PAGE 1 / 11

Illiage# 20211001340713327

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

		For An Au	inorize	a Com	ımıttee		C	Office Use Only
1. NAME OF COMMITTEE (i		E OR PRINT	▼		kample: If typing ver the lines.	g, type	12FE4M5	
John Whitley	for Congress	3						1
ADDRESS (number a		O Box 314						
▼ Check if d	lifferent							
than previous reported. (ously _K	annapolis					NC 28	8082
2. FEC IDENTIF	ICATION NUMB	ER ▼	С	ITY 🛦			STATE ▲	ZIP CODE ▲
C C005044	431		3. IS RE	THIS PORT	x NEW (N)	OR	AMENDEI (A)	STATE ▼ DISTRICT
. TYPE OF RI	EPORT (Choose	One)	b) 12-l	Day PR I	E-Election Repo	rt for the:		
(a) Quarterly I	Reports:		,	П				0)
April 1	15 Quarterly Repor	t (Q1)		- 1	Primary (12P)		General (120	G) Runoff (12R)
	C Overstanti Decem	r (O0)			Convention (1	2C)	Special (128	5)
	5 Quarterly Repor er 15 Quarterly Re		Ele	ection on	M M /	D D	/ Y Y Y Y	in the State of
Janua	ry 31 Year-End Re	port (YE)	c) 30-l	Day PO	ST-Election Rep	ort for the	۵'	
	,	. , , ,	0) 30-1	Day FO				П
					General (30G)		Runoff (30R)) Special (30S)
Termir	nation Report (TER)	Ele	ection on	M M /	D D	/ Y Y Y Y	in the State of
i. Covering Perio	d 07	01 /	Y Y 202	Y Y 1	through	M 09	M / D D /	y y y y y 2021
certify that I have	1	eport and to th Naters, Sarah, I			nowledge and b	pelief it is	true, correct and o	complete.
Signature of Treasu		arah, Hill, Mrs.,			[Electronically F	iled]	Date 10	/ D D / Y Y Y Y Y Y 2021
NOTE: Submission o	f false, erroneous,	or incomplete	informat	tion may	subject the pers	on signing	g this Report to the	penalties of 52 U.S.C. §3010
Office								FF0 F0P14 0
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 2021 09 30 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

FEC Form 3 (Revised 05/2016)

PAGE 3 / 11

Write or Type Committee Name

John Whitley for Congress

Report Covering the Period: From: 07 01 2021 To: 09 30 2021

	I. RECEIPTS	RECEIPTS COLUMN A Total This Period				
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	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	0.00	0.00			
	(c) TOTAL LOANS (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			
3.	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)

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	0.00	0.00
	by the Candidate	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 REPO	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	om Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTIN	G PERIOD	1211.02

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

FOR LINE NUMBER: (check only one)

PAGE

5

X 13a 13b

OF

AME OF COMMITTEE (In Iohn Whitley for Co	ongress		ITAIIS	action ID : SC/10.4313
Whitley, John, Ma	•	ddle Initial)	☐ Memo Iter	m Election: 2012 x Primary General
Mailing Address PO Box 314				Other (specify)
City		State	ZIP Code	X Personal Funds of the Candidate
Kannapolis		NC	28082	Personal Funds of the Candidate
Original Amount of Loa	an	Cumulative Pa	ment To Date Ba	alance Outstanding at Close of This Period
	7000.00	9	0.00	7000.00
TERMS Date Inc	curred	С	ate Due Interest Ra	
M12M / D16D /	Y Ž01ť Y	M M / D D		0.00 % (apr) Yes X No
List All Endorsers or (Guarantors (if any) to	o Loan Source		
1. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0.1		710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
2. Full Name (Last, Firs	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la	710 0 1	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7 7
3. Full Name (Last, Firs	st, Middle Initial)	·	Name of Employer	
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9
4. Full Name (Last, First	st, Middle Initial)	'	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
	'	'		
UBTOTALS This Period	This Page (optional)		······	7000.00
OTALS This Period (last	page in this line only	·) ······		
arry outstanding halance	e only to LINE 3 Sch	edule D. for this	line If no Schedule D. carry fo	orward 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

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

OF

_		100		
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4445		
LOAN SOURCE Full Name (Last, First, Min Whitley, John, Matthew, Dr.,	ddle Initial)	Memo Item Election: 2012 Primary Occupyed		
Mailing Address PO Box 314		General Other (specify) ▼		
City	State NC	ZIP Code 28082 Personal Funds of the Candidate		
Kannapolis				
Original Amount of Loan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period 0.00 100000.00		
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)		
M02 ^M / D06 ^D / Y Z012 Y	M M / D D	ÓNĎEMĂNĎ 0.00 % (apr) Yes ✗ No		
List All Endorsers or Guarantors (if any) t	to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
O't.	710.0-1-	Amount Guaranteed		
City	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
City	ZIP Code	Outstanding:		
SUBTOTALS This Period This Page (optional)		100000.00		
TOTALS This Period (last page in this line only	y)	7 7 7		
Carry outstanding balance only to LINE 3. Sc	hedule 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 8

13a 13b

OF

						130	
	ME OF COMMITTEE (In Full) ohn Whitley for Congress				Trans	saction ID : SC/10.4446	
Ľ	, ,						
	LOAN SOURCE Full Name (Last,		ldle Initial)		☐ Memo Ite		
	Whitley, John, Matthew, D)r.,				Primary	
-	Mailing Address					General	
	Mailing Address PO Box 314					Other (specify)	
	City		State	ZIP Co		✗ Personal Funds of the Candidate	
	Kannapolis		NC	28082			
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	22000	0.00			0.00	22000.00	
ŀ	TERMS Date Incurred		D	Date Due	Interest R		
	M ₀₃ M / D ₂₀ D / Y Ž01Ž	Υ	M M / D D	/ ŎN	(If none, er IĎEMĂNĎ	0.00	
	20 2012			J Oi	ISENIA (INS	% (apr) Yes No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
Ī	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:	, , , , , ,	
ŀ	3. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:		
ŀ	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , ,	
		1	ı		1		
SI	JBTOTALS This Period This Page (optional)			······	22000.00	
TC	OTALS This Period (last page in this	s line only	·)				
_	anne andatandha balan da 1971	NE 2 2 :	and the Both of the	. 15:- 15	no Cohod L. D		
l C	arry outstanding balance only to Li	NE 3, SCh	ieaule D, for this	s line. If	no schedule D, carry fo	orward to appropriate line of Summary.	

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

PAGE 9 C FOR LINE NUMBER: (check only one)

13a

			130
AME OF COMMITTEE (In Full) John Whitley for Congress			Transaction ID : SC/10.4465
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	ayment To Date Balance Outstanding at Close of This Period
27200	0.00		0.00 27200.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M04 ^M / D04 ^D / Y Ž01Ž	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 In	itial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (, 2120000
**OTALS This Period (last page in this			7 7
Carry outstanding balance only to LI	NE 3, Scl	nedule D, for this	is 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 10

13a

OF

						130	
	ME OF COMMITTEE (In Full) Ohn Whitley for Congress				Transaction ID : SC/10.4466		
Ľ	, ,						
	LOAN SOURCE Full Name (Last,		ddle Initial)		☐ Memo Item Election: 2012		
	Whitley, John, Matthew, D)r.,			 x Primary General		
	Mailing Address				Other (specify)		
	PO Box 314						
	City		State	ZIP Co	Y Personal Funds of the Cano	didate	
	Kannapolis		NC	28082			
	Original Amount of Loan		Cumulative Pay	ment To	Date Balance Outstanding at Close of This F	² eriod	
	10250	0.00	,		0.00 10250.00		
	TERMS Date Incurred		D	ate Due	Interest Rate Secured: (If none, enter 0)		
	M04 ^M / D18 ^D / Y Ž01Ž	Y	M M / D D	/ Ör	n Ďemand 0.00 % (apr) Yes	No	
	List All Endorsers or Guarantors	(if anv) to	o Loan Source				
	Full Name (Last, First, Middle I		200.1		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	State	ZIP Code		Guaranteed		
	4. Full Name (Last, First, Middle In	l nitial)			Outstanding: Name of Employer		
	Mailing Address				Occupation		
	mamig resisco						
	City	State	ZIP Code		Amount Guaranteed		
					Outstanding:		
						_	
SI	UBTOTALS This Period This Page (optional)			10250.00		
T	OTALS This Period (last page in this	s line only	/)				
۲	Parmy outstanding halance only to 11	NE 2 Cal	andula D. for this	line If	no Schodulo D. carry forward to convenients line of Summer	on:	
ı۷	arry outstanding palance only to Li	iv⊑ J, JCr	iedule D, for this	s iiiie. If	no Schedule D, carry forward to appropriate line of Summ	ai y.	

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

OF

		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.