07/03/2023 10 : 52

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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 011111 0	For An Aut	horized Com	mittee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing, type er the lines.	12FE4M5	
John Whitley for Co	ongress				
		1 1 1 1 1			
	PO Box 314	1 1 1 1 1			
ADDRESS (number and stree	t)				
Check if different than previously reported. (ACC)	Kannapolis			NC 280	82
2. FEC IDENTIFICATION	N NIIMRED W	CITY ▲		STATE ▲	ZIP CODE ▲
C C00504431		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT NC 08 08
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)) 12-Day PRE	-Election Report for Primary (12P) Convention (12C)	the: General (12G) Special (12S)	Runoff (12R)
October 15 Qu	uarterly Report (Q3)	Election on	M M / D	D / Y " Y " Y " Y	in the State of
January 31 Ye	ar-End Report (YE) (c	30-Day POS	T-Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Re	eport (TER)	Election on	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D D / Y	2023 Y	through	M M / D D / Y	Y Y Y 2023
I certify that I have examine	Waters, Sarah, H		nowledge and belief i	t is true, correct and co	mplete.
Signature of Treasurer	Waters, Sarah, Hill, Mrs.,		[Electronically Filed]	Date 07	03 /
NOTE: Submission of false, e	erroneous, or incomplete i	nformation may	subject the person sig	ning this Report to the po	enalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
John Whitley for Congress

R	epor	Covering the Period: From:	04 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	То:	06 30 /	^Y 2023 ^Y
			COLUMN A This Period		COLUMN B Election Cycle-to	
6.	Net	Contributions (other than loans)				
	(a)	Total Contributions (other than loans) (from Line 11(e))	7 7	0.00		43007.49
	(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))		0.00		43007.49
7.	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)		0.00		229741.47
	(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))		0.00		229741.47
8.		orting Period (from Line 27)	12	211.02		
9.	the	ots and Obligations Owed TO Committee (Itemize all on sedule C and/or Schedule D)		0.00		
10.	the	ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	1889	950.00		

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 / 11 FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

John Whitley for Congress

04 2023 06 30 2023 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)	0.00	32450.00	
	(ii) Unitemized(iii) TOTAL of contributions	0.00	2905.00	
	from individuals	0.00	35355.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) The Candidate	0.00	7652.49	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49	
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	LOANS:			
	(a) Made or Guaranteed by the Candidate	0.00	188950.00	
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00	
	(add Lines 13(a) and (b))	0.00	188950.00	
4.	OFFSETS TO OPERATING EXPENDITURES			
	(Refunds, Rebates, etc.)	0.00	0.00	
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	231957.49	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

rsements

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II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
17.	OPERATING EXPENDITURES	0.00	229741.47	
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	1005.00	
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	230746.47	
	III. CASH SU	MMARY		
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1211.02	
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00	
25.	SUBTOTAL (add Line 23 and Line 24)		1211.02	
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00	
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			1211.02	

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

FOR LINE NUMBER: (check only one)

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X 13a 13b

11

Transaction ID: SC/10.4313 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 7000.00 0.00 7000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 ^D16^D Ž011 ŎN ĎEMANĎ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 7000.00 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.

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

FOR LINE NUMBER: (check only one)

PAGE

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X 13a 13b

			130
AME OF COMMITTEE (In Full) John Whitley for Congress			Transaction ID : SC/10.4314
LOAN SOURCE Full Name (Last, Whitley, John, Matthew, D. Mailing Address PO Box 314		ddle Initial)	☐ Memo Item Election: 2012 # Primary General Other (specify) ▼
City		State	ZIP Code
Kannapolis		NC	28082 Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
20000	0.00		0.00 20000.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D20D / Y Ž01Ť	Y	M M / D D	
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)	l	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		
TOTALS This Period (last page in this	line only	/)	————
Carry outstanding balance only to LII	NE 3, Scl	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE FOR LINE NUMBER: **X** 13a (check only one)

OF

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13b Transaction ID: SC/10.4445 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) \blacktriangledown PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D06D M 02M Ž01Ž **ÖNDEMÄND** x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 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.

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

PAGE 8 OF FOR LINE NUMBER: (check only one)

X 13a 13b

		100
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4446
LOAN SOURCE Full Name (Last, First, Whitley, John, Matthew, Dr.,	Middle Initial)	☐ Memo Item Election: 2012 ▼ Primary
Mailing Address PO Box 314		General Other (specify) ▼
City Kannapolis	State	ZIP Code 28082 Personal Funds of the Candidate
·		
Original Amount of Loan 22000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 22000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M03 ^M / D20 ^D / Y Ž01Ž Y	M M / D D	/ ŎNĎEMĂNĎ 0.00
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
maining / doi:000		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
4. Full Name (Last, First, Middle Initial)	211 0000	Outstanding: Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	al)	22000.00
TOTALS This Period (last page in this line of		, 2200.00
		7 7
Carry outstanding balance only to LINE 3,	schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE FOR LINE NUMBER: (check only one)

OF

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X 13a Detailed Summary Page 13b Transaction ID: SC/10.4465 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) \blacktriangledown PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 27200.00 0.00 27200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D04D M 04M Ž01Ž On Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 27200.00 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.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4466
LOAN SOURCE Full Name (Last, First, Mi Whitley, John, Matthew, Dr.,	ddle Initial)	Memo Item Election: 2012 x Primary General
Mailing Address PO Box 314		Other (specify) ▼
City Kannapolis	State	ZIP Code 28082 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	
10250.00	oundative 1 a	0.00 10250.00
TERMS Date Incurred	С	rate Due Interest Rate Secured: (If none, enter 0)
M04 ^M / D18 ^D / Y Z01Ž Y	M M / D D	✓ On Ďemand O.00 % (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
3. Full Name (Last, First, Middle Initial)		Outstanding: 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
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		10250.00
TOTALS This Period (last page in this line on	ly)	7 7 7
Carry outstanding balance only to LINE 2 So	hedule D. for this	s line. If no Schedule D, carry forward to appropriate line of Summary.
ourly outstanding palatice offig to LINE 3, 30	neuule D, IOI (NI	inte. It no ochedule b, carry lorward to appropriate line or outfillary.

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

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FOR LINE NUMBER:
(check only one)

X 13a

		100
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4479
LOAN SOURCE Full Name (Last, First, Mid Whitley, John, Matthew, Dr.,	ddle Initial)	☐ Memo Item Election: 2012 ▼ Primary
Mailing Address PO Box 314		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Kannapolis	NC	28082
Original Amount of Loan	Cumulative Page	ment To Date Balance Outstanding at Close of This Period
2500.00		0.00 2500.00
TERMS Date Incurred	С	ate Due Interest Rate Secured:
^M 04 ^M / ^D 30 ^D / ^Y Ž01Ž ^Y	M M / D D	✓ On Ďemand O.00 % (apr) Yes 🗶 No
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
011	710.0.1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		
CODICIALS THIS FERIOU THIS FAGE (OPHORIAI).		2500.00
TOTALS This Period (last page in this line only	/) ······	188950.00
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.