

**FEC  
FORM 3X**

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

RECEIVED

2012 JAN 30 AM 11:00  
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

FEC 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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on  /  /  In the State of

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on  /  /  In the State of

5. Covering Period

0 7 / 0 1 / 2 0 1 1

through

1 2 / 3 1 / 2 0 1 1

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 1 / 2 4 / 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

12030720955

**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:   /   /

12030720956

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		<input type="text" value="822738"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="588238"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="190500"/>	<input type="text" value="381000"/>
(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="778738"/>	<input type="text" value="1203738"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="200000"/>	<input type="text" value="625000"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="578738"/>	<input type="text" value="578738"/>
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	YY
07	01	2011

 To: 

MM	DD	YY
12	31	2011

**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).....

1 9 0 5 0 0

3 8 1 0 0 0

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....

1 9 0 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).....

1 9 0 5 0 0

3 8 5 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, 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)).....

1 9 0 5 0 0

3 8 1 0 0 0

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

1 9 0 5 0 0

3 8 1 0 0 0

12030720957

**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.....	2,000,000	6,250,000
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 .....	000,000	000,000
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))..	2,000,000	6,250,000
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2,000,000	6,250,000

12030720958

**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) .....



12030720959

**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 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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) <b>A. GEORGE A. ABBOTT, JR.</b>		Date of Receipt MM / DD / YYYY 07 / 29 / 2011
Mailing Address 211 WINFIELD DRIVE		Amount of Each Receipt this Period 8300
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 33200
Name of Employer INMAN MILLS	Occupation VP MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. GEORGE A. ABBOTT, JR.</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2011
Mailing Address 211 WINFIELD DRIVE		Amount of Each Receipt this Period 8300
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 41500
Name of Employer INMAN MILLS	Occupation VP MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. GEORGE A. ABBOTT, JR.</b>		Date of Receipt MM / DD / YYYY 11 / 30 / 2011
Mailing Address 211 WINFIELD DRIVE		Amount of Each Receipt this Period 8300
City SPARTANBURG	State Zip Code SC 29302	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 49800
Name of Employer INMAN MILLS	Occupation VP MANUFACTURING	
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).....▶	

12030720960

**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 14  
(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

**A. DAVID BLACKWELL**

Full Name (Last, First, Middle Initial)  
DAVID BLACKWELL

Date of Receipt: 07 / 29 / 2011

Mailing Address: 130 BLACKWELL PLACE  
City: INMAN State: SC Zip Code: 29349

Amount of Each Receipt this Period: 300.00

FEC ID number of contributing federal political committee: C

Name of Employer: INMAN MILLS Occupation: I T MANAGER

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date: 1200.00

**B. DAVID BLACKWELL**

Full Name (Last, First, Middle Initial)  
DAVID BLACKWELL

Date of Receipt: 09 / 30 / 2011

Mailing Address: 130 BLACKWELL PLACE  
City: INMAN State: SC Zip Code: 29349

Amount of Each Receipt this Period: 300.00

FEC ID number of contributing federal political committee: C

Name of Employer: INMAN MILLS Occupation: I T MANAGER

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date: 1500.00

**C. DAVID BLACKWELL**

Full Name (Last, First, Middle Initial)  
DAVID BLACKWELL

Date of Receipt: 11 / 30 / 2011

Mailing Address: 130 BLACKWELL PLACE  
City: INMAN State: SC Zip Code: 29349

Amount of Each Receipt this Period: 300.00

FEC ID number of contributing federal political committee: C

Name of Employer: INMAN MILLS Occupation: I T MANAGER

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date: 1800.00

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

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

.....

.....

12030720961

**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 14  
(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. PATRICIA H. ROBBINS**

Mailing Address  
307 MITCHELL ROAD  
City State Zip Code  
INMAN SC 29349

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 ▼  
**9 6 0 0**

Date of Receipt  
**0.7 / 2.9 / 2.0.1.1**

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

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

Mailing Address  
307 MITCHELL ROAD  
City State Zip Code  
INMAN SC 29349

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 ▼  
**1 2 0 0 0**

Date of Receipt  
**0.9 / 3.0 / 2.0.1.1**

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

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

Mailing Address  
307 MITCHELL ROAD  
City State Zip Code  
INMAN SC 29349

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 ▼  
**1 4 4 0 0**

Date of Receipt  
**1.1 / 3.0 / 2.0.1.1**

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

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

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

**2 4 0 0**

**2 4 0 0**

12030720962



**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 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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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

Name of Employer

INMAN MILLS

Occupation

VP PURCHASING

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

19200

Date of Receipt

07 / 29 / 2011

Amount of Each Receipt this Period

4800

Full Name (Last, First, Middle Initial)

B. 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

INMAN MILLS

Occupation

VP PURCHASING

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

24000

Date of Receipt

09 / 30 / 2011

Amount of Each Receipt this Period

44800

Full Name (Last, First, Middle Initial)

C. 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

INMAN MILLS

Occupation

VP PURCHASING

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

28800

Date of Receipt

11 / 30 / 2011

Amount of Each Receipt this Period

48000

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

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


12030720963

**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 14  
(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**

**A. BRAD BURNETT**

Full Name (Last, First, Middle Initial)  
Mailing Address  
PO BOX 308  
City ENOREE State SC Zip Code 29335

Date of Receipt  
07 / 29 / 2011

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:  Primary  General  Other (specify)  Aggregate Year-to-Date 16000

**B. BRAD BURNETT**

Full Name (Last, First, Middle Initial)  
Mailing Address  
PO BOX 308  
City ENOREE State SC Zip Code 29335

Date of Receipt  
09 / 30 / 2011

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:  Primary  General  Other (specify)  Aggregate Year-to-Date 20000

**C. BRAD BURNETT**

Full Name (Last, First, Middle Initial)  
Mailing Address  
PO BOX 308  
City ENOREE State SC Zip Code 29335

Date of Receipt  
11 / 30 / 2011

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:  Primary  General  Other (specify)  Aggregate Year-to-Date 24000

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

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


12030720964

**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 14
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**ROBERT H. CHAPMAN, III**

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 8 0 0 0**

Date of Receipt  
**0 7 / 2 9 / 2 0 1 1**

Amount of Each Receipt this Period  
**9 5 0 0**

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT H. CHAPMAN, III**

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 7 5 0 0**

Date of Receipt  
**0 9 / 3 0 / 2 0 1 1**

Amount of Each Receipt this Period  
**9 5 0 0**

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT H. CHAPMAN, III**

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 ▼ **5 7 0 0 0**

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

Amount of Each Receipt this Period  
**9 5 0 0**

**SUBTOTAL** of Receipts This Page (optional).....▶ **9 5 0 0**

**TOTAL** This Period (last page this line number only).....▶ **9 5 0 0**

12030720965

**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 14  
 (check only one)  
 11a    11b    11c    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 Zip Code  
 SC 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

07 / 29 / 2011

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 Zip Code  
 SC 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

09 / 30 / 2011

Amount of Each Receipt this Period

780.00

Full Name (Last, First, Middle Initial)

**C. NORMAN H. CHAPMAN**

Mailing Address

764 PLUME STREET

City  
 SPARTANBURG

State Zip Code  
 SC 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 ▼

4,680.00

Date of Receipt

11 / 30 / 2011

Amount of Each Receipt this Period

780.00

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

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

.....

.....

12030720966

**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 14  
(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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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) <b>A. MICHAEL D. ELLIOTT</b>		Date of Receipt 07 / 29 / 2011
Mailing Address PO BOX 85		Amount of Each Receipt this Period 2500
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 10000
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) <b>B. MICHAEL D. ELLIOTT</b>		Date of Receipt 09 / 30 / 2011
Mailing Address PO BOX 85		Amount of Each Receipt this Period 2500
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 12500
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) <b>C. MICHAEL D. ELLIOTT</b>		Date of Receipt 11 / 30 / 2011
Mailing Address PO BOX 85		Amount of Each Receipt this Period 2500
City WOODRUFF	State Zip Code SC 29388	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 15000
Name of Employer INMAN MILLS	Occupation PERSONNEL 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).....


12030720967

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

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

FOR LINE NUMBER: PAGE 9 OF 14

(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. DON FOSTER**

Mailing Address

214 SPRINGS LAKE LOOP

City  
SIMPSONVILLE

State Zip Code  
SC 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 7 / 2 9 / 2 0 1 1

Amount of Each Receipt this Period

3 0 0 0

Full Name (Last, First, Middle Initial)

**B. DON FOSTER**

Mailing Address

214 SPRINGS LAKE LOOP

City  
SIMPSONVILLE

State Zip Code  
SC 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 9 / 3 0 / 2 0 1 1

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 Zip Code  
SC 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 8 0 0 0

Date of Receipt

1 1 / 3 0 / 2 0 1 1

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).....▶


12030720968

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

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

FOR LINE NUMBER: PAGE 10 OF 14

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
13	14	15	16	

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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 Zip Code  
SC 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 ▼  
1,440.00

Date of Receipt

07 / 29 / 2011

Amount of Each Receipt this Period

3,600

Full Name (Last, First, Middle Initial)

B. WILLIAM C. HIGHTOWER, III

Mailing Address

206 THORNHILL DR.

City  
SPARTANBURG

State Zip Code  
SC 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 ▼  
1,800.00

Date of Receipt

09 / 30 / 2011

Amount of Each Receipt this Period

3,600

Full Name (Last, First, Middle Initial)

C. WILLIAM C. HIGHTOWER, III

Mailing Address

206 THORNHILL DR.

City  
SPARTANBURG

State Zip Code  
SC 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

11 / 30 / 2011

Amount of Each Receipt this Period

3,600

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

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


12030720969

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

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

FOR LINE NUMBER: PAGE 11 OF 14  
(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. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City State Zip Code  
INMAN SC 29394

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

07 / 29 / 2011

Amount of Each Receipt this Period

440.00

Full Name (Last, First, Middle Initial)

B. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City State Zip Code  
INMAN SC 29394

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 ▼  
2,200.00

Date of Receipt

09 / 30 / 2011

Amount of Each Receipt this Period

440.00

Full Name (Last, First, Middle Initial)

C. JAMES C. PACE, JR.

Mailing Address

234 NORTH LAKE EMORY DRIVE

City State Zip Code  
INMAN SC 29394

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

11 / 30 / 2011

Amount of Each Receipt this Period

440.00

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

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

12030720970



**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 12 OF 14	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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

A. Full Name (Last, First, Middle Initial) <b>KEMP SMITH</b>		Date of Receipt <b>07 / 29 / 2011</b>
Mailing Address <b>PO BOX 187</b>		Amount of Each Receipt this Period <b>3400</b>
City <b>ENOREE</b>	State Zip Code <b>SC 29335</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>13600</b>
Name of Employer <b>INMAN MILLS</b>	Occupation <b>PLANT MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) <b>KEMP SMITH</b>		Date of Receipt <b>09 / 30 / 2011</b>
Mailing Address <b>PO BOX 187</b>		Amount of Each Receipt this Period <b>3400</b>
City <b>ENOREE</b>	State Zip Code <b>SC 29335</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>17000</b>
Name of Employer <b>INMAN MILLS</b>	Occupation <b>PLANT MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) <b>KEMP SMITH</b>		Date of Receipt <b>11 / 30 / 2011</b>
Mailing Address <b>PO BOX 187</b>		Amount of Each Receipt this Period <b>3400</b>
City <b>ENOREE</b>	State Zip Code <b>SC 29335</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date <b>20400</b>
Name of Employer <b>INMAN MILLS</b>	Occupation <b>PLANT MANAGER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<b>3400</b>
TOTAL This Period (last page this line number only).....	<b>3400</b>

12030720971

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

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

FOR LINE NUMBER: PAGE 13 OF 14  
(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**

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

Mailing Address  
**224 S. LAURENS ST. UNIT #406**

City State Zip Code  
**GREENVILLE SC 29601**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
**0 7 / 2 9 / 2 0 1 1**

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

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

Mailing Address  
**224 S. LAURENS ST. UNIT # 406**

City State Zip Code  
**GREENVILLE SC 29601**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
**0 9 / 3 0 / 2 0 1 1**

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

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

Mailing Address  
**224 S. LAURENS ST. UNIT # 406**

City State Zip Code  
**GREENVILLE SC 29349**

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2 5 2 0 0**

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

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

**SUBTOTAL of Receipts This Page (optional).....** ▶ **4 2 0 0**

**TOTAL This Period (last page this line number only).....** ▶ **4 2 0 0**

12030720972

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

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

FOR LINE NUMBER: PAGE 14 OF 14  
(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**

**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 0 4 0 0**

Date of Receipt  
**0 7 / 2 9 / 2 0 1 1**

Amount of Each Receipt this Period  
**2 6 0 0**

**B. 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 3 0 0 0**

Date of Receipt  
**0 9 / 3 0 / 2 0 1 1**

Amount of Each Receipt this Period  
**2 6 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 5 6 0 0**

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

Amount of Each Receipt this Period  
**2 6 0 0**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1 9 0 5 0 0**

**TOTAL** This Period (last page this line number only)..... ▶ **1 9 0 5 0 0**

12030720973

**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"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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

Full Name (Last, First, Middle Initial) <b>A. TEAM GRAHAM</b>		Date of Disbursement MM / DD / YYYY <b>10 / 24 / 2011</b>
Mailing Address <b>P. O. BOX 1801</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>COLUMBIA</b>	State <b>SC</b>	
Zip Code <b>29202</b>		Category/ Type <b>0 1 1</b>
Purpose of Disbursement <b>CONTRIBUTION</b>		
Candidate Name <b>LINDSEY GRAHAM</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>SC</b>	District:	

Full Name (Last, First, Middle Initial) <b>B. GOWDY TO CONGRESS</b>		Date of Disbursement MM / DD / YYYY <b>08 / 18 / 2011</b>
Mailing Address <b>P. O. BOX 3324</b>		Amount of Each Disbursement this Period <b>1,000.00</b>
City <b>SPARTANBURG</b>	State <b>SC</b>	
Zip Code <b>29304</b>		Category/ Type <b>0 1 1</b>
Purpose of Disbursement <b>CONTRIBUTION</b>		
Candidate Name <b>TREY GOWDY</b>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: <b>SC</b>	District: <b>4TH.</b>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	
<b>TOTAL</b> This Period (last page this line number only).....	<b>2000.00</b>

12030720974

**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) <i>1/24/12</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

*JML*  
 PREPARER  
 (3/2005)

*1/30/12*  
 DATE PREPARED

12030720975