FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

		2011, 1935, 1	Office Use Only
NAME OF COMMITTEE (in full)	E OR PRINT ▼ Example: If over the line		inches de la company de la
INMAN MILLS GOOD GO	VERNMENT FUND		
	 _ _ _ _ _ _ _ _ _ _		
ADDRESS (number and street)	0 BOX 207		
Check if different than previously reported. (ACC)	INMAN	SC L	29349
2. FEC IDENTIFICATION NUMB	BER ▼ CITY ▲	STATE ▲	ZIP CODE A
C0014289	3. IS THIS REPORT	NEW OR AM	ENDED
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	(b) Monthly Feb 20 (M2) Report Due On: Mar 20 (M3)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	Apr 20 (M4) (c) 12-Day Primary PRE-Election Report for the: Conver	gang Band	
January 31 Year-End Report (YE)	Election on		in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(d) 30-Day POST-Election General Report for the:	al (30G) Runoff (3	SOR) Special (30S) in the State of
5. Covering Period 0 4		ugh 0 6 ′ 3 0 ′	2 6 1 4
I certify that I have examined this for Type or Print Name of Treasurer	Report and to the best of my knowledge JAMES C. PACE, JR.	and belief it is true, correct and	d complete.
T	med C Pace, Ja	Date 0	0.8 2014
	s, or incomplete information may subject the	e person signing this Report to t	he penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Write o	r Type	Committee	Name
---------	--------	-----------	------

TNMAN	MTLLS	GOOD	GOVERNMENT.	FUND

_	INMAN MILLS GOOD GOVERNM	ENT FUND	
Re	eport Covering the Period: From: 0	4 0.1 2.0.1.4	To: 0_6_ 13_0 12_0 1_4
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
3.	(a) Cash on Hand January 1, 2 0 1 4		5,9,6,7,3,8
	(b) Cash on Hand at Beginning of Reporting Period	6,8,7,2,3,8	
	(c). Total Receipts (from Line 19)	1,2,7,0,0,0	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)	8.1.4.2.3.8	9,1,4,2,3,8
7.	Total Disbursements (from Line 31)	1.0.0.0.0.0	2-0-0-0-C
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7,1,4,2,3,8	7,1,4,2,3,8
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	and the second s	
10.	Debts and Obligations Owed BY the Committee (Itemize all on	Control of the contro	

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

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 202-694-1100

14031260675

DETAILED SUMMARY PAGEof Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report	Covering the Period: From: 0	1 0.1 2.0.1.4 T	o: 0_6 / 3.0 / 2.0.1.4
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	tributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	1,2,7,0,0,0	
	(ii) Unitemized		
(c)	Political Party Committees Other Political Committees (such as PACs) Total Contributions (add Lines		en en selven en fan en fûl en en fûn en en fûn en f
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) sters From Affiliated/Other ty Committees	1 2 7 0 0 0	3 1 7 5 0 0
13. Ali I	Loans Received		
15. Offs	n Repayments Receivedets To Operating Expenditures funds, Rebates, etc.)		
(Ca	rry Totals to Line 37, page 5)unds of Contributions Made Federal Candidates and Other		
17. Oth (Div	tical Committeeser Federal Receipts ridends, Interest, etc.)		
· (a)	nsfers from Non-Federal and Levin Funds Non-Federal Account (from Schedule H3)		
(b)	Levin Funds (from Schedule H5)		
(c)	Total Transfers (add 18(a) and 18(b))		
	al Receipts (add Lines 11(d), 13, 14, 15, 16, 17, and 18(c))▶	127000	3,1,7,5,0,0
	al Federal Receipts btract Line 18(c) from Line 19)▶	1 2 7 0 0 0	3,1,7,5,0,0

14031260674

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)	Sametime Sam	Carettar ten 10-bate
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures(c) Total Operating Expenditures	Company of the Compan	
•	(add 21(a)(i), (a)(ii), and (b))		and the state of t
22.	Transfers to Affiliated/Other Party		
23	Contributions to	<u> </u>	
	Federal Candidates/Committees and Other Political Committees	1,0,0,0,0,0	2,0,0,0,0
	Independent Expenditures	TARRETANO O CONO CON	**************************************
25.	(use Schedule E) Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)		
	(250 50;0500 7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7		
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))▶		
	011 011	The said and the said was the said and the s	Same the confinement of the section
29.	Other Disbursements	washers look Dearle and see There has been been been been	Landau Laudhard an Ann Ann Ann Ann an An
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	Control of the second of the s	-
		Manual Company of transfer of the conference of the company of the	Proceedings of the second seco
	(ii) "Levin" Share	Combined to still get made as There's and the city of	name to the second
	(b) Federal Election Activity Paid Entirely With Federal Funds	hannilane si samilane si samilane ili samila	Same Constitution Considerate and Constitution Constituti
	(c) Total Federal Election Activity (add	The contract of the contract o	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	<u> </u>	
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1_0_0_0_0	2,0,0,0,0
20	Total Endoral Dishuras Total	Emminoration (Charles Charles	
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	1,0,0,0,0,0	

DETAILED SUMMARY PAGE

of Disbursements

Page 5

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-COLUMN A **COLUMN B** penditures **Total This Period** 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)

GUEDIUM A JEMA M COA	·	
SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)
TEMIZED RECEIPTS	for each category of the	
	Detailed Summary Page	X 11a 11b 11c 12
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or for commercial purposes, other than using the	statements may not be sold or used by any e name and address of any political committed	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (in Full)		
INMAN MILLS GOOD GOVER	NMENT FUND	·
Full Name (Last, First, Middle Initial) GEORGE A. ABBOTT, JR.		. Date of Receipt
Mailing Address 211 WINFIELD DRIVE		0'4'3'0'2'0'1'4
City SPARTANBURG	State Zip Code SC 29302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	8 3 0 0
Name of Employer INMAN MILLS	Occupation VP MANUFACTURING	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3 3 2 0 0	¥ 1
Full Name (Last, First, Middle Initial) GEORGE A. ABBOTT, JR.		Date of Receipt
Mailing Address	 	Series of Victorial V Substitution
211 WINFIELD DRIVE		0.5 3.0 2.0.1.4
City	State Zip Code	tion tradements Description and Resembles abstraction of
SPARTANBURG	SC 29302	Amount of Each Receipt this Period
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Name of Employer	Occupation	
INMAN MILLS	VP MANUFACTURING	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	A 4.1.5.40 s	8 1
Full Name (Last, First, Middle Initial) DAVID BLACKWELL		· Date of Receipt ·
Mailing Address 130 BLACKWELL PLACE		0 4 3 0 2 0 1 4
City INMAN	State Zip Code SC 29349	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3.0.0
Name of Employer	Occupation	
INMAN MILLS	IT MANAGER	
Receipt For: Primary General	Aggregate Year-to-Date ▼	***************************************
Other (specify) ▼	1 2 0 0	~ [] · · · · · · · · · · · · · · · · · ·

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Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any publical committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
INMAN MILLS GOOD GOVER	NMENT F	UND	
Full Name (Last, First, Middle Initial) A. DAVID BLACKWELL			. Date of Receipt
Mailing Address 130 BLACKWELL PLACE			0.5 3.0 2.0.1.4
City INMAN	State SC	Zip Code 29349	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		3.0.0.0
Name of Employer INMAN MILLS	Occupation I 1	r manager	
Receipt For: Primary	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) B. PATRICIA H. ROBBINS			Date of Receipt
Mailing Address 307 MITCHELL ROAD			0 4 3 0 2 0 1 4
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Name of Employer INMAN MILLS	Occupation CORP(ORATE SECRETARY	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 9.6A0.0	
Full Name (Last, First, Middle Initial) C. PATRICIA H. ROBBINS	· • · · · · · · · · · · · · · · · · · ·		Date of Receipt
Mailing Address 307 MITCHELL ROAD			0 5 3 0 2 0 1 4
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Full Name (Last, First, Middle Initial) WILLIAM E. BOWEN, JR.		Date of Receipt
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Mailing Address		Date of Receipt
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V	Full Name (Last, First, Middle Initial)	· · · · · · · · · · · · · · · · · · ·		
A	BRAD BURNETT			. Date of Receipt
٠.	Mailing Address P.O. BOX 308			0_5 3_0 2_0_1_4
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l h	FEC ID number of contributing federal political committee.	C	and the second s	4.0.0.0
	Name of Employer INMAN MILLS	Occupation PLANT	MANAGER	
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	
B B	Full Name (Last, First, Middle Initial) ROBERT H. CHAPMAN, III			Date of Receipt
٤	Mailing Address 543 OTIS BLVD.	. Obsta	7n Oods	0,4 13,0 2,0,1,4
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SCHEDULE A (FEC Form 3X)

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or for commercial purposes, other than using th	ne name and a	ddress of any political committee	to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)			:	
INMAN MILLS GOOD GOVER	RNMENT F	UND	•	
<u> </u>				
Full Name (Last, First, Middle Initial) A. NORMAN H. CHAPMAN			. Date of Receipt	
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764 PLUME STREET	· ·	<u></u>	04 30 2014	
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Carol (abenis) 🔻	in decident	3 1 2 0 0	(4	
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764 PLUME STREET			0.5 3.0 2.0.1.4	162200
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(-p), V	lanear bear solve	A A 3. 9. 0A0. 0		
Full Name (Last, First, Middle Initial)				
C. MICHAEL D. ELLIOTT			Date of Receipt	
Malling Address P.O. BOX 85			0 4 3 0 2 0 1 4	
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INMAN MILLS		NEL_DIRECTOR		
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abla	NAME OF COMMITTEE (In Full)				-			. •			
	INMAN MILLS GOOD GOVER	NMENT F	UND			•				٠.	
	Full Name (Last, First, Middle Initial) MICHAEL D. ELLIOTT				D	ete of	Receipt	·			
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	Name of Employer	Occupation								•	•
	INMAN MILLS	PERSON	NEL DIRECTOR								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼	more Assentan	125					-		•	
В.	Full Name (Last, First, Middle Initial) DON FOSTER		_		D	ate of	Receipt	i			
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	INMAN MILLS	CORP.	HR DIRECTOR								
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	INMAN MILLS	CORP	HR DIRECTOR	.							
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Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 6 OF 10

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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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 7 OF 10 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by any per	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) INMAN MILLS GOOD GOVE		
Full Name (Last, First, Middle Initial) A. WILLIAM C. HIGHTOWER,	III	Date of Receipt
Mailing Address 206 THORNHILL DR.		0.4 3.0 2.0.1.4
City SPARTANBURG	State Zip Code SC 29301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		3.60.0
Name of Employer INMAN MILLS	Occupation DIRECTOR OF PRODUCT DEVELOPMENT	
Receipt For: Primary	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) B. WILLIAM C. HIGHTOWER,	III.	Date of Receipt
Mailing Address 206 THORNHILL DR.		0 5 3 0 2 0 1 4
City SPARTANBURG	State Zip Code SC 29301	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3 6 0 0
Name of Employer INMAN MILLS	Occupation DIRECTOR OF PRODUCT DEVELOPMENT	
Receipt For: Primary	Aggregate Year-to-Date ▼ 1.8.0.0.0	
Full Name (Last, First, Middle Initial) C. JAMES C. PACE, JR.		Date of Receipt
Mailing Address 234 NORTH LAKE EMORY City	DRIVE State Zip Code	0 4 2 0 1 4
INMAN	SC 29349	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		4 4 0 0
Name of Employer INMAN MILLS	Occupation CFO	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	

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

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

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 10 (check only one)			
ITEMIZED RECEIPTS	for each category of the	(check only one)			
4	Detailed Summary Page	13 14 15 16 17			
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and	ay not be sold or used by any peaddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)	····				
/ INMAN MILLS GOOD GOVERNMENT F					
Full Name (Last, First, Middle Initial) A. JAMES C. PACE, JR.	· · · · · · · · · · · · · · · · · · ·	Date of Receipt			
Mailing Address 234 NORTH LAKE EMORY DRIVE		0.2 (3.0) (2.0.1.4)			
City State INMAN SC	Zip Code 29349	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		4 4 0 0			
Name of Employer Occupation INMAN MILLS CFO	n .				
Receipt For: Aggregate	Year-to-Date ▼	1			
Primary General Other (specify) ▼	2 2 0 0 0				
Full Name (Last, First, Middle Initial) B. KEMP SMITH		Date of Receipt			
Mailing Address P.O. BOX 187		0 4 / 3 0 / 2 0 1 4			
City State ENOREE SC	Zip Code 29335	Amount of Each Receipt this Period			
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Name of Employer Occupation INMAN MILLS PLAI	n NT MANAGER				
Receipt For: Aggregate	Year-to-Date ▼				
Primary General Other (specify) ▼	1 3 6 0 0	X I			
Full Name (Last, First, Middle Initial) C. KEMP SMITH		Date of Receipt			
Mailing Address P.O. BOX 187	· · · · · · · · · · · · · · · · · · ·	05/30/2014			
City State ENOREE SC	Zip Code 29335	Amount of Each Receipt this Period			
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Name of Employer Occupation INMAN MILLS PLAI	NT MANAGER				
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or for commercial purposes, other than using the name	e and address of any political committee	to solicit contributions from such committee.
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Full Name (Last, First, Middle Initial) A. BEN TRUSLOW		Date of Receipt
Mailing Address		Pare of Mescali
158 CARSHALTON DR.		0.4 3.0 2.0.1.4
	tate Zip Code SC 29365	Amount of Each Receipt this Period
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Other (specify)	1 6 8 0 0	
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Other (specify)	210,00	
Full Name (Last, First, Middle Initial) C. MICHAEL KEITH WOODS		Date of Receipt
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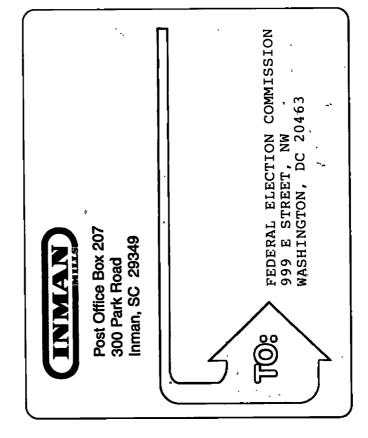
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A.	ull Name (Last, First, Middle Initial) CAC Mailing Address P.O. BOX 2995			Date of Disbursement
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_	Purpose of Disbursement CONTRIBUTION Candidate Name		0_1_1 Category/ Type	Amount of Each Disbursement this Period
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No Postmark	
Overnight Delivery Service (Specify): Next	Shipping Date t Business Day Delivery
Received from House Records & Registration Off	Date of Receipt fice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
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