



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

September 11, 2009

James C. Pace, Jr., Treasurer
Inman Mills Good Government Fund
P.O. Box 207
Inman, SC 29349

**Response Due Date:
October 16, 2009**

Identification Number: C00142893

Reference: Mid-Year Report (1/1/09 – 6/30/09)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

-Please provide the totals for Lines 6(d) and 31, Columns A and B of the Summary and Detailed Summary Pages. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1159.

29030161541

Sincerely,



Allen Norfleet
Campaign Finance Analyst
Reports Analysis Division

312

29030161542

RECEIVED
FEC MAIL CENTER
2009 SEP 21 AM 11:54

**FEC
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

INMAN MILLS GOOD GOVERNMENT FUND

ADDRESS (number and street)

PO BOX 207

Check if different than previously reported. (ACC)

INMAN

SC

29349

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00142893

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
01 / 01 / 2009

through

MM / DD / YYYY
06 / 30 / 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer JAMES C. PACE, JR.

Signature of Treasurer

James C Pace, Jr

Date

MM / DD / YYYY
07 / 01 / 2009

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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

INMAN MILLS GOOD GOVERNMENT FUND

Report Covering the Period: From:

01 / 01 / 2009

To:

06 / 30 / 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2009		8,613.13
(b) Cash on Hand at Beginning of Reporting Period.....	8,613.13	
(c) Total Receipts (from Line 19).....	1,905.00	1,905.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1,051.813	1,051.813
7. Total Disbursements (from Line 31).....	1,000.00	1,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	951.813	951.813
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

29030161544

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

INMAN MILLS GOOD GOVERNMENT FUND

Report Covering the Period: From:

01 / 01 / 2009

To:

06 / 30 / 2009

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).....

1 9 0 5 0 0

1 9 0 5 0 0

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1 9 0 5 0 0

1 9 0 5 0 0

(b) Political Party Committees.....

(c) Other Political Committees

(such as PACs).....

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)..... ▶

1 9 0 5 0 0

1 9 0 5 0 0

12. Transfers From Affiliated/Other

Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

1 9 0 5 0 0

1 9 0 5 0 0

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

1 9 0 5 0 0

1 9 0 5 0 0

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DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1 0 0 0 0 0	1 0 0 0 0 0
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1 0 0 0 0 0	1 0 0 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1 0 0 0 0 0	1 0 0 0 0 0

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

29030161547

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

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

FOR LINE NUMBER: PAGE 1 OF 14
(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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8300

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

8300

29030161548

B. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1,660.0

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

8300

C. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 24900

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

8300

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

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

[Empty receipt amount boxes]

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 2 OF 14

<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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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. DAVID BLACKWELL

Mailing Address

130 BLACKWELL PLACE

City State Zip Code
INMAN SC 29349

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
I T MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,000.00

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

3,000.00

Full Name (Last, First, Middle Initial)

B. DAVID BLACKWELL

Mailing Address

130 BLACKWELL PLACE

City State Zip Code
INMAN SC 29349

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
I T MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

6,000.00

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

3,000.00

Full Name (Last, First, Middle Initial)

C. DAVID BLACKWELL

Mailing Address

130 BLACKWELL PLACE

City State Zip Code
INMAN SC 29349

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
I T MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

9,000.00

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

3,000.00

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

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

29030161549

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 3 OF 14		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. PATRICIA H. ROBBINS		Date of Receipt
Mailing Address 307 MITCHELL ROAD		01 / 30 / 2009
City INMAN	State SC	Zip Code 29349
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400
Name of Employer INMAN MILLS	Occupation CORPORATE SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400	

Full Name (Last, First, Middle Initial) B. PATRICIA H. ROBBINS		Date of Receipt
Mailing Address 307 MITCHELL ROAD		03 / 31 / 2009
City INMAN	State SC	Zip Code 29349
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400
Name of Employer INMAN MILLS	Occupation CORPORATE SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800	

Full Name (Last, First, Middle Initial) C. PATRICIA H. ROBBINS		Date of Receipt
Mailing Address 307 MITCHELL ROAD		05 / 29 / 2009
City INMAN	State SC	Zip Code 29349
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400
Name of Employer INMAN MILLS	Occupation CORPORATE SECRETARY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7200	

SUBTOTAL of Receipts This Page (optional).....	2400
TOTAL This Period (last page this line number only).....	2400

29030161550

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. WILLIAM E. BOWEN, JR.

Mailing Address

137 MARSHALL BRIDGE DRIVE

City
GREENVILLE

State Zip Code
SC 29605

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
VP PURCHASING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

4 8 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

4 8 0 0

Full Name (Last, First, Middle Initial)

B. WILLIAM E. BOWEN, JR.

Mailing Address

137 MARSHALL BRIDGE DRIVE

City
GREENVILLE

State Zip Code
SC 29605

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
VP PURCHASING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

9 6 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

4 8 0 0

Full Name (Last, First, Middle Initial)

C. WILLIAM E. BOWEN, JR.

Mailing Address

137 MARSHALL BRIDGE DRIVE

City
GREENVILLE

State Zip Code
SC 29605

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
VP PURCHASING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 4 4 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

4 8 0 0

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

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

29020161551

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 14

(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)

INMAN MILLS GOOD GOVERNMENT FUND

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

Mailing Address
PO BOX 308

City State Zip Code
ENOREE SC 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4 0 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

4 0 0 0

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

Mailing Address
PO BOX 308

City State Zip Code
ENOREE SC 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
8 0 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

4 0 0 0

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

Mailing Address
PO BOX 308

City State Zip Code
ENOREE SC 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1 2 0 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

4 0 0 0

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

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

29030161552

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 14
	(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)
INMAN MILLS GOOD GOVERNMENT FUND

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

Mailing Address
543 OTIS BLVD.

City **SPARTANBURG** State **SC** Zip Code **29302**

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

Name of Employer **INMAN MILLS** Occupation **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9 5 0 0

Date of Receipt
0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period
9 5 0 0

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

Mailing Address
543 OTIS BLVD.

City **SPARTANBURG** State **SC** Zip Code **29302**

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

Name of Employer **INMAN MILLS** Occupation **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1 9 0 0 0

Date of Receipt
0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period
9 5 0 0

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

Mailing Address
543 OTIS BLVD.

City **SPARTANBURG** State **SC** Zip Code **29302**

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

Name of Employer **INMAN MILLS** Occupation **CEO**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 8 5 0 0

Date of Receipt
0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period
9 5 0 0

SUBTOTAL of Receipts This Page (optional).....▶ **9 5 0 0**

TOTAL This Period (last page this line number only).....▶ **9 5 0 0**

29030161555

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

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

FOR LINE NUMBER: PAGE 7 OF 14

(check only one)

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

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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. NORMAN H. CHAPMAN

Mailing Address

764 PLUME STREET

City
SPARTANBURG

State Zip Code
SC 29302

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
COO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7 8 0 0

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

7 8 0 0

Full Name (Last, First, Middle Initial)

B. NORMAN H. CHAPMAN

Mailing Address

764 PLUME STREET

City
SPARTANBURG

State Zip Code
SC 29302

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
COO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 5 6 0 0

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

7 8 0 0

Full Name (Last, First, Middle Initial)

C. NORMAN H. CHAPMAN

Mailing Address

764 PLUME STREET

City
SPARTANBURG

State Zip Code
SC 29302

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
COO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2 3 4 0 0

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

7 8 0 0

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

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

29030161554

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

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

A. Full Name (Last, First, Middle Initial)
MICHAEL D. ELLIOTT

Mailing Address
PO BOX 85

City State Zip Code
WOODRUFF SC 29388

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

Name of Employer Occupation
INMAN MILLS PERSONNEL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2 5 0 0

Date of Receipt
0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period
2 5 0 0

B. Full Name (Last, First, Middle Initial)
MICHAEL D. ELLIOTT

Mailing Address
PO BOX 85

City State Zip Code
WOODRUFF SC 29388

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

Name of Employer Occupation
INMAN MILLS PERSONNEL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5 0 0 0

Date of Receipt
0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period
2 5 0 0

C. Full Name (Last, First, Middle Initial)
MICHAEL D. ELLIOTT

Mailing Address
PO BOX 85

City State Zip Code
WOODRUFF SC 29388

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

Name of Employer Occupation
INMAN MILLS PERSONNEL DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7 5 0 0

Date of Receipt
0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period
2 5 0 0

SUBTOTAL of Receipts This Page (optional).....▶ **2 5 0 0**

TOTAL This Period (last page this line number only).....▶ **2 5 0 0**

29020161555

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 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City
SIMPSONVILLE

State Zip Code
SC 29681

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3 0 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

3 0 0 0

Full Name (Last, First, Middle Initial)

B. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City
SIMPSONVILLE

State Zip Code
SC 29681

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

6 0 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

3 0 0 0

Full Name (Last, First, Middle Initial)

C. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City
SIMPSONVILLE

State Zip Code
SC 29681

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

9 0 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

3 0 0 0

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

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

29030161556

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. WILLIAM C. HIGHTOWER, III

Mailing Address

206 THORNHILL DR.

City
SPARTANBURG

State Zip Code
SC 29301

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3 6 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

3 6 0 0

Full Name (Last, First, Middle Initial)

B. WILLIAM C. HIGHTOWER, III

Mailing Address

206 THORNHILL DR.

City
SPARTANBURG

State Zip Code
SC 29301

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7 2 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

3 6 0 0

Full Name (Last, First, Middle Initial)

C. WILLIAM C. HIGHTOWER, III

Mailing Address

206 THORNHILL DR.

City
SPARTANBURG

State Zip Code
SC 29301

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 8 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

3 6 0 0

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

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

29030161557

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 14	
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
JAMES C. PACE, JR.

Mailing Address
234 NORTH LAKE EMORY DRIVE

City State Zip Code
INMAN SC 29394

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
INMAN MILLS CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
4 4 0 0

Date of Receipt
0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period
4 4 0 0

B. Full Name (Last, First, Middle Initial)
JAMES C. PACE, JR.

Mailing Address
234 NORTH LAKE EMORY DRIVE

City State Zip Code
INMAN SC 29394

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
INMAN MILLS CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
8 8 0 0

Date of Receipt
0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period
4 4 0 0

C. Full Name (Last, First, Middle Initial)
JAMES C. PACE, JR.

Mailing Address
234 NORTH LAKE EMORY DRIVE

City State Zip Code
INMAN SC 29394

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
INMAN MILLS CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1 3 2 0 0

Date of Receipt
0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period
4 4 0 0

SUBTOTAL of Receipts This Page (optional)..... ▶ **4 4 0 0**

TOTAL This Period (last page this line number only)..... ▶ **4 4 0 0**

29030161558

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 12 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

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

Mailing Address
PO BOX 187

City ENOREE State SC Zip Code 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3 4 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

3 4 0 0

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

Mailing Address
PO BOX 187

City ENOREE State SC Zip Code 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

6 8 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

3 4 0 0

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

Mailing Address
PO BOX 187

City ENOREE State SC Zip Code 29335

FEC ID number of contributing federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 2 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

3 4 0 0

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

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

29030161559

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 13 OF 14

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. BEN TRUSLOW

Mailing Address
22 COBBLE HILL ROAD

City State Zip Code
FAIRVIEW NC 28730

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS SALESMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4,200.0

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

4,200.0

Full Name (Last, First, Middle Initial)

B. BEN TRUSLOW

Mailing Address
22 COBBLE HILL ROAD

City State Zip Code
FAIRVIEW NC 28730

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS SALESMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 8,400.0

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

4,200.0

Full Name (Last, First, Middle Initial)

C. BEN TRUSLOW

Mailing Address
22 COBBLE HILL ROAD

City State Zip Code
FAIRVIEW NC 28730

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS SALESMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1,260.0

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

4,200.0

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

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

29030161560

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

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

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

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

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

Mailing Address
204 HAMPTON BLVD.

City State Zip Code
GAFFNEY SC 29341

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS QUALITY CONTROL

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2 6 0 0

Date of Receipt
0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period
2 6 0 0

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

Mailing Address
204 HAMPTON BLVD.

City State Zip Code
GAFFNEY SC 29341

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS QUALITY CONTROL

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5 2 0 0

Date of Receipt
0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period
2 6 0 0

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

Mailing Address
204 HAMPTON BLVD.

City State Zip Code
GAFFNEY SC 29341

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS QUALITY CONTROL

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 7 8 0 0

Date of Receipt
0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period
2 6 0 0

SUBTOTAL of Receipts This Page (optional) ▶

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

1 9 0 5 0 0

29030161561

**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 1 OF 1

<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)
INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A.

TextilePAC

Mailing Address
469 Hospital Drive, Suite C

City **Gastonia** State **NC** Zip Code **28054**

Purpose of Disbursement
Contribution

Candidate Name
N/A

Office Sought: House Senate President
N/A

State: _____ District: _____

Disbursement For: Primary General
 Other (specify) **N/A**

Date of Disbursement

03 / 18 / 2009

Amount of Each Disbursement this Period

100000

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: _____ District: _____

Disbursement For: Primary General
 Other (specify) _____

Date of Disbursement

____ / ____ / _____

Amount of Each Disbursement this Period

Category/
Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: _____ District: _____

Disbursement For: Primary General
 Other (specify) _____

Date of Disbursement

____ / ____ / _____

Amount of Each Disbursement this Period

Category/
Type

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

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

100000

29030161562

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>9/15/09</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jaw
 PREPARER

9/21/09
 DATE PREPARED

29030161563