

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

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

2. **FEC IDENTIFICATION NUMBER** C00405555
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2011 through 06 30 2011

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 Robin L Haynes
Signature of Treasurer Electronically Filed by Robin L Haynes Date 07 31 2011

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		77749.26
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	77749.26									
(c) Total Receipts (from Line 19)	36360.00	36360.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	114109.26	114109.26								
7. Total Disbursements (from Line 31)	43278.15	43278.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70831.11	70831.11								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	28850.00	28850.00
(ii) Unitemized	5260.00	5260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	34110.00	34110.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2250.00	2250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	36360.00	36360.00
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))	36360.00	36360.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36360.00	36360.00

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.....	1228.15	1228.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1228.15	1228.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	42050.00	42050.00
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.....	0.00	0.00
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))..	43278.15	43278.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43278.15	43278.15

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)	36360.00	36360.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36360.00	36360.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1228.15	1228.15
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1228.15	1228.15

**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 / 37
	<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) Meredith B. Allen	Date of Receipt MM / DD / YYYY 03 / 11 / 2011
	Mailing Address 1100 Grand Blvd.	Transaction ID: SA11AI.5764
	City State Zip Code Greenwood MS 38930	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Staple Cotton Cooperative Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Frederick W. Barrier	Date of Receipt MM / DD / YYYY 03 / 11 / 2011
	Mailing Address 101 Dogwood Circle	Transaction ID: SA11AI.5765
	City State Zip Code Indianola MS 38751	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Staplcotr Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Harry R Byrd	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address Golden Oak Dr.	Transaction ID: SA11AI.5812
	City State Zip Code Gatesville NC 28625	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation Schneider Mills VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2900.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 37
(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)
David C. Camp

Mailing Address 2703 West River Road Ext.

City Greenwood State MS Zip Code 38930

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

Name of Employer Staplcotn Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2011

Transaction ID: SA11AI.5767

Amount of Each Receipt this Period 300.00

Contribution

B.

Full Name (Last, First, Middle Initial)
J. B. Carter

Mailing Address 1354 Dove Creek Ct.

City Gastonia State NC Zip Code 28054

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

Name of Employer A B Carter Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 18 / 2011

Transaction ID: SA11AI.5780

Amount of Each Receipt this Period 375.00

C.

Full Name (Last, First, Middle Initial)
Rick Craig

Mailing Address 2324 Kendrick Estates Dr.

City Gastonia State NC Zip Code 28056

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

Name of Employer A B Carter Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 18 / 2011

Transaction ID: SA11AI.5779

Amount of Each Receipt this Period 375.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 8 / 37
(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

<p>A. Full Name (Last, First, Middle Initial) Steven L Ellington</p> <p>Mailing Address 300 Country Club Dr.</p> <p>City Greensboro State NC Zip Code 27408</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Glen Raven 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 ▼ 1000.00</p>	<p>Date of Receipt 03 / 21 / 2011</p> <p>Transaction ID: SA11AI.5784</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Allen Gant, Jr.</p> <p>Mailing Address 1022 W. Davis St.</p> <p>City Burlington State NC Zip Code 27215</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Glen Raven, Inc. Occupation: President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 03 / 21 / 2011</p> <p>Transaction ID: SA11AI.5783</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Keith Harnage</p> <p>Mailing Address 19 Shearwater Dr.</p> <p>City Fortson State GA Zip Code 31808</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Swift Spinning Occupation: VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1250.00</p>	<p>Date of Receipt 03 / 09 / 2011</p> <p>Transaction ID: SA11AI.5761</p> <p>Amount of Each Receipt this Period 1250.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 37
	<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) Charles S Heilig, III	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 1713 Clubview Circle	Transaction ID: SA11AI.5821
	City State Zip Code Gastonia NC 28056	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Parkdale Mills	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Harold W Hill	Date of Receipt MM / DD / YYYY 03 / 21 / 2011
	Mailing Address 2911 Forestdale Dr.	Transaction ID: SA11AI.5785
	City State Zip Code Burlington NC 27215	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Glen Raven	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Owen J. Hodges, III	Date of Receipt MM / DD / YYYY 03 / 09 / 2011
	Mailing Address 702 Mobley Rd.	Transaction ID: SA11AI.5760
	City State Zip Code Columbus GA 31904	Amount of Each Receipt this Period 1250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Swift Spinning	Occupation President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	4250.00
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 10 / 37
(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)
Detlef Jaekel

Mailing Address 12606 Ryddell Ct.

City State Zip Code
Huntersville NC 28078

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

Name of Employer Occupation
McMichael Mills Management

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.5816

Amount of Each Receipt this Period
1000.00

B. 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) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.5889

Amount of Each Receipt this Period
50.00

Payroll Contribution

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) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	1	1

Transaction ID: SA11AI.5890

Amount of Each Receipt this Period
50.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 11 / 37
	<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) Duke Kimbrell	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 3662 Sherwood Circle	Transaction ID: SA11AI.5826
	City State Zip Code Gastonia NC 28056	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Parkdale Mills Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2000.00	

B.	Full Name (Last, First, Middle Initial) Jon Marr	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 3667 St. Andrews Lane	Transaction ID: SA11AI.5825
	City State Zip Code Gastonia NC 28056	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Parkdale Occupation Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) E. Smyth McKissick, III	Date of Receipt MM / DD / YYYY 03 / 31 / 2011
	Mailing Address 1611 Parkins Mill Rd.	Transaction ID: SA11AI.5811
	City State Zip Code Greenville SC 29607	Amount of Each Receipt this Period 3500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Alice Mfg. Company Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 3500.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
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 / 37
(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)
John Nims

Mailing Address 189 Mill Pond Rd.

City State Zip Code
Lake Wylie SC 29710

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

Name of Employer Occupation
Parkdale Mills VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2011

Transaction ID: SA11AI.5824

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Paul O'Day

Mailing Address 8261 Private Lane

City State Zip Code
Annandale VA 22003

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

Name of Employer Occupation
American Fiber Mfrs Assn President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2011

Transaction ID: SA11AI.5818

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Carl Oehmig

Mailing Address 108 Sunset Circle Unit 204

City State Zip Code
Greensboro NC 27408

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

Name of Employer Occupation
Glen Raven, Inc. Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 21 / 2011

Transaction ID: SA11AI.5786

Amount of Each Receipt this Period
1000.00

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

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

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

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

FOR LINE NUMBER: PAGE 14 / 37
(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)
Henry N. Reichle, Jr.
Mailing Address 809 Parsons Avenue
City Greenwood State MS Zip Code 38930
FEC ID number of contributing federal political committee. **C**
Name of Employer Staplcotn Occupation Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 11 / 2011
Transaction ID: SA11AI.5769
Amount of Each Receipt this Period 300.00
Contribution

B. Full Name (Last, First, Middle Initial)
Derek Tad ROGERS
Mailing Address 4001 Colton Ridge Dr.
City Indian Trail State NC Zip Code 28079
FEC ID number of contributing federal political committee. **C**
Name of Employer Parkdale Occupation Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 31 / 2011
Transaction ID: SA11AI.5829
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Gary Smith
Mailing Address 3803 Brandywine Dr.
City Greensboro State NC Zip Code 27410
FEC ID number of contributing federal political committee. **C**
Name of Employer Glen Raven Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 21 / 2011
Transaction ID: SA11AI.5789
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1800.00
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 15 / 37
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Anthony Thomas		Date of Receipt	
	Mailing Address 758 Calle Del Resplandor		M M / D D / Y Y Y Y Y 03 / 31 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.5830
	Santa Fe	NM	87505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Parkdale		Occupation Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Lee Thomas		Date of Receipt	
	Mailing Address 3240 Candlewick Way		M M / D D / Y Y Y Y Y 03 / 31 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.5832
	Gastonia	NC	28056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Parkdale		Occupation Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Carl E Wallace, Jr		Date of Receipt	
	Mailing Address 2604 Saddle Club Rd.		M M / D D / Y Y Y Y Y 03 / 21 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.5790
	Burlington	NC	27215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Glen Raven		Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
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 16 / 37	
	(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) Anderson D Warlick		Date of Receipt	
	Mailing Address 950 Cloister Drive		M M / D D / Y Y Y Y 03 / 31 / 2011	
	City	State	Zip Code	Transaction ID: SA11AI.5820
	Gastonia	NC	28056	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		2000.00	
Name of Employer Parkdale Mills		Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	28850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 37
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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) DUKE ENERGY CORPORATION PAC		Date of Receipt
Mailing Address 550 SOUTH TRYON STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 03 / 31 / 2011
City	State	Zip Code
CHARLOTTE	NC	28202
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5814
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 1000.00
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 1000.00	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) INMAN MILLS GOOD GOVERNMENT FUND		Date of Receipt
Mailing Address P O BOX 207		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y Y 03 / 31 / 2011
City	State	Zip Code
INMAN	SC	29349
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5813
C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text"/> 1250.00
Occupation		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 1250.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2250.00
TOTAL This Period (last page this line number only)	<input type="text"/> 2250.00

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 checked="" 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)
NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) International Minute Press	Transaction ID: SB21B.5728 Date of Disbursement
	Mailing Address 495 E. Long Ave.	<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
	City Gastonia State NC Zip Code 28054	Amount of Each Disbursement this Period
	Purpose of Disbursement Print Annual PAC Report	<input type="text" value="300.69"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) International Minute Press	Transaction ID: SB21B.5859 Date of Disbursement
	Mailing Address 495 E. Long Ave.	<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Gastonia State NC Zip Code 28054	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing PAC Awards	<input type="text" value="215.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Marco	Transaction ID: SB21B.5887 Date of Disbursement
	Mailing Address 2640 Commerce Drive	<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City Harrisburg State PA Zip Code 17110	Amount of Each Disbursement this Period
	Purpose of Disbursement Plaques for awards	<input type="text" value="362.47"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

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 19 / 37

<input checked="" 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)

NATIONAL COUNCIL OF TEXTILE ORGANIZATIONS INC POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd, #300

City McLean State VA Zip Code 22102

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5851

Date of Disbursement

05 / 02 / 2011

Amount of Each Disbursement this Period

27.10

B.

Full Name (Last, First, Middle Initial)

Sage Payment Solutions

Mailing Address 1750 Old Meadow Rd, #300

City McLean State VA Zip Code 22102

Purpose of Disbursement
Credit Card Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5857

Date of Disbursement

06 / 02 / 2011

Amount of Each Disbursement this Period

27.10

SUBTOTAL of Disbursements This Page (optional)

54.20

TOTAL This Period (last page this line number only)

932.86

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) JOHN J. BARROW	Transaction ID: SB23.5703 Date of Disbursement 01 / 18 / 2011
	Mailing Address PO BOX 8166	Amount of Each Disbursement this Period 1000.00
	City SAVANNAH State GA Zip Code 31412	
	Purpose of Disbursement 2/16 Luncheon Candidate Name FRIENDS OF JOHN BARROW	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 12	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SANFORD D JR. BISHOP	Transaction ID: SB23.5724 Date of Disbursement 02 / 23 / 2011
	Mailing Address 1909 Devon Drive	Amount of Each Disbursement this Period 500.00
	City Albany State GA Zip Code 31707	
	Purpose of Disbursement 3/15 Luncheon Candidate Name SANFORD D. BISHOP, JR. FOR CONGRESS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MO BROOKS	Transaction ID: SB23.5695 Date of Disbursement 01 / 18 / 2011
	Mailing Address 7610 FOXFIRE DR.	Amount of Each Disbursement this Period 1000.00
	City HUNTSVILLE State AL Zip Code 35802	
	Purpose of Disbursement 1/25 Luncheon Candidate Name MO BROOKS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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)	

**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) SHERROD BROWN	Transaction ID: SB23.5708 Date of Disbursement 01 / 31 / 2011
	Mailing Address 37905 HERON LN	
	City AVON LAKE State OH Zip Code 44011	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name FRIENDS OF SHERROD BROWN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SHERROD BROWN	Transaction ID: SB23.5725 Date of Disbursement 02 / 23 / 2011
	Mailing Address 37905 HERON LN	
	City AVON LAKE State OH Zip Code 44011	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 3/15 Dinner Candidate Name FRIENDS OF SHERROD BROWN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Burr, Richard	Transaction ID: SB23.5864 Date of Disbursement 06 / 08 / 2011
	Mailing Address POST OFFICE BOX 5928	
	City WINSTON-SALEM State NC Zip Code 27113	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name NEXT CENTURY FUND Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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) G K BUTTERFIELD	Transaction ID: SB23.5751 Date of Disbursement																			
	Mailing Address 2407 BEL AIR AVENUE	<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>3</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	8		2	0	1	1												
	City WILSON State NC Zip Code 27893	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 3/30 Breakfast	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name BUTTERFIELD FOR CONGRESS COMMITTEE	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CARNEY FOR CONGRESS	Transaction ID: SB23.5873 Date of Disbursement																			
	Mailing Address P.O. Box A	<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>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	8		2	0	1	1												
	City Clarks Summit State PA Zip Code 18411	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 6/22 Reception	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name CARNEY FOR CONGRESS	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JAMES E CLYBURN	Transaction ID: SB23.5854 Date of Disbursement																			
	Mailing Address 501 Juniper Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	1	1												
	City Columbia State SC Zip Code 29203	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 6/15 Breakfast	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name FRIENDS OF JIM CLYBURN	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00
2000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 37

<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) JOHN HOWARD COBLE	Transaction ID: SB23.5748 Date of Disbursement
	Mailing Address 5741-L BRAMBLEGATE ROAD	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Greensboro State NC Zip Code 27409	Amount of Each Disbursement this Period
	Purpose of Disbursement 3/15 Birthday Reception	<input type="text" value="500.00"/>
	Candidate Name COBLE FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JEFF DUNCAN	Transaction ID: SB23.5693 Date of Disbursement
	Mailing Address PO BOX 732	<input type="text" value="01"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City CLINTON State SC Zip Code 29325	Amount of Each Disbursement this Period
	Purpose of Disbursement 1/25 Breakfast	<input type="text" value="1000.00"/>
	Candidate Name JEFF DUNCAN FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JEFF DUNCAN	Transaction ID: SB23.5721 Date of Disbursement
	Mailing Address PO BOX 732	<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City CLINTON State SC Zip Code 29325	Amount of Each Disbursement this Period
	Purpose of Disbursement 2/16 Breakfast	<input type="text" value="500.00"/>
	Candidate Name JEFF DUNCAN FOR CONGRESS	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) JEFF DUNCAN	Transaction ID: SB23.5871 Date of Disbursement 06 / 08 / 2011
	Mailing Address PO BOX 732	
	City CLINTON State SC Zip Code 29325	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 6/21 Reception Candidate Name DUNCAN FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02	011 Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) RENEE JACISIN ELLMERS	Transaction ID: SB23.5698 Date of Disbursement 01 / 18 / 2011
	Mailing Address 122 KINGSWAY DR	
	City DUNN State NC Zip Code 28334	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 1/26 Luncheon Candidate Name RENEE ELLMERS FOR CONGRESS COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	011 Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) RENEE JACISIN ELLMERS	Transaction ID: SB23.5723 Date of Disbursement 02 / 23 / 2011
	Mailing Address 122 KINGSWAY DR	
	City DUNN State NC Zip Code 28334	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Contribution Candidate Name RENEE ELLMERS FOR CONGRESS COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	011 Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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)	

**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) RENEE JACISIN ELLMERS	Transaction ID: SB23.5881 Date of Disbursement																			
	Mailing Address 122 KINGSWAY DR	<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>6</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	1		2	0	1	1												
	City DUNN State NC Zip Code 28334	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 7/6 Dinner	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name RENE ELLMERS FOR CONGRESS COMMITTEE	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FLEISCHMANN, CHARLES J	Transaction ID: SB23.5716 Date of Disbursement																			
	Mailing Address 735 BROAD STREET SUITE 1000	<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>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	1	1												
	City CHATTANOOGA State TN Zip Code 37402	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 1/10 Luncheon	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name CHARLES J FLEISCHMANN	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) VIRGINIA FOXX	Transaction ID: SB23.5722 Date of Disbursement																			
	Mailing Address 11468 HIGHWAY 105	<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	0		2	0	1	1												
	City BANNER ELK State NC Zip Code 28604	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 3/8 Reception	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name VIRGINIA FOXX FOR CONGRESS	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00
1500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) VIRGINIA FOXX	Transaction ID: SB23.5858 Date of Disbursement 06 / 07 / 2011
	Mailing Address 11468 HIGHWAY 105	Amount of Each Disbursement this Period 500.00
	City BANNER ELK State NC Zip Code 28604	
	Purpose of Disbursement Reception 6/22 Candidate Name VIRGINIA FOXX FOR CONGRESS	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 05	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PHILLIP J. GINGREY	Transaction ID: SB23.5691 Date of Disbursement 01 / 18 / 2011
	Mailing Address 632 N. St. Marys Lane	Amount of Each Disbursement this Period 1000.00
	City Marietta State GA Zip Code 30064	
	Purpose of Disbursement 1/20 Luncheon Fundraiser Candidate Name PHILLIP J. GINGREY	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 11	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TREY GOWDY	Transaction ID: SB23.5745 Date of Disbursement 03 / 08 / 2011
	Mailing Address PO BOX 3324	Amount of Each Disbursement this Period 1000.00
	City SPARTANBURG State SC Zip Code 29304	
	Purpose of Disbursement 3/16 Breakfast Candidate Name TREY GOWDY FOR CONGRESS	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 04	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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)

**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) TREY GOWDY <hr/> Mailing Address PO BOX 3324 <hr/> City SPARTANBURG State SC Zip Code 29304 <hr/> Purpose of Disbursement 6/23 Breakfast Candidate Name TREY GOWDY FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 04 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5882 Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2011
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) LINDSEY GRAHAM <hr/> Mailing Address PO BOX 486 <hr/> City SENECA State SC Zip Code 29679 <hr/> Purpose of Disbursement 6/16 Luncheon Candidate Name TEAM GRAHAM INC <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5868 Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) H MORGAN GRIFFITH <hr/> Mailing Address PO BOX 361 <hr/> City CHRISTIANSBURG State VA Zip Code 24068 <hr/> Purpose of Disbursement 03/08/2011 Reception Candidate Name MORGAN GRIFFITH FOR CONGRESS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5740 Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2011
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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

A.	Full Name (Last, First, Middle Initial) H MORGAN GRIFFITH	Transaction ID: SB23.5880 Date of Disbursement 06 / 21 / 2011
	Mailing Address PO BOX 361	
	City CHRISTIANSBURG State VA Zip Code 24068	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement 6/22 Luncheon Candidate Name MORGAN GRIFFITH FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 09	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) KAY R HAGAN	Transaction ID: SB23.5883 Date of Disbursement 06 / 21 / 2011
	Mailing Address PO BOX 29103	
	City GREENSBORO State NC Zip Code 27429	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement 6/29 Luncheon Candidate Name KAY HAGAN FOR US SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 00	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) KAY R HAGAN	Transaction ID: SB23.5884 Date of Disbursement 06 / 27 / 2011
	Mailing Address PO BOX 29103	
	City GREENSBORO State NC Zip Code 27429	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement 6/29 Luncheon balance Candidate Name KAY HAGAN FOR US SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District: 00	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	2000.00
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>A. Full Name (Last, First, Middle Initial) ROBERT HURT</p> <p>Mailing Address PO BOX 8</p> <p>City CHATHAM State VA Zip Code 24531</p> <p>Purpose of Disbursement 3/30 Luncheon</p> <p>Candidate Name ROBERT HURT FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5753</p> <p>Date of Disbursement 03 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) JOE WILSON FOR CONGRESS COMMITTEE</p> <p>Mailing Address Post Office Box 2145</p> <p>City West Columbia State SC Zip Code 29171</p> <p>Purpose of Disbursement 01/25 Breakfast</p> <p>Candidate Name JOE WILSON FOR CONGRESS COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 02</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5694</p> <p>Date of Disbursement 01 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. 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 1/24 Reception</p> <p>Candidate Name WALTER JONES FOR CONGRESS COMMITTEE (2008)</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5692</p> <p>Date of Disbursement 01 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) LARRY KISSELL	Transaction ID: SB23.5701 Date of Disbursement 01 / 18 / 2011
	Mailing Address 153 KISSELL DRIVE	Amount of Each Disbursement this Period 1000.00
	City BISCOE State NC Zip Code 27209	
	Purpose of Disbursement 2/9 Reception Candidate Name KISSELL FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) LARRY KISSELL	Transaction ID: SB23.5860 Date of Disbursement 06 / 07 / 2011
	Mailing Address 153 KISSELL DRIVE	Amount of Each Disbursement this Period 1000.00
	City BISCOE State NC Zip Code 27209	
	Purpose of Disbursement 6/7 Luncheon Candidate Name KISSELL FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Sander Levin	Transaction ID: SB23.5853 Date of Disbursement 05 / 02 / 2011
	Mailing Address	Amount of Each Disbursement this Period 1500.00
	City State Zip Code	
	Purpose of Disbursement 5/4 Dinner Candidate Name LEVIN FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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

A.	Full Name (Last, First, Middle Initial) MIKE MCINTYRE	Transaction ID: SB23.5729 Date of Disbursement MM / DD / YYYY 02 / 23 / 2011
	Mailing Address 1701 North Chestnut Street	Amount of Each Disbursement this Period 500.00
	City Lumberton State NC Zip Code 28358	
	Purpose of Disbursement 3/3 Breakfast Candidate Name MIKE MCINTYRE FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) MIKE MCINTYRE	Transaction ID: SB23.5856 Date of Disbursement MM / DD / YYYY 05 / 05 / 2011
	Mailing Address 1701 North Chestnut Street	Amount of Each Disbursement this Period 550.00
	City Lumberton State NC Zip Code 28358	
	Purpose of Disbursement 5/5 BBQ Candidate Name MIKE MCINTYRE FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 07	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) MICHAEL H. MICHAUD	Transaction ID: SB23.5702 Date of Disbursement MM / DD / YYYY 01 / 18 / 2011
	Mailing Address 213 LISBON ST.	Amount of Each Disbursement this Period 500.00
	City LEWISTON State ME Zip Code 04240	
	Purpose of Disbursement 2/14 Luncheon Candidate Name MICHAUD FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1550.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.	Full Name (Last, First, Middle Initial) MICHAEL H. MICHAUD	Transaction ID: SB23.5855 Date of Disbursement 05 / 06 / 2011
	Mailing Address 213 LISBON ST.	
	City LEWISTON State ME Zip Code 04240	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement 5/12 Dinner Candidate Name MICHAUD FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Brad Miller	Transaction ID: SB23.5750 Date of Disbursement 03 / 23 / 2011
	Mailing Address	
	City State Zip Code	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement 3/30 Breakfast 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	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) JOHN MICHAEL 'MICK' MULVANEY	Transaction ID: SB23.5861 Date of Disbursement 06 / 08 / 2011
	Mailing Address 550 RALPH HOOD ROAD	
	City INDIAN LAND State SC Zip Code 29707	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name MULVANEY FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	011 Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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) TIM MURPHY	Transaction ID: SB23.5735 Date of Disbursement 02 / 23 / 2011
	Mailing Address 221 BROOKSIDE BLVD.	Amount of Each Disbursement this Period 500.00
	City PITTSBURGH State PA Zip Code 15241	
	Purpose of Disbursement 3/9 Luncheon Candidate Name TIM MURPHY FOR CONGRESS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SUE MYRICK	Transaction ID: SB23.5719 Date of Disbursement 02 / 04 / 2011
	Mailing Address P. O. Box 37091	Amount of Each Disbursement this Period 500.00
	City CHARLOTTE State NC Zip Code 28237	
	Purpose of Disbursement 2/17 Breakfast Candidate Name SUE MYRICK FOR CONGRESS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 09	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PATRICK ALAN NUNNELEE	Transaction ID: SB23.5877 Date of Disbursement 06 / 17 / 2011
	Mailing Address 1816 WOODSIDE CIRCLE	Amount of Each Disbursement this Period 1000.00
	City TUPELO State MS Zip Code 38801	
	Purpose of Disbursement 6/23 Breakfast Candidate Name NUNNELEE FOR CONGRESS	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2000.00
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>A. Full Name (Last, First, Middle Initial) WILLIAM J. HON. JR. PASCRELL</p> <p>Mailing Address PO BOX 640</p> <p>City TOTOWA State NJ Zip Code 07511</p> <p>Purpose of Disbursement 3/30 Reception</p> <p>Candidate Name PASCRELL FOR CONGRESS INC.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NJ District: 08</p>	<p>Transaction ID: SB23.5726</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) MARK L PRYOR</p> <p>Mailing Address PO BOX 2720</p> <p>City LITTLE ROCK State AR Zip Code 72203</p> <p>Purpose of Disbursement 4/14 Breakfast</p> <p>Candidate Name MARK PRYOR FOR US SENATE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AR District: 00</p>	<p>Transaction ID: SB23.5848</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) MARTHA ROBY</p> <p>Mailing Address 3260 BANKHEAD AVENUE</p> <p>City MONTGOMERY State AL Zip Code 36106</p> <p>Purpose of Disbursement 2/11 Luncheon</p> <p>Candidate Name MARTHA ROBY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AL District: 02</p>	<p>Transaction ID: SB23.5713</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="2500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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) ROBY, MARTHA	Transaction ID: SB23.5866 Date of Disbursement																			
	Mailing Address 3260 BANKHEAD AVENUE	<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>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	8		2	0	1	1												
	City MONTGOMERY State AL Zip Code 36106	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 6/16 Breakfast	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name MARTHA ROBY	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012																			
	State: AL District: 02	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) MICHAEL ROGERS	Transaction ID: SB23.5706 Date of Disbursement																			
	Mailing Address 123 East 13th Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	5		2	0	1	1												
	City Anniston State AL Zip Code 36201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 1/26 Breakfast	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name MIKE ROGERS FOR CONGRESS	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012																			
	State: AL District: 03	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) TIMOTHY J. RYAN	Transaction ID: SB23.5876 Date of Disbursement																			
	Mailing Address 1600 Roosevelt Avenue	<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>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	1	1												
	City Niles State OH Zip Code 44446	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 6/22 Breakfast	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name TIM RYAN FOR CONGRESS	011 Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012																			
	State: OH District: 17	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) TIMOTHY E SCOTT</p> <p>Mailing Address 1405 ASHLEY RIVER RD</p> <p>City CHARLESTON State SC Zip Code 29407</p> <p>Purpose of Disbursement 1/26 Breakfast</p> <p>Candidate Name TIM SCOTT FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5697</p> <p>Date of Disbursement 01 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) TIMOTHY E SCOTT</p> <p>Mailing Address 1405 ASHLEY RIVER RD</p> <p>City CHARLESTON State SC Zip Code 29407</p> <p>Purpose of Disbursement 4/13 Reception</p> <p>Candidate Name TIM SCOTT FOR CONGRESS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5847</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) LOUISE M SLAUGHTER</p> <p>Mailing Address 14 MANOR HILL DRIVE</p> <p>City FAIRPORT State NY Zip Code 14450</p> <p>Purpose of Disbursement 3/14 Reception</p> <p>Candidate Name LOUISE SLAUGHTER RE-ELECTION COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 28</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5743</p> <p>Date of Disbursement 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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 37 / 37

<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) STEVE MR. STIVERS Mailing Address 372 W 2ND AVENUE City COLUMBUS State OH Zip Code 43201 Purpose of Disbursement 3/9 Breakfast Candidate Name STIVERS FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5732 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) MELVIN L WATT Mailing Address 515 N POPLAR ST City CHARLOTTE State NC Zip Code Purpose of Disbursement 3/3 Luncheon Candidate Name MEL WATT FOR CONGRESS COMMITTEE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 12 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5730 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

42050.00