848 Indian Heaps Rd.</p> <p>City East Bend State NC Zip Code 27018</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Unifi, Inc. Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 11 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4798</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Edmund Ingle</p> <p>Mailing Address 129 Cascade Ave.</p> <p>City Winston Salem State NC Zip Code 27127</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Unifi, Inc. Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 11 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.4742</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">200.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 12 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
 Roger Ireland  
 Mailing Address PO Box 1127  
 City State Zip Code  
 Yadkinville ND 27055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Unifi, Inc. Manager  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 30.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2008  
**Transaction ID: SA11AI.4786**  
 Amount of Each Receipt this Period  
 30.00

**B.** Full Name (Last, First, Middle Initial)  
 Michael C Jester  
 Mailing Address 1407 Buttonwood Court  
 City State Zip Code  
 High Point NC 27265  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Unifi, Inc. Manager  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2008  
**Transaction ID: SA11AI.4774**  
 Amount of Each Receipt this Period  
 50.00

**C.** Full Name (Last, First, Middle Initial)  
 Cass M. Johnson  
 Mailing Address 2202 Cathedral Ave.  
 NW  
 City State Zip Code  
 Washington DC 20008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 NCTO President  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2008  
**Transaction ID: SA11AI.4723**  
 Amount of Each Receipt this Period  
 50.00  
 pay roll deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► **130.00**

**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 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
 Cass M. Johnson  
 Mailing Address 2202 Cathedral Ave.  
 NW  
 City Washington State DC Zip Code 20008  
 Date of Receipt 08 / 29 / 2008  
**Transaction ID:** SA11AI.4724  
 Amount of Each Receipt this Period 50.00  
 pay roll deduction  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NCTO Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

**B.** Full Name (Last, First, Middle Initial)  
 Jane Johnson  
 Mailing Address 508 Woodland Dr.  
 City Greensboro State NC Zip Code 27408  
 Date of Receipt 09 / 11 / 2008  
**Transaction ID:** SA11AI.4752  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unifi, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

**C.** Full Name (Last, First, Middle Initial)  
 Clayton L Jones  
 Mailing Address 1472 Sheppard Mill Rd.  
 City Danbury State NC Zip Code 27016  
 Date of Receipt 09 / 11 / 2008  
**Transaction ID:** SA11AI.4826  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Unifi, Inc. Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 200.00  
**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 14 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dennis M Joyner		Date of Receipt	
	Mailing Address 5357 Redman Rd.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4784
	Rocky Mount	NC	27803	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		30.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		30.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott Kendrick		Date of Receipt	
	Mailing Address 431 Shadydale Ct.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4756
	Fort Mill	SC	29715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Steven W Kingsbury		Date of Receipt	
	Mailing Address 4202 Joseph Hoskins Rd.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4840
	Summerfield	NC	27358	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	180.00
<b>TOTAL</b> 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 15 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) David L Mancina	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 7405 Summerwind Court	<b>Transaction ID:</b> SA11AI.4844
	City State Zip Code Summerfield NC 27358	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ronald L Manuel	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 124 Amos Rd.	<b>Transaction ID:</b> SA11AI.4848
	City State Zip Code Madison NC 27025	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Gwyn Matthews	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 1940 Falcon Rd.	<b>Transaction ID:</b> SA11AI.4746
	City State Zip Code East Bend NC 27018	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> 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 16 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) H. G. McCall		Date of Receipt	
	Mailing Address 1233 Onslow Dr.		M M / D D / Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4830
	Greensboro	NC	27408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		50.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Greg S Miller		Date of Receipt	
	Mailing Address 3748 Dal Rd.		M M / D D / Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4812
	East Bend	NC	27018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		25.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John C Moon		Date of Receipt	
	Mailing Address 3105 S. Jim Minor Rd.		M M / D D / Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4780
	Haw River	NC	27258	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		35.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		35.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	110.00
<b>TOTAL</b> 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 17 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Bradley Nations		Date of Receipt
	Mailing Address 140 Beaver Run		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Eden	NC	27288
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4764
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 60.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Norman		Date of Receipt
	Mailing Address PO Box 1491		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Yadkinville	NC	27055
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4814
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00

<b>C.</b>	Full Name (Last, First, Middle Initial) David D Page		Date of Receipt
	Mailing Address PO Box 26612		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Winston Salem	NC	27114
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.4768
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 185.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 18 / 31		
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Cathy C Pardue	Date of Receipt
	Mailing Address 2721 Rolling Hill Rd.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Yadkinville NC 27055	<b>Transaction ID:</b> SA11AI.4816
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 50.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 50.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frankie L Peele	Date of Receipt
	Mailing Address 5008 Korem Dr.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Greensboro NC 27409	<b>Transaction ID:</b> SA11AI.4782
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 30.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 30.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bobby N Pruitt	Date of Receipt
	Mailing Address 181 Cross Key Rd.	<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City State Zip Code Reidsville NC 27320	<b>Transaction ID:</b> SA11AI.4770
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 40.00
	Name of Employer Unifi, Inc. Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 40.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 120.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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 19 / 31
	<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**

<b>A.</b>	Full Name (Last, First, Middle Initial) Jayron J Pyrtle	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 121 Waterside Trail	<b>Transaction ID:</b> SA11AI.4772
	City State Zip Code Reidsville NC 27320	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Johnny Reavis	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 767 Newington Dr.	<b>Transaction ID:</b> SA11AI.4824
	City State Zip Code Clemmons NC 27012	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) James Reid	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 3814 Brandt Lake Court	<b>Transaction ID:</b> SA11AI.4804
	City State Zip Code Greensboro NC 27410	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Unifi, Inc. Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>125.00</b>
<b>TOTAL</b> 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 20 / 31  
(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)  
Herbert Salley, Jr.

Mailing Address 4385 Winterberry Ridge Ct.

City Winston Salem State NC Zip Code 27103

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

Name of Employer Unifi, Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt: 09 / 11 / 2008  
**Transaction ID:** SA11AI.4854  
 Amount of Each Receipt this Period: 25.00

**B.** Full Name (Last, First, Middle Initial)  
Byron Sharron

Mailing Address 205 Charisma Lane

City Lewisville State NC Zip Code 27023

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

Name of Employer Unifi, Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt: 09 / 11 / 2008  
**Transaction ID:** SA11AI.4820  
 Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
Barry Shore

Mailing Address 2528 Woodruff Rd.

City Boonville State NC Zip Code 27011

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

Name of Employer Unifi, Inc. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt: 09 / 11 / 2008  
**Transaction ID:** SA11AI.4760  
 Amount of Each Receipt this Period: 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00

**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 21 / 31
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark J Sidden		Date of Receipt
	Mailing Address 1080 Reynolds Price Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Kernersville	NC	27284
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4836
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Ben Simons		Date of Receipt
	Mailing Address 102 Byrnwood Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Jamestown	NC	27282
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4748
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Ronald L Smith		Date of Receipt
	Mailing Address 3900 Katie Dr.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 11 / 2008
	City	State	Zip Code
	Greensboro	NC	27410
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.4842
Name of Employer Unifi, Inc.		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 31
	(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

<b>A.</b>	Full Name (Last, First, Middle Initial) Danny R Snyder		Date of Receipt	
	Mailing Address 1126 Stone Mill Rd.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4850
	Stoneville	NC	27048	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		25.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert Snyder		Date of Receipt	
	Mailing Address 1049 Fairway Dr.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4758
	Yadkinville	ND	27055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		100.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		100.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) John F Stone		Date of Receipt	
	Mailing Address 491 Ashley Loop		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4778
	Eden	NC	27288	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		35.00	
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		35.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	160.00
<b>TOTAL</b> 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 23 / 31  
(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)  
Corey K Tate

Mailing Address 5021 Robertson Farm Rd.

City State Zip Code  
Kernersville NC 27284

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

Name of Employer Occupation  
Unifi, Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2008

**Transaction ID:** SA11AI.4776

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Michelle Turner

Mailing Address 2441 Midsalem Dr.

City State Zip Code  
Winston Salem NC 27103

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

Name of Employer Occupation  
Unifi, Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2008

**Transaction ID:** SA11AI.4822

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
J. A. Westbrook

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
Unifi, Inc. Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 11 / 2008

**Transaction ID:** SA11AI.4838

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **105.00**

**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 24 / 31		
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael H Whitaker		Date of Receipt	
	Mailing Address 620 Coolidge Street		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4796
	Yadkinville	NC	27055	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		25.00		
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Wilkins		Date of Receipt	
	Mailing Address 139 Lord Godolphins Place		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4788
	Madison	NC	27025	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		25.00		
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Smith Williams		Date of Receipt	
	Mailing Address 2204 Old US Highway 421 E.		M M / D D / Y Y Y Y Y 09 / 11 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4754
	Yadkinville	NC	20755	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		100.00		
Name of Employer Unifi, Inc.		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> 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 25 / 31	
	(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"/> 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) Jiakang Xia		Date of Receipt																					
Mailing Address 5512-A Lardo Ct.		<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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	1		2	0	0	8														
City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4750																				
Richmond	VA	23228	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	<input type="text" value="100.00"/>																				
Name of Employer Unifi, Inc.	Occupation Manager																						
Receipt For:	Aggregate Year-to-Date ▼																						
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="100.00"/>																						
<input type="checkbox"/> Other (specify) ▼																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="3230.00"/>

**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) Barrett for Congress	Transaction ID: SB23.4709 Date of Disbursement 07 / 18 / 2008
	Mailing Address PO Box 869	Amount of Each Disbursement this Period 1000.00
	City Westminster State SC Zip Code 29693	
	Purpose of Disbursement	001 Category/ Type
	Candidate Name Barrett for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Barrett for Congress	Transaction ID: SB23.4725 Date of Disbursement 08 / 18 / 2008
	Mailing Address PO Box 869	Amount of Each Disbursement this Period 1000.00
	City Westminster State SC Zip Code 29693	
	Purpose of Disbursement	001 Category/ Type
	Candidate Name Barrett for Congress	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS	Transaction ID: SB23.4735 Date of Disbursement 09 / 16 / 2008
	Mailing Address 1700 W. Market St. #155	Amount of Each Disbursement this Period 1000.00
	City Akron State OH Zip Code 44313	
	Purpose of Disbursement 9/26/2008 Event	007 Category/ Type
	Candidate Name BETTY SUTTON FOR CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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) <b>BUTTERFIELD FOR CONGRESS COMMITTEE</b>	<b>Transaction ID:</b> SB23.4719
	Mailing Address <b>PO Box 2571</b>	Date of Disbursement MM / DD / YYYY 07 / 18 / 2008
	City <b>Wilson</b> State <b>NC</b> Zip Code <b>27894</b>	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	001 Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>NC</b> District: <b>01</b>	

B.	Full Name (Last, First, Middle Initial) <b>COBLE FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.4732
	Mailing Address <b>PO Box 1177 PO Box 1177</b>	Date of Disbursement MM / DD / YYYY 09 / 02 / 2008
	City <b>Greensboro</b> State <b>NC</b> Zip Code <b>27402</b>	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	001 Category/ Type
	Candidate Name <b>COBLE FOR CONGRESS</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>NC</b> District: <b>06</b>	

C.	Full Name (Last, First, Middle Initial) <b>COMMITTEE FOR RESTORING CONFIDENCE IN GOVERNMENT PAC</b>	<b>Transaction ID:</b> SB23.4715
	Mailing Address <b>499 S CAPITOL ST SW SUITE 404</b>	Date of Disbursement MM / DD / YYYY 07 / 18 / 2008
	City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name <b>Artur1084 Davis</b>	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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

<b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN <hr/> Mailing Address PO Box 12567 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement 9/17/2008 Event Candidate Name CAROLINA MAJORITY PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB23.4739 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	<input type="text" value="007"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) HAYES FOR CONGRESS <hr/> Mailing Address Post Office Box 2000 <hr/> City Concord State NC Zip Code 28026 <hr/> Purpose of Disbursement 9/24 event Candidate Name HAYES FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 08	<b>Transaction ID:</b> SB23.4733 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="007"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) JOE WILSON FOR CONGRESS COMMITTEE <hr/> Mailing Address Post Office Box 2145 <hr/> City West Columbia State SC Zip Code 29171 <hr/> Purpose of Disbursement Candidate Name JOE WILSON FOR CONGRESS COMMITTEE <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SC District: 02	<b>Transaction ID:</b> SB23.4710 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="001"/> Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

<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><b>A.</b> Full Name (Last, First, Middle Initial) WALTER B JONES</p> <p>Mailing Address PO BOX 668</p> <p>City FARMVILLE State NC Zip Code 27828</p> <p>Purpose of Disbursement 9/12 event</p> <p>Candidate Name WALTER B JONES</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4727</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>007 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Donald Manzullo</p> <p>Mailing Address 792 E Lightsville Rd</p> <p>City Egan State IL Zip Code 61047</p> <p>Purpose of Disbursement</p> <p>Candidate Name Donald Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4721</p> <p>Date of Disbursement 07 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MICHAUD FOR CONGRESS</p> <p>Mailing Address 213 Lisbon Street</p> <p>City Lewiston State ME Zip Code 04240</p> <p>Purpose of Disbursement 9/25/2008 Event</p> <p>Candidate Name MICHAUD FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.4734</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>007 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)

PAGE 30 / 31

<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

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) Miller for Congress	Transaction ID: SB23.4712 Date of Disbursement 07 / 18 / 2008
	Mailing Address P.O. Box 10322	Amount of Each Disbursement this Period 1000.00
	City Raleigh State NC Zip Code 27605	
	Purpose of Disbursement	Category/Type
	Candidate Name BRAD MILLER FOR UNITED STATES CONGRESS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SPRATT FOR CONGRESS COMMITTEE	Transaction ID: SB23.4738 Date of Disbursement 09 / 16 / 2008
	Mailing Address PO BOX 830	Amount of Each Disbursement this Period 1500.00
	City YORK State SC Zip Code 29745	
	Purpose of Disbursement 9/17/2008 Event	Category/Type 007
	Candidate Name SPRATT FOR CONGRESS COMMITTEE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2500.00

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

15000.00

**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)

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<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 checked="" 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)

Capitol Hill Club

Mailing Address 300 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
9/12 Event

Candidate Name

007  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.4728

Date of Disbursement

09 / 05 / 2008

Amount of Each Disbursement this Period

269.28

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

269.28

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

269.28