

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEDERAL CENTER 25 JAN 15 AM 11:16

Office Use Only

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 INMAN SC 29349

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000142893

3. IS THIS REPORT NEW OR AMENDED (N) OR (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11/25/2008 through 12/31/2008

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 01/08/2009

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 table with 7 columns and 1 row, followed by FEC FORM 3X Rev. 12/2004

29039981844

**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:

1 1 / 2 5 / 2 0 0 8

To:

1 2 / 3 1 / 2 0 0 8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2 0 0 8	6 3 5 0 0	6 3 0 3 1 3
(b) Cash on Hand at Beginning of Reporting Period.....	7 9 7 8 1 3	
(c) Total Receipts (from Line 19).....	6 3 5 0 0	3 8 1 0 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 6 1 3 1 3	1 0 1 1 3 1 3
7. Total Disbursements (from Line 31).....	0 0 0	1 5 0 0 0 0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8 6 1 3 1 3	8 6 1 3 1 3
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

29039981845

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: **1 1 / 2 5 / 2 0 0 8** To: **1 2 / 3 1 / 2 0 0 8**

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).....	6 3 5 0 0	3 8 1 0 0 0
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6 3 5 0 0	3 8 1 0 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).....▶	6 3 5 0 0	3 8 1 0 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).....		
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)).....▶	6 3 5 0 0	3 8 1 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6 3 5 0 0	3 8 1 0 0 0

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**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.....		1,500.00
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))..	0 0 0	1,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0 0 0	1 5 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)		

29039981848

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

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

FOR LINE NUMBER: PAGE / OF 5
(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. GEORGE A. ABBOTT, JR.

Full Name (Last, First, Middle Initial)
Mailing Address
211 WINFIELD DRIVE
City State Zip Code
SPARTANBURG SC 29302

Date of Receipt
12 / 01 / 2008

Amount of Each Receipt this Period
8300

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS V P MANUFACTURING

Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
49800

B. DAVID BLACKWELL

Full Name (Last, First, Middle Initial)
Mailing Address
130 BLACKWELL PLACE
City State Zip Code
INMAN SC 29349

Date of Receipt
12 / 01 / 2008

Amount of Each Receipt this Period
3000

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS I T MANAGER

Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
18000

C. PATRICIA H. ROBBINS

Full Name (Last, First, Middle Initial)
Mailing Address
307 MITCHELL ROAD
City State Zip Code
INMAN SC 29349

Date of Receipt
12 / 01 / 2008

Amount of Each Receipt this Period
2400

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
INMAN MILLS CORPORATE SECRETARY

Receipt For: Primary General Other (specify)
Aggregate Year-to-Date
14400

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

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

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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:
(check only one)

PAGE 2 OF 5

<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) WILLIAM E. BOWEN, JR.		Date of Receipt 12 / 01 / 2008	
Mailing Address 137 MARSHALL BRIDGE DRIVE			
City GREENVILLE	State SC	Zip Code 29605	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4800	
Name of Employer INMAN MILLS		Occupation V P PURCHASING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 28800	

B. Full Name (Last, First, Middle Initial) BRAD BURNETT		Date of Receipt 12 / 01 / 2008	
Mailing Address P.O. BOX 308			
City ENOREE	State SC	Zip Code 29335	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000	
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 ▼ 24000	

C. Full Name (Last, First, Middle Initial) ROBERT H. CHAPMAN, III		Date of Receipt 12 / 01 / 2008	
Mailing Address 543 OTIS BLVD.			
City SPARTANBURG	State SC	Zip Code 29302	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9500	
Name of Employer INMAN MILLS		Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 57000	

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

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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 5		
	(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 12 / 01 / 2008
Mailing Address 764 PLUME STREET		Amount of Each Receipt this Period 7,800.00
City	State Zip Code SPARTANBURG SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 4,680.00
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. MICHAEL D. ELLIOTT		Date of Receipt 12 / 01 / 2008
Mailing Address P.O. BOX 85		Amount of Each Receipt this Period 2,500.00
City	State Zip Code WOODRUFF SC 29388	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1,500.00
Name of Employer INMAN MILLS	Occupation PERSONNEL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DON FOSTER		Date of Receipt 12 / 01 / 2008
Mailing Address 214 SPRINGS LAKE LOOP		Amount of Each Receipt this Period 3,000.00
City	State Zip Code SIMPSONVILLE SC 29681	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 1,800.00
Name of Employer INMAN MILLS	Occupation CORP. HR DIRECTOR	
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).....	

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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:
 (check only one)

PAGE **4** OF **5**

11a 11b 11c 12
 13 14 15 16 17

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

A. WILLIAM C. HIGHTOWER, III
 Full Name (Last, First, Middle Initial)
 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 **2,160.00**

Date of Receipt
12 / 01 / 2008
 Amount of Each Receipt this Period
360.00

B. JAMES C. PACE, JR.
 Full Name (Last, First, Middle Initial)
 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 **2,640.00**

Date of Receipt
12 / 01 / 2008
 Amount of Each Receipt this Period
440.00

C. KEMP SMITH
 Full Name (Last, First, Middle Initial)
 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 **2,040.00**

Date of Receipt
12 / 01 / 2008
 Amount of Each Receipt this Period
340.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,140.00**
TOTAL This Period (last page this line number only).....▶ **1,140.00**

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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:
(check only one)

PAGE 5 OF 5

<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. BEN TRUSLOW

Mailing Address

22 COBBLE HILL ROAD

City
FAIRVIEW

State Zip Code
NC 28730

FEC ID number of contributing
federal political committee.

C

Name of Employer
INMAN MILLS

Occupation
SALESMAN

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

2 5 2 0 0

Date of Receipt

1 2 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

4 2 0 0

Full Name (Last, First, Middle Initial)

B. MICHAEL KEITH WOODS

Mailing Address

204 HAMPTON BLVD.

City
GAFFNEY

State Zip Code
SC 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 5 6 0 0

Date of Receipt

1 2 / 0 1 / 2 0 0 8

Amount of Each Receipt this Period

2 6 0 0

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
INMAN MILLS

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).....▶

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

6 3 5 0 0

29039881853

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.

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<input type="checkbox"/> USPS First Class Mail	Postmarked
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<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

JMU
 PREPARER

1/15/09
 DATE PREPARED

29039981854