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FORM USE ONLY

FEC  
FORM 3X

REPORT OF RECEIPTS  
AND DISBURSEMENTS  
For Other Than An Authorized Committee

1 NAME OF COMMITTEE (to file) TYPE OR PRINT Example: If typing type over the lines 12345678

AMERICAN YARN SPINNERS ASSOCIATION INC  
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) P O BOX 99

Check if different than previously reported (AOO)

CITY STATE ZIP CODE

GASTONIA N.C. 28053

2 FEC IDENTIFICATION NUMBER

C 6 0 1 7 2 8 6 6

3 IS THIS REPORT NEW OR AMENDED (A)

X

4. TYPE OF REPORT	(a) Monthly Report Due On	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) Nov Current Year Only
(a) Quarterly Reports	Apr 15	Jul 20 (M3)	Oct 20 (M6)	Jan 20 (M9)	Dec 20 (M12) Nov Current Year Only
July 15	Oct 20 (M4)	Jan 20 (M7)	Apr 20 (M10)	Jul 20 (M13)	Jan 31 (YE)
October 15	Quarterly Report (Q1)	Quarterly Report (Q2)	Quarterly Report (Q3)	Quarterly Report (Q4)	
January 31	Year-End Report (YE)				
June 30	Mid-Year Report (Non-election year Only) (MY)				
X	Registration Report (RR)				
(b) 12-Day PRE-ELECTION Report for the Election in	Primary (12P)	General (12G)	Special (12S)	Runoff (12R)	Special (12S)
(c) 30-Day POST-ELECTION Report for the Election in	General (30G)	Runoff (30R)	Special (30S)		

5 Covered Period 0 1 0 1 2 0 0 4 through 0 6 3 0 2 0 0 4

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 MICHAEL S. HUBBARD

Signature of Treasurer Date 0 7 1 5 2 0 0 4

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							
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FEC FORM 3X  
(Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Page 2

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

AMERICAN YARN SPINNERS ASSOCIATION INC. POLITICAL ACTION COMMITTEE

Report Covering the Period From 01 01 2004 To 06 30 2004

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6	(a) Cash on Hand January 1	2 0 0 4	3 0 5 6 8 7
	(b) Cash on Hand at Beginning of Reporting Period	3 0 5 6 8 7	
	(c) Total Receipts from Line 19f	0 0 0	0 0 0
	(d) Subtotal (add Lines 6(b) and (c) for Column A and Lines 6(a) and 6(c) for Column B)	3 0 5 6 8 7	3 0 5 6 8 7
7	Total Disbursements from Line 21f	3 0 5 6 8 7	3 0 5 6 8 7
8	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	0 0 0	0 0 0
9	Debits and Obligations Owed TO the Committee (Items III on Schedule C and/or Schedule D)		
10	Debits and Obligations Owed BY the Committee (Items III on Schedule C and/or Schedule D)		

This committee has qualified as a noncandidate 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

Page 3

FEC Form 2X (Rev. 02/2003)

Write or Type Committee Name

AMERICAN YARN SPINNERS ASSOCIATION INC. POLITICAL ACTION COMMITTEE

Report Covering the Period from 01 01 2004 to 06 30 2004

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) Married (see Schedule A)		
(ii) Unmarried		
(ii) TOTAL (add Lines 11(i)(i) and (ii))		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(ii) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry totals to Line 33, page 5)		
12 Transfers From Affiliated/Other Party Committees		
13 All Loans Received		
14 Loan Repayments Received		
15 Officers To Operating Expenses (Salaries, Stipends, 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 Accounts (from Schedule H-3)		
(b) Levin Funds (from Schedule H-4)		
(c) Total Transfers (add 18(a) and 18(b))		
19 Total Receipts (add Lines 11(ii), 12, 13, 14, 15, 16, 17, and 18(c))	0 0 0	0 0 0
20 Total Federal Receipts (subtract Line 18(a) from Line 19)		

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 2X (Rev. 03/2003)

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	3 0 5 6 8 7	3 0 5 6 8 7
24	Independent Expenditures (use Schedule E)		
25	Coordinated Party Expenditures (2 U.S.C. §441a(2)) (use Schedule F)		
26	Loan Payments Made		
27	Loans Made		
28	Returns of Contributions To:		
(a)	Individuals/Persons Other Than Political Committees		
(b)	Political Party Committees		
(c)	Other Political Committees (such as PACs)		
(d)	Total Contributions Returned (add Lines 28(a), (b), and (c))		
29	Other Disbursements		
30	Federal Election Activity (2 U.S.C. §431(2))		
(a)	Allocated Federal Election Activity (from Schedule H5)		
(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(a), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3 0 5 6 8 7	3 0 5 6 8 7
32	Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31)	3 0 5 6 8 7	3 0 5 6 8 7

**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)							
	<input type="checkbox"/> 21b	<input type="checkbox"/> 27	<input type="checkbox"/> 27a	<input checked="" type="checkbox"/> 28	<input type="checkbox"/> 28b	<input type="checkbox"/> 29	<input type="checkbox"/> 29a	<input type="checkbox"/> 29b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of raising 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)  
**AMERICAN YARN SPINNERS ASSOCIATION INC. POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>SHE MYRICK FOR CONGRESS</b>		Date of Disbursement <b>06 04 2004</b>
Mailing Address <b>P.O. BOX 37091</b>		Amount of Each Disbursement This Period <b>1 0 5 6 8 7</b>
City <b>CHARLOTTE</b>	State Zip Code <b>NC 28237</b>	
Purpose of Disbursement <b>RE-ELECTION CONTRIBUTION</b>		Category/Type
Candidate Name <b>SHE MYRICK</b>		
Office Sought <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State <b>NC</b>	District	

Full Name (Last, First, Middle Initial) <b>NATHAN DEAL FOR CONGRESS COMMITTEE</b>		Date of Disbursement <b>06 04 2004</b>
Mailing Address <b>PO BOX 902</b>		Amount of Each Disbursement This Period <b>5 0 0 0 0</b>
City <b>GAINESVILLE</b>	State Zip Code <b>GA 30503</b>	
Purpose of Disbursement <b>RE-ELECTION CONTRIBUTION</b>		Category/Type
Candidate Name <b>NATHAN DEAL</b>		
Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State <b>GA</b>	District	

Full Name (Last, First, Middle Initial) <b>BERRY FOR CONGRESS COMMITTEE</b>		Date of Disbursement <b>06 04 2004</b>
Mailing Address <b>PO BOX 6384</b>		Amount of Each Disbursement This Period <b>5 0 0 0 0</b>
City <b>JONESBORO</b>	State Zip Code <b>NC 72403</b>	
Purpose of Disbursement <b>RE-ELECTION CONTRIBUTION</b>		Category/Type
Candidate Name <b>MARION BERRY</b>		
Office Sought <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State <b>NC</b>	District	

SUBTOTAL of Disbursements This Page (section 1)	<b>2 0 5 6 8 7</b>
TOTAL This Period (last page this line number only)	

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

Use separate schedules  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER  
(check only one)

PAGE 1 OF 2

21a  22  23  24  25  26  
 27  28a  28b  28c  29  30b

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NAME OF COMMITTEE (in Full)

AMERICAN YARN SPINNERS ASSOCIATION INC. POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. RANGEL FOR CONGRESS		06 04 2004
Mailing Address PO BOX 5577 MANHATTANVILLE STATION		Amount of Each Disbursement This Period  500.00
City	State Zip Code	
NEW YORK	NY 10027	
Purpose of Disbursement RE-ELECTION CONTRIBUTION		
Candidate Name CHARLES RANGEL		Category/ Type
Office Sought	Disbursement For:	
House Senate President	Primary <input checked="" type="checkbox"/> General Other (specify) ▼	
State NY	District	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. BILL THOMAS FOR CONGRESS COMMITTEE		06 04 2004
Mailing Address PO BOX 245		Amount of Each Disbursement This Period  500.00
City	State Zip Code	
BAKERSFIELD	CA 93302	
Purpose of Disbursement RE-ELECTION CONTRIBUTION		
Candidate Name BILL THOMAS		Category/ Type
Office Sought	Disbursement For:	
House Senate President	Primary <input type="checkbox"/> General Other (specify) ▼	
State CA	District	

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

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page if 2 page form number only)	3,036.87

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
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Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS Express</i>	Shipping Date <i>7-15-04</i>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JMB</i> PREPARER	<i>7-16-04</i> DATE PREPARED
(5/2004)	