

**FEC  
FORM 3X**

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

RECEIVED

2011 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12 FEB 4 5  
FEDERAL MAIL CENTER

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

Election on

MM / DD / YYYY

In the State of

XX

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

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

Election on

MM / DD / YYYY

In the State of

XX

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY

through

MM / DD / YYYY through MM / DD / YYYY

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

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:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2 0 1 4"/>		<input type="text" value="5 9 6 7 3 8"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="6 8 7 2 3 8"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="1 2 7 0 0 0"/>	<input type="text" value="3 1 7 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).....	<input type="text" value="8 1 4 2 3 8"/>	<input type="text" value="9 1 4 2 3 8"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1 0 0 0 0 0"/>	<input type="text" value="2 0 0 0 0 0"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7 1 4 2 3 8"/>	<input type="text" value="7 1 4 2 3 8"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value=""/>	

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 04 / 01 / 2014 To: MM / DD / YYYY 06 / 30 / 2014

**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).....	<span style="border: 1px solid black; padding: 2px;">1 2 7 0 0 0</span>	<span style="border: 1px solid black; padding: 2px;">3 1 7 5 0 0</span>
(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).....▶	<span style="border: 1px solid black; padding: 2px;">1 2 7 0 0 0</span>	<span style="border: 1px solid black; padding: 2px;">3 1 7 5 0 0</span>
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)).....▶	<span style="border: 1px solid black; padding: 2px;">1 2 7 0 0 0</span>	<span style="border: 1px solid black; padding: 2px;">3 1 7 5 0 0</span>
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	<span style="border: 1px solid black; padding: 2px;">1 2 7 0 0 0</span>	<span style="border: 1px solid black; padding: 2px;">3 1 7 5 0 0</span>

**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 .....	1,000.00	2,000.00
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)) ..	1,000.00	2,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1,000.00	2,000.00

11030001-1-01

**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) .....

1,270.00
1,270.00

3,175.00
3,175.00

1-800-4-A-FEDS

**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 1 OF 10	
	<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. GEORGE A. ABBOTT, JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address  
**211 WINFIELD DRIVE**

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

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

Name of Employer **INMAN MILLS** Occupation **VP MANUFACTURING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3 3 2 0 0**

Date of Receipt  
**0 4 / 3 0 / 2 0 1 4**

Amount of Each Receipt this Period  
**8 3 0 0**

**B. GEORGE A. ABBOTT, JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address  
**211 WINFIELD DRIVE**

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

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

Name of Employer **INMAN MILLS** Occupation **VP MANUFACTURING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**4 1 5 0 0**

Date of Receipt  
**0 5 / 3 0 / 2 0 1 4**

Amount of Each Receipt this Period  
**8 3 0 0**

**C. DAVID BLACKWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address  
**130 BLACKWELL PLACE**

City **INMAN** State **SC** Zip Code **29349**

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

Name of Employer **INMAN MILLS** Occupation **IT MANAGER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 2 0 0 0**

Date of Receipt  
**0 4 / 3 0 / 2 0 1 4**

Amount of Each Receipt this Period  
**3 0 0 0**

**SUBTOTAL** of Receipts This Page (optional).....▶ **1 1 6 0 0**

**TOTAL** This Period (last page this line number only).....▶ **1 1 6 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 2 OF 10

(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

**A.** Full Name (Last, First, Middle Initial)  
DAVID BLACKWELL

Mailing Address  
130 BLACKWELL PLACE

City INMAN State SC Zip Code 29349

FEC ID number of contributing federal political committee. C

Name of Employer INMAN MILLS Occupation IT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1,500.00

Date of Receipt 05 / 30 / 2014

Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
PATRICIA H. ROBBINS

Mailing Address  
307 MITCHELL ROAD

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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 960.00

Date of Receipt 04 / 30 / 2014

Amount of Each Receipt this Period 240.00

**C.** Full Name (Last, First, Middle Initial)  
PATRICIA H. ROBBINS

Mailing Address  
307 MITCHELL ROAD

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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 05 / 30 / 2014

Amount of Each Receipt this Period 240.00

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:  
(check only one)

PAGE 3 OF 10

<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)  
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

Name of Employer Occupation  
INMAN MILLS VP PURCHASING

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date  1,920.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

4800

**B.** Full Name (Last, First, Middle Initial)  
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

Name of Employer Occupation  
INMAN MILLS VP PURCHASING

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date  2,400.00

Date of Receipt

05 / 30 / 2014

Amount of Each Receipt this Period

4800

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

Mailing Address  
P.O. BOX 308

City State Zip Code  
ENOREE SC 29335

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
INMAN MILLS PLANT MANAGER

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date  1,600.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

4000

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: (check only one)	PAGE 4 OF 10
	<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. BRAD BURNETT**

Full Name (Last, First, Middle Initial)  
Mailing Address  
P.O. BOX 308  
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 ▼  
2,000.00

Date of Receipt  
05 / 30 / 2014

Amount of Each Receipt this Period  
4,000.00

**B. ROBERT H. CHAPMAN, III**

Full Name (Last, First, Middle Initial)  
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 ▼  
3,800.00

Date of Receipt  
04 / 30 / 2014

Amount of Each Receipt this Period  
9,500.00

**C. ROBERT H. CHAPMAN, III**

Full Name (Last, First, Middle Initial)  
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 ▼  
4,750.00

Date of Receipt  
05 / 30 / 2014

Amount of Each Receipt this Period  
9,500.00

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

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

FORM 1000-0000

**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 10

(check only one)

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

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

Name of Employer

INMAN MILLS

Occupation

COO

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

3,120.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

780.00

Full Name (Last, First, Middle Initial)

**B. NORMAN H. CHAPMAN**

Mailing Address

764 PLUME STREET

City

SPARTANBURG

State

SC

Zip Code

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 ▼

3,900.00

Date of Receipt

05 / 30 / 2014

Amount of Each Receipt this Period

780.00

Full Name (Last, First, Middle Initial)

**C. 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

Name of Employer

INMAN MILLS

Occupation

PERSONNEL DIRECTOR

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

250.00

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 6 OF 10  
(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. 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

Name of Employer

INMAN MILLS

Occupation

PERSONNEL DIRECTOR

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1 2 5 0 0

Date of Receipt

0 5 / 3 0 / 2 0 1 4

Amount of Each Receipt this Period

2 5 0 0

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 ▼

1 2 0 0 0

Date of Receipt

0 4 / 3 0 / 2 0 1 4

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

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 ▼

1 5 0 0 0

Date of Receipt

0 5 / 3 0 / 2 0 1 4

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).....▶

**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 10  
(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)  
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 DIRECTOR OF PRODUCT DEVELOPMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1,440.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

3,600.00

**B.** Full Name (Last, First, Middle Initial)  
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 DIRECTOR OF PRODUCT DEVELOPMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1,800.00

Date of Receipt

05 / 30 / 2014

Amount of Each Receipt this Period

3,600.00

**C.** Full Name (Last, First, Middle Initial)  
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 ▼  
1,760.00

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

440.00

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

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

17,600.00

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

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

FOR LINE NUMBER: PAGE 8 OF 10

(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. JAMES C. PACE, JR.**

Mailing Address

234 NORTH LAKE EMORY DRIVE

City

INMAN

State

SC

Zip Code

29349

Date of Receipt

05 / 30 / 2014

Amount of Each Receipt this Period

4400

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 ▼

22000

Full Name (Last, First, Middle Initial)

**B. KEMP SMITH**

Mailing Address

P.O. BOX 187

City

ENOREE

State

SC

Zip Code

29335

Date of Receipt

04 / 30 / 2014

Amount of Each Receipt this Period

3400

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 ▼

13600

Full Name (Last, First, Middle Initial)

**C. KEMP SMITH**

Mailing Address

P.O. BOX 187

City

ENOREE

State

SC

Zip Code

29335

Date of Receipt

05 / 30 / 2014

Amount of Each Receipt this Period

3400

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 ▼

17000

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: (check only one)		PAGE 9 OF 10	
	<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. BEN TRUSLOW**  
Full Name (Last, First, Middle Initial)

Mailing Address  
**158 CARSHALTON DR.**

City **LYMAN** State **SC** Zip Code **29365**

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

Name of Employer **INMAN MILLS** Occupation **VP SALES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1 6 8 0 0**

Date of Receipt  
**0 4 / 3 0 / 2 0 1 4**

Amount of Each Receipt this Period  
**4 2 0 0**

**B. BEN TRUSLOW**  
Full Name (Last, First, Middle Initial)

Mailing Address  
**158 CARSHALTON DR.**

City **LYMAN** State **SC** Zip Code **29365**

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

Name of Employer **INMAN MILLS** Occupation **VP SALES**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 1 0 0 0**

Date of Receipt  
**0 5 / 3 0 / 2 0 1 4**

Amount of Each Receipt this Period  
**4 2 0 0**

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

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 ▼  
**1 0 4 0 0**

Date of Receipt  
**0 4 / 3 0 / 2 0 1 4**

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).....▶

**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 10	
	<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. MICHAEL KEITH WOODS**

Full Name (Last, First, Middle Initial)

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 ▼ **1,300.00**

Date of Receipt **05 / 30 / 2014**

Amount of Each Receipt this Period **260.00**

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL of Receipts This Page (optional)**.....▶ **1,270.00**

**TOTAL This Period (last page this line number only)**.....▶ **1,270.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						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

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)  
**CAC**

Mailing Address  
**P.O. BOX 2995**

City **CORDOVA** State **TN** Zip Code **38088-2995**

Purpose of Disbursement  
**CONTRIBUTION**

Candidate Name

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement  
**05 / 19 / 2014**

Amount of Each Disbursement this Period  
**0.11**

Category/Type  
**1,000.00**

**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).....

**1000.00**

11000001-10000001





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) 7/8/14
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	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

  
 PREPARER

7/14/14  
 DATE PREPARED