

FEC
FORM 3X

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

RECEIVED

2012 JUL -9 AM 11:59

Office Use Only

ELECTRONIC CENTER

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 ▲

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

(c) 12-Day
PRE-Election
Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)

Election on / /
In the
State of

(d) 30-Day
POST-Election
Report for the:
 General (30G) Runoff (30R) Special (30S)

Election on / /
In the
State of

5. Covering Period

0 4 ' 0 1 ' 2 0 1 2

through

0 6 ' 3 0 ' 2 0 1 2

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 2 ' 2 0 1 2

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:

0 4 / 0 1 / 2 0 1 2

To:

0 6 / 3 0 / 2 0 1 2

COLUMN A
This Period

COLUMN B
Calendar Year-to-Date

6. (a) Cash on Hand

January 1,

2 0 1 2

5 7 8 7 3 8

(b) Cash on Hand at
Beginning of Reporting Period.....

1 8 0 7 3 8

(c) Total Receipts (from Line 19)

6 3 5 0 0

1 9 0 5 0 0

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....

2 4 4 2 3 8

7 6 9 2 3 8

7. Total Disbursements (from Line 31).....

5 2 5 0 0 0

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....

2 4 4 2 3 8

2 4 4 2 3 8

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)

.....

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:

04 / 01 / 2012

To:

06 / 30 / 2012

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).....
 (II) Unitemized.....
 (III) TOTAL (add Lines 11(a)(I) and (II)).....►
- (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).....►

6 3 5 0 0

1 9 0 5 0 0

6 3 5 0 0

1 9 0 5 0 0

6 3 5 0 0

1 9 0 5 0 0

6 3 5 0 0

1 9 0 5 0 0

12. Transfers From Affiliated/Other Party Committees.....

6 3 5 0 0

1 9 0 5 0 0

13. All Loans Received.....

6 3 5 0 0

1 9 0 5 0 0

14. Loan Repayments Received.....

6 3 5 0 0

1 9 0 5 0 0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

6 3 5 0 0

1 9 0 5 0 0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

6 3 5 0 0

1 9 0 5 0 0

17. Other Federal Receipts (Dividends, Interest, etc.).....

6 3 5 0 0

1 9 0 5 0 0

18. Transfers from Non-Federal and Levin Funds

6 3 5 0 0

1 9 0 5 0 0

- (a) Non-Federal Account (from Schedule H3)

6 3 5 0 0

1 9 0 5 0 0

- (b) Levin Funds (from Schedule H5)

6 3 5 0 0

1 9 0 5 0 0

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

6 3 5 0 0

1 9 0 5 0 0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....►

6 3 5 0 0

1 9 0 5 0 0

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....►

6 3 5 0 0

1 9 0 5 0 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....		5 2 5 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)) ..		5 2 5 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		5 2 5 0 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

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 5

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 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. WILLIAM E. BOWEN, JR.

Mailing Address
 137 MARSHALL BRIDGE DRIVE

City State Zip Code
 GREENVILLE SC 29605

FEC ID number of contributing
 federal political committee.

C [REDACTED]

Date of Receipt

MM / DD / YYYY
 05 / 31 / 2012

Amount of Each Receipt this Period

[REDACTED] 4800

Name of Employer
 INMAN MILLS

Occupation
 V P PURCHASING

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

14400

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

Mailing Address
 P.O. BOX 308

City State Zip Code
 ENOREE SC 29335

FEC ID number of contributing
 federal political committee.

C [REDACTED]

Date of Receipt

MM / DD / YYYY
 05 / 31 / 2012

Amount of Each Receipt this Period

[REDACTED] 4000

Name of Employer
 INMAN MILLS

Occupation
 PLANT MANAGER

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

12000

Full Name (Last, First, Middle Initial)

C. ROBERT H. CHAPMAN, III

Mailing Address
 543 OTIS BLVD.

City State Zip Code
 SPARTANBURG SC 29302

FEC ID number of contributing
 federal political committee.

C [REDACTED]

Date of Receipt

MM / DD / YYYY
 05 / 31 / 2012

Amount of Each Receipt this Period

[REDACTED] 9500

Name of Employer

INMAN MILLS

Occupation

CEO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

28500

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

[REDACTED]

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

[REDACTED]

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 5

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 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. NORMAN H. CHAPMAN

Mailing Address

764 PLUME STREET

City

SPARTANBURG

State

SC

Zip Code

29302

FEC ID number of contributing
 federal political committee.

C

Date of Receipt

05 / 31 / 2012

Name of Employer

INMAN MILLS

Occupation

COO

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

23400

Amount of Each Receipt this Period

7800

Full Name (Last, First, Middle Initial)

B. MICHAEL D. ELLIOTT

Mailing Address

P.O. BOX 85

City

WOODRUFF

State

SC

Zip Code

29388

FEC ID number of contributing
 federal political committee.

C

Date of Receipt

05 / 31 / 2012

Name of Employer

INMAN MILLS

Occupation

PERSONNEL DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7500

Amount of Each Receipt this Period

2500

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

Date of Receipt

05 / 31 / 2012

Name of Employer

INMAN MILLS

Occupation

CORP. HR DIRECTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

9000

Amount of Each Receipt this Period

3000

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

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

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

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

FOR LINE NUMBER: PAGE 4 OF 5
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 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. 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 / 3 1 / 2 0 1 2

Amount of Each Receipt this Period

3 6 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

29349

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 / 3 1 / 2 0 1 2

Amount of Each Receipt this Period

4 4 0 0

Full Name (Last, First, Middle Initial)

C. KEMP SMITH

Mailing Address

P.O. 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 / 3 1 / 2 0 1 2

Amount of Each Receipt this Period

3 4 0 0

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

3 4 0 0

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

3 4 0 0

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 5

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 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. BEN TRUSLOWMailing Address
224 S. LAURENS ST. UNIT #406

City GREENVILLE State SC Zip Code 29601

FEC ID number of contributing
federal political committee.

C [REDACTED]

Name of Employer

INMAN MILLS

Occupation

VP SALES

Receipt For:

 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 2 6 0 0

Full Name (Last, First, Middle Initial)

B. MICHAEL KEITH WOODSMailing Address
204 HAMPTON BLVD.

City GAFFNEY State SC Zip Code 29341

FEC ID number of contributing
federal political committee.

C [REDACTED]

Name of Employer

INMAN MILLS

Occupation

QUALITY CONTROL

Receipt For:

 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7 8 0 0

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C [REDACTED]

Name of Employer

Occupation

Receipt For:

 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

[REDACTED]

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

[REDACTED]

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

6 3 5 0 0

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.

	Date of Receipt
<input type="checkbox"/> Hand Delivered	
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>7/3/12</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
<i>JMP</i>	<i>7/9/12</i>
PREPARER (3/2005)	DATE PREPARED