

**FEC
FORM 3X**

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

RECEIVED
FEC MAIL CENTER

Office Use Only
2009 JUL 12 12

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.
INMAN MILLS GOOD GOVERNMENT FUND

12FE4M5

ADDRESS (number and street) **PO BOX 207**
INMAN SC 29349

Check if different than previously reported. (ACC)

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

C 0 0 1 4 2 8 9 3

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on / / in the State of

5. Covering Period **0 1 / 0 1 / 2 0 0 9** through **0 6 / 3 0 / 2 0 0 9**

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 **0 7 / 0 1 / 2 0 0 9**

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

29030110644

**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:

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	1	/	2	0	0	9

 To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	9

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1, <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9	8,613.13	
Y	Y	Y	Y							
2	0	0	9							
(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)										
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))	9,518.13	9,518.13								
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)										
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)										

29030110645

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:

MM / DD / YYYY
01 / 01 / 2009

To:

MM / DD / YYYY
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))..		
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)

	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)		

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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)

<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

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 ▼
8 3 0 0

Date of Receipt

0 1 / 3 0 / 2 0 0 9

Amount of Each Receipt this Period

8 3 0 0

Full Name (Last, First, Middle Initial)

B. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1 6 6 0 0

Date of Receipt

0 3 / 3 1 / 2 0 0 9

Amount of Each Receipt this Period

8 3 0 0

Full Name (Last, First, Middle Initial)

C. GEORGE A. ABBOTT, JR.

Mailing Address
211 WINFIELD DRIVE

City State Zip Code
SPARTANBURG SC 29302

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

Name of Employer Occupation
INMAN MILLS VP MANUFACTURING

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2 4 9 0 0

Date of Receipt

0 5 / 2 9 / 2 0 0 9

Amount of Each Receipt this Period

8 3 0 0

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

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

29030110649

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 2 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"/> 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. DAVID BLACKWELL		Date of Receipt 01 / 30 / 2009
Mailing Address 130 BLACKWELL PLACE		Amount of Each Receipt this Period 3,000.00
City INMAN	State Zip Code SC 29349	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 3,000.00
Name of Employer INMAN MILLS	Occupation I T MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. DAVID BLACKWELL		Date of Receipt 03 / 31 / 2009
Mailing Address 130 BLACKWELL PLACE		Amount of Each Receipt this Period 3,000.00
City INMAN	State Zip Code SC 29349	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 6,000.00
Name of Employer INMAN MILLS	Occupation I T MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DAVID BLACKWELL		Date of Receipt 05 / 29 / 2009
Mailing Address 130 BLACKWELL PLACE		Amount of Each Receipt this Period 3,000.00
City INMAN	State Zip Code SC 29349	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 9,000.00
Name of Employer INMAN MILLS	Occupation I T MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	3,000.00
TOTAL This Period (last page this line number only).....	3,000.00

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**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	
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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 01 / 30 / 2009	
Mailing Address 307 MITCHELL ROAD		Amount of Each Receipt this Period 2400	
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
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 03 / 31 / 2009	
Mailing Address 307 MITCHELL ROAD		Amount of Each Receipt this Period 2400	
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
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 05 / 29 / 2009	
Mailing Address 307 MITCHELL ROAD		Amount of Each Receipt this Period 2400	
City INMAN	State SC	Zip Code 29349	
FEC ID number of contributing federal political committee. C			
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).....	[]
TOTAL This Period (last page this line number only).....	[]

29030110651

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

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

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

A. Full Name (Last, First, Middle Initial) WILLIAM E. BOWEN, JR.		Date of Receipt 01 / 30 / 2009
Mailing Address 137 MARSHALL BRIDGE DRIVE		Amount of Each Receipt this Period 4800
City GREENVILLE	State Zip Code SC 29605	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 4800
Name of Employer INMAN MILLS	Occupation VP PURCHASING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) WILLIAM E. BOWEN, JR.		Date of Receipt 03 / 31 / 2009
Mailing Address 137 MARSHALL BRIDGE DRIVE		Amount of Each Receipt this Period 4800
City GREENVILLE	State Zip Code SC 29605	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 9600
Name of Employer INMAN MILLS	Occupation VP PURCHASING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) WILLIAM E. BOWEN, JR.		Date of Receipt 05 / 29 / 2009
Mailing Address 137 MARSHALL BRIDGE DRIVE		Amount of Each Receipt this Period 4800
City GREENVILLE	State Zip Code SC 29605	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 14400
Name of Employer INMAN MILLS	Occupation VP PURCHASING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	4800
TOTAL This Period (last page this line number only).....	4800

29030110652

**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 5 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) BRAD BURNETT		Date of Receipt 01 / 30 / 2009	
Mailing Address PO BOX 308		Amount of Each Receipt this Period 4,000.00	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4,000.00		

B. Full Name (Last, First, Middle Initial) BRAD BURNETT		Date of Receipt 03 / 31 / 2009	
Mailing Address PO BOX 308		Amount of Each Receipt this Period 4,000.00	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8,000.00		

C. Full Name (Last, First, Middle Initial) BRAD BURNETT		Date of Receipt 05 / 29 / 2009	
Mailing Address PO BOX 308		Amount of Each Receipt this Period 4,000.00	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12,000.00		

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

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

29030110653

**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)
 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. 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 ▼

9,500.00

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

9,500.00

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 ▼

1,900.00

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

9,500.00

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 ▼

2,850.00

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

9,500.00

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

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

9,500.00
 9,500.00

29030110654

**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		Date of Receipt MM / DD / YYYY 01 / 30 / 2009
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 7800
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 7800
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NORMAN H. CHAPMAN		Date of Receipt MM / DD / YYYY 03 / 31 / 2009
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 7800
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 15600
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NORMAN H. CHAPMAN		Date of Receipt MM / DD / YYYY 05 / 29 / 2009
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 7800
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 23400
Name of Employer INMAN MILLS	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

29030110655

**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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 11c <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

A. MICHAEL D. ELLIOTT

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. MICHAEL D. ELLIOTT

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. MICHAEL D. ELLIOTT

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**

29030110658

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 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. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City

SIMPSONVILLE

State

SC

Zip Code

29681

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

3000

Date of Receipt

01 / 30 / 2009

Amount of Each Receipt this Period

3000

Full Name (Last, First, Middle Initial)

B. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City

SIMPSONVILLE

State

SC

Zip Code

29681

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

6000

Date of Receipt

03 / 31 / 2009

Amount of Each Receipt this Period

3000

Full Name (Last, First, Middle Initial)

C. DON FOSTER

Mailing Address

214 SPRINGS LAKE LOOP

City

SIMPSONVILLE

State

SC

Zip Code

29681

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

9000

Date of Receipt

05 / 29 / 2009

Amount of Each Receipt this Period

3000

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

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

Empty receipt amount boxes for subtotal and total.

29030110657

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

SC

Zip Code

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

SC

Zip Code

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

SC

Zip Code

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).....▶

29030110658

**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"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City

INMAN

State

SC

Zip Code

29394

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

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

Full Name (Last, First, Middle Initial)

B. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City

INMAN

State

SC

Zip Code

29394

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

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

Full Name (Last, First, Middle Initial)

C. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City

INMAN

State

SC

Zip Code

29394

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

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).....▶

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

29030110659

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

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

FOR LINE NUMBER: PAGE 12 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. 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

01 / 30 / 2009

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

03 / 31 / 2009

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

05 / 29 / 2009

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).....▶

29030110660

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

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

Full Name (Last, First, Middle Initial) A. BEN TRUSLOW		Date of Receipt 01 / 30 / 2009
Mailing Address 22 COBBLE HILL ROAD		Amount of Each Receipt this Period 4200
City FAIRVIEW	State NC	
Zip Code 28730		Amount of Each Receipt this Period 4200
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation SALESMAN	Amount of Each Receipt this Period 4200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4200	

Full Name (Last, First, Middle Initial) B. BEN TRUSLOW		Date of Receipt 03 / 31 / 2009
Mailing Address 22 COBBLE HILL ROAD		Amount of Each Receipt this Period 4200
City FAIRVIEW	State NC	
Zip Code 28730		Amount of Each Receipt this Period 4200
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation SALESMAN	Amount of Each Receipt this Period 8400
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 8400	

Full Name (Last, First, Middle Initial) C. BEN TRUSLOW		Date of Receipt 05 / 29 / 2009
Mailing Address 22 COBBLE HILL ROAD		Amount of Each Receipt this Period 4200
City FAIRVIEW	State NC	
Zip Code 28730		Amount of Each Receipt this Period 12600
FEC ID number of contributing federal political committee. C		
Name of Employer INMAN MILLS	Occupation SALESMAN	Amount of Each Receipt this Period 12600
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12600	

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

29030110661

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 14 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. MICHAEL KEITH WOODS

Mailing Address

204 HAMPTON BLVD.

City

GAFFNEY

State

SC

Zip Code

29341

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

QUALITY CONTROL

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

GAFFNEY

State

SC

Zip Code

29341

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

QUALITY CONTROL

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

GAFFNEY

State

SC

Zip Code

29341

FEC ID number of contributing federal political committee.

C

Name of Employer

INMAN MILLS

Occupation

QUALITY CONTROL

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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).....▶

2 6 0 0

1 9 0 5 0 0

29030110662

**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 State Zip Code
Gastonia NC 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

1,000.00

1011
Category/
Type

Full Name (Last, First, Middle Initial)

B.

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

1000.00

29030110663

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
7/1/05

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

[Signature]
 PREPARER

7/7/05
 DATE PREPARED

29030110664