

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

OCT 16 9 03 AM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) 000142893 082796 N 236 JAMES C PACE JR INMAN MILLS GOOD GOVERNMENT FU ND P O BOX 207 INMAN SC 29349		2. FEC IDENTIFICATION NUMBER 000142893
		3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ In the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>7/1/96</u> through <u>9/30/96</u>		
6.	(a) Cash on Hand January 1, 19 <u>96</u>		\$ 7,308.04
	(b) Cash on Hand at Beginning of Reporting Period	\$ 4,288.46	
	(c) Total Receipts (from Line 19)	\$ 1,179.30	\$ 4,709.73
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 5,467.76	\$ 2,017.77
7.	Total Disbursements (from Line 30)	\$ 524.67	\$ 7,074.68
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,943.09	\$ 4,943.09
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	
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 			Date 10/9/96

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE INMAN MILLS GOOD GOVERNMENT FUND		REPORT COVERING PERIOD FROM 7/1/96 TO: 9/30/96	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)		1,168.00	4,672.00
ii. Unitemized			
iii. Total (add i and ii) >		1,168.00	4,672.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a ii, b and c) >		1,168.00	4,672.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		11.30	37.73
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		1,179.30	4,709.73
20. Total Federal Receipts (subtract line 18 from line 19) >		1,179.30	4,709.73
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		500.00	7,000.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			
29. Other Disbursements		24.67	74.68
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		524.67	7,074.68
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		524.67	7,074.68
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		1,168.00	4,672.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		1,168.00	4,672.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER

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, Mailing Address and ZIP Code George A. Abbott Jr. 211 Winfield Dr. Spartanburg, SC 29302		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$145.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP Manufacturing	Aggregate Year-to-Date > \$ 580.00	
B. Full Name, Mailing Address and ZIP Code Patricia H. Robbins 407 Mitchell Road Spartanburg, SC 29303		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$ 32.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Corp. Secretary	Aggregate Year-to-Date > \$ 128.00	
C. Full Name, Mailing Address and ZIP Code William E. Bowen, Jr. 137 Marshall Bridge Drive Greenville, SC 29605		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Cotton Buyer	Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code Brad Burnett P. O. Box 16091 Spartanburg, SC 29316		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$ 60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Plant Manager	Aggregate Year-to-Date > \$ 240.00	
E. Full Name, Mailing Address and ZIP Code Archie O. Butler 126 Winfield Drive Spartanburg, SC 29302		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$ 55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Plant Manager	Aggregate Year-to-Date > \$ 220.00	
F. Full Name, Mailing Address and ZIP Code Robert H. Chapman, III 543 Otis Blvd. Spartanburg, SC 29302		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$ 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President & Treas.	Aggregate Year-to-Date > \$ 200.00	
G. Full Name, Mailing Address and ZIP Code Norman H. Chapman 220 Mills Avenue Spartanburg, SC 29302		Name of Employer Inman Mills	Date (month, day, year) 8/30/96	Amount of Each Receipt this Period \$ 95.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Ass't Vice Pres.	Aggregate Year-to-Date > \$ 380.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 2 OF 3
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NAME OF COMMITTEE (In Full)

INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James W. Davidson 147 Plantation Drive Woodruff, SC 29388	Inman Mills	8/30/96	\$ 65.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Purchasing Agent	Aggregate Year-to-Date > \$ 260.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael D. Elliott P. O. Box 193 Enoree, SC 29335	Inman Mills	8/30/96	\$ 30.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Personnel Director	Aggregate Year-to-Date > \$ 120.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marshall Wayne Hall 630 Ballenger Road Inman, SC 29349	Inman Mills	8/30/96	\$ 54.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Quality Control	Aggregate Year-to-Date > \$ 216.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William C. Hightower, III 206 Thornhill Drive Spartanburg, SC 29301	Inman Mills	8/30/96	\$ 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Plant Manager	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William R. Holland 141 Oakwood Drive Woodruff, SC 29388	Inman Mills	8/30/96	\$ 35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Personnel Director	Aggregate Year-to-Date > \$ 140.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roy E. Metcalf 215 River Falls Drive Duncan, SC 29334	Inman Mills	8/30/96	\$ 73.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.I.S. Director	Aggregate Year-to-Date > \$ 292.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Lawrence Morrow 38 A Mill Street Inman, SC 29349	Inman Mills	8/30/96	\$ 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corp. Personnel	Aggregate Year-to-Date > \$ 180.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 3
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James C. Pace, Jr. 164 Campton Circle Inman, SC 29349	Inman Mills	8/30/96	\$ 40.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller	Aggregate Year-to-Date > \$ 160.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard L. Price, Jr. 2510 Old Knox Road Spartanburg, SC 29302	Inman Mills	8/30/96	\$ 55.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 220.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Renfro, Jr. 414 Dill Road Landrum, SC 29356	Inman Mills	8/30/96	\$ 90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 360.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Myers Turner 100 Wanda Ann Lane Inman, SC 29349	Inman Mills	8/30/96	\$ 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Plant Manager	Aggregate Year-to-Date > \$ 200.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Keith Woods 13 A Street Inman, SC 29349	Inman Mills	8/30/96	\$ 54.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Quality Control	Aggregate Year-to-Date > \$ 216.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$1,168.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INMAN MILLS GOOD GOVERNMENT FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lindsey Graham P. O. Box 1155 Seneca, SC 29679	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/1/96	\$500.00
B. Full Name, Mailing Address and ZIP Code NationsBank Inman, SC 29349	Purpose of Disbursement Bank Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/96	\$ 8.00
C. Full Name, Mailing Address and ZIP Code NationsBank Inman, SC 29349	Purpose of Disbursement Bank Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/30/96	\$ 8.67
D. Full Name, Mailing Address and ZIP Code NationsBank Inman, SC 29349	Purpose of Disbursement Bank Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/96	\$ 8.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$524.67

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

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

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 10-09-96
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED
	and/or DATE OF RECEIPT
<div style="display: flex; justify-content: space-between; margin-top: 10px;"> TG PREPARER 10-16-96 DATE PREPARED </div>	