

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

John House for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 07 / 11 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1235.00	87645.07
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1235.00	87645.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6143.98	95253.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	6143.98	95253.36
8. Cash on Hand at Close of Reporting Period (from Line 27).....	5220.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	12829.05	

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 3 (Revised 12/2003)

Write or Type Committee Name

John House for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	750.00	61965.50
(ii) Unitemized.....	485.00	25679.57
(iii) TOTAL of contributions from individuals ▶	1235.00	87645.07
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1235.00	87645.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	12829.05
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	12829.05
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1235.00	100474.12

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6143.98	95253.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	6143.98	95253.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	10129.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1235.00
25. SUBTOTAL (add Line 23 and Line 24).....	11364.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6143.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	5220.76

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 5 OF 10

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)
John House for Congress

A. Full Name (Last, First, Middle Initial)
William Harper

Mailing Address 2100 North Avenue

City Columbus State GA Zip Code 31904

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

Name of Employer physician Occupation Urology Center of Columbus

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2012

Transaction ID : SA11AI.4822

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
William McWhirter

Mailing Address 507 Biggers Rd. Lot2

City Columbus State GA Zip Code 31904

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

Name of Employer retired Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2012

Transaction ID : SA11AI.4824

Amount of Each Receipt this Period
 500.00

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)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 10			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
John House for Congress

Full Name (Last, First, Middle Initial) A. Classic Printing		Date of Disbursement MM / DD / YYYY 07 / 05 / 2012
Mailing Address 1104 North Slappey Blvd		Amount of Each Disbursement this Period 246.10 Transaction ID : SB17.4808
City Albany State GA Zip Code 31701	Purpose of Disbursement Copies for Merry Acres Event Category/Type 007	
Candidate Name John House for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 02		

Full Name (Last, First, Middle Initial) B. Georgia Power Company		Date of Disbursement MM / DD / YYYY 07 / 05 / 2012
Mailing Address 96 Annex		Amount of Each Disbursement this Period 698.58 Transaction ID : SB17.4807
City Atlanta State GA Zip Code 30396	Purpose of Disbursement Office Electric Category/Type 001	
Candidate Name John House for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 02		

Full Name (Last, First, Middle Initial) c. The Watkins Group, Inc.		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 1415 Hwy 85N		Amount of Each Disbursement this Period 4059.30 Transaction ID : SB17.4802
City Fayetteville, State GA Zip Code 30214	Purpose of Disbursement Commercial Production & Signs Category/Type 004	
Candidate Name John House for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: GA District: 02		

SUBTOTAL of Disbursements This Page (optional).....	5003.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 10			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
John House for Congress

Full Name (Last, First, Middle Initial) A. The Watkins Group, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 1415 Hwy 85N		Amount of Each Disbursement this Period 480.00 Transaction ID : SB17.4805
City Fayetteville,	State GA	
Purpose of Disbursement Event expenses	Category/ Type 007	
Candidate Name John House for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: GA District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. The Watkins Group, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 1415 Hwy 85N		Amount of Each Disbursement this Period 660.00 Transaction ID : SB17.4806
City Fayetteville,	State GA	
Purpose of Disbursement Mailings & website	Category/ Type 003	
Candidate Name John House for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: GA District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

SUBTOTAL of Disbursements This Page (optional).....	1140.00
TOTAL This Period (last page this line number only).....	6143.98

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **John House for Congress** Transaction ID : **SC/10.4425**

LOAN SOURCE Full Name (Last, First, Middle Initial) **John House** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
7618 Eagle Drive

City State ZIP Code
Midland GA 31820-4324

Original Amount of Loan 7492.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 7492.00
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TERMS

Date Incurred M 01 / D 03 / Y 2012	Date Due M M / D D / Y demand	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 7492.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **John House for Congress** Transaction ID : **SC/10.4735**

LOAN SOURCE Full Name (Last, First, Middle Initial) **John House** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
7618 Eagle Drive

City Midland State GA ZIP Code 31820-4324

Original Amount of Loan 5220.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5220.00
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TERMS

Date Incurred: M 05 / D 18 / Y 2012
 Date Due: M / D / Y demand
 Interest Rate: % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 5220.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4736

John House for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

John House

Primary

General

Other (specify) ▼

Mailing Address
7618 Eagle Drive

City State ZIP Code
Midland GA 31820-4324

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
117.05 0.00 117.05

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

04

2012

demand

% (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) 117.05
TOTALS This Period (last page in this line only) 12829.05

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.