PAGE 1 / 11

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

10111110	For An Autho	rized Committee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	e 12FE4M5	
John Whitley for Con	ngress			
ADDRESS (number and street)	PO Box 314			
V				
Check if different than previously reported. (ACC)	Kannapolis		NC 280	B2
	NIIMDED W	CITY A	STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATION C C00504431	3.	IS THIS NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT NC 08 UNC 08
	y Report (Q1) y Report (Q2) rterly Report (Q3) -End Report (YE) (c)	12-Day PRE-Election Report for Primary (12P) Convention (12C) Election on 30-Day POST-Election Report fo General (30G) Election on	General (12G) Special (12S)	in the State of Special (30S) in the State of
5. Covering Period	10 01 Y	2021 through	M M M / D D / Y 12	y y y y 2021
I certify that I have examined Type or Print Name of Treasu	Waters, Sarah, Hill,	pest of my knowledge and belief in Mrs.,	it is true, correct and con	mplete.
Signature of Treasurer	Vaters, Sarah, Hill, Mrs.,	[Electronically Filed]	Date 01	07
NOTE: Submission of false, err	oneous, or incomplete info	ormation may subject the person sig	gning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 11

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
John Whitley for Congress

2021 10 2021 12 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 43007.49 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 43007.49 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 229741.47 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 229741.47 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 1211.02 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 188950.00 Schedule C and/or Schedule D).....

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

10 2021 31 2021 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	0.00	2905.00	
	(iii) TOTAL of contributions 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(e) TOTAL CONTRIBUTIONS	0.00	7652.49	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49	
	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	0.00	0.00	
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	188950.00	
	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
	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)

ursements

PAGE 4 / 11

	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	JMMARY		
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1211.02	
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00	
25.	SUBTOTAL (add Line 23 and Line 24)		1211.02	
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00	
27.	27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)			

SCHEDULE C (FEC Form 3)

Use separate schedule(s)

PAGE 5 FOR LINE NUMBER:

OF

11

for each category of the **X** 13a **LOANS** (check only one) Detailed Summary Page 13b 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

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

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

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

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

OF

11

13b Transaction ID: SC/10.4314 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 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 ^D20^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)..... 20000.00 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 7
FOR LINE NUMBER: (check only one)

X 13a 13b

		13b
AME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4445
LOAN SOURCE Full Name (Last, Fire Whitley, John, Matthew, Dr., Mailing Address PO Box 314		☐ Memo Item Election: 2012
City Kannapolis	State NC	ZIP Code 28082 Personal Funds of the Candidate
Original Amount of Loan		Payment To Date Balance Outstanding at Close of This Period 100000.00
TERMS Date Incurred M02M / D06D / Y Z012 Y		Date Due Interest Rate (If none, enter 0) D / ÖNDEMÄND 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if		
1. Full Name (Last, First, Middle Initial	al)	Name of Employer
Mailing Address		Occupation
City	ate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initia)	Name of Employer
Mailing Address		Occupation
City	ate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initia)	Name of Employer
Mailing Address		Occupation
City	ate ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initia)	Name of Employer
Mailing Address		Occupation
City	ate ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (opt	·	, issued
Carry outstanding balance only to LINE	3, Schedule D. for th	nis 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

8

13a

						130
AME OF COMMITTEE (In Full) John Whitley for Congress				Transactio	on ID : SC/10.4446	
LOAN SOURCE Full Name (Last, Whitley, John, Matthew, D Mailing Address PO Box 314		ddle Initial)	_ n	Memo Item	Election: 2012 Primary General Other (specify)	
City State ZIP Co			IP Code		M Damanal Funda of the C	
Kannapolis NC 28082			28082		Personal Funds of the C	,andidate
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			Balanc	e Outstanding at Close of Ti	nis Period
22000.00			0.00		22000	.00
TERMS Date Incurred		D		nterest Rate f none, enter 0)	Secured	:
M03 ^M / D20 ^D / Y Z012 Y M M / D D / Ö			/ ÖNĎEMĂNĎ	0.00		× No
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle Ir	nitial)		Name of Emplo	oyer		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Ini	tial)		Name of Emplo	oyer		
Mailing Address			Occupation			
			Amount			_
City	State	ZIP Code	Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle Ini	3. Full Name (Last, First, Middle Initial)			oyer		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	L.,	y	_
4. Full Name (Last, First, Middle Initial)			Name of Emplo	oyer		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:		7	
SUBTOTALS This Period This Page (o				· [, , , , , , , , , , , , , , , , , , , ,	.00
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Carry outstanding balance only to LIN	IE 3, Sch	nedule D, for this	ne. If no Schedule D,	carry forwar	rd to appropriate line of Su	mmary.

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

FOR LINE NUMBER: (check only one)

PAGE

9

13a

OF

		130
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4465
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	Memo Item Election: 2012
Whitley, John, Matthew, Dr.,	,	☐ Memo Item Clection: 2012 ★ Primary General
Mailing Address PO Box 314		Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Kannapolis	NC	28082
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period
27200.00		0.00 27200.00
TERMS Date Incurred	С	rate Due Interest Rate Secured: (If none, enter 0)
^M 04 ^M / ^D 04 ^D / ^Y Ž01Ž ^Y	M M / D D	✓ Ön 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
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		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	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CULTUTAL C This Davied This Dave (and the continue)		
SUBTOTALS This Period This Page (optional)		27200.00
TOTALS This Period (last page in this line onl	y)	······································
Carry outstanding balance only to LINE 3, Sc	hedule 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 10 OF
FOR LINE NUMBER:
(check only one)

13a 13b

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10250.00 TERMS Date Incurred Date Due Interest Rate (If none, enter 0) M04M / P18P / Y 2012 Y M M / P P / On Demand O.00	NAME OF COMMITTEE (In Full) John Whitley for Congress			Transaction ID : SC/10.4466
City Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Perior 10250.00 TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Mo4M / P18D / Y Z01Z Y M M M / D D / On Demand Outstanding at Close of This Perior TERMS Date Incurred Date Due Interest Rate (If none, enter 0) Wo (apr) Yes X No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed	Whitley, John, Matthew, Dr.,	iddle Initial)	☐ Men	x Primary
Amount of Loan Cumulative Payment To Date Date Due Interest Rate (If none, enter 0) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) NC 28082 Personal Funds of the Candidate Reprior 10250.00 10250.00 10250.00 10250.00 Non Demand On Demand Name of Employer Mailing Address Occupation Amount Guaranteed	Mailing Address PO Box 314			Other (specify) ▼
Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10250.00 TERMS Date Incurred Date Due Interest Rate (If none, enter 0) M04 ^M / P18 ^D / Y Z01Z Y M M / D D / On DemandY List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed				✗ Personal Funds of the Candidate
TERMS Date Incurred Date Due Interest Rate (If none, enter 0) MO4M / D18D / Y Z01Z Y M M / D D / On Demand O.00 % (apr) Yes X No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed	·			Balance Outstanding at Close of This Period
ModM		oundative raj		
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed City State ZIP Code	TERMS Date Incurred	D		
1. Full Name (Last, First, Middle Initial) Mailing Address Occupation Amount Guaranteed City State ZIP Code	^M 04 ^M / □18 ^D / Y Ž01Ž Y	M M / D D	¹ On Ďemand →	
Mailing Address Occupation Amount Guaranteed Guaranteed	List All Endorsers or Guarantors (if any)	to Loan Source		
City State ZIP Code Guaranteed	1. Full Name (Last, First, Middle Initial)		Name of Employe	er
City State ZIP Code Guaranteed	Mailing Address		Occupation	
	City State	ZIP Code	Guaranteed	
2. Full Name (Last, First, Middle Initial) Name of Employer	2. Full Name (Last, First, Middle Initial)		Name of Employe	er
Mailing Address Occupation	Mailing Address		Occupation	
City State ZIP Code Amount Guaranteed Outstanding:	City	ZIP Code	Guaranteed	
3. Full Name (Last, First, Middle Initial) Name of Employer	3. Full Name (Last, First, Middle Initial)	L	Name of Employe	er
Mailing Address Occupation	Mailing Address		Occupation	
City State ZIP Code Amount Guaranteed Outstanding:	City	ZIP Code	Guaranteed	, ,
4. Full Name (Last, First, Middle Initial) Name of Employer	4. Full Name (Last, First, Middle Initial)	!	Name of Employe	er
Mailing Address Occupation	Mailing Address		Occupation	
City State ZIP Code Amount Guaranteed Outstanding:	City	ZIP Code	Guaranteed	7 7
SUBTOTALS This Period This Page (optional)	SUBTOTALS This Period This Page (optional)			10250.00
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.	Carry outstanding balance only to LINE 3, Sc	hedule D, for this	line. If no Schedule D, ca	arry forward to appropriate line of Summary.

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

PAGE 11 OF
FOR LINE NUMBER:
(check only one)

X 13a 13b

		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: (If none, enter 0)
^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.