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REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An Authorized Committee					Office Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT		cample: If typing, ty er the lines.	pe 12FE4M5				
John Whitley for Congr	ess				ı			
ADDRESS (number and street)	PO Box 314							
V								
Check if different than previously reported. (ACC)	Kannapolis			NC 2	8082			
2. FEC IDENTIFICATION NU	JMBER ▼	CITY A		STATE ▲	ZIP CODE ▲			
C C00504431		3. IS THIS REPORT	NEW (N) O	AMENDE (A)	STATE ▼ DISTRICT NC			
4. TYPE OF REPORT (Cho	oose One)	(b) 12-Day PRE	-Election Report fo	r the				
(a) Quarterly Reports:		(a) 12 Day 1112			П			
April 15 Quarterly F	Report (Q1)	ᆜ	Primary (12P)	General (12	G) Runoff (12R)			
			Convention (12C)	Special (129	5)			
July 15 Quarterly R	eport (Q2)		M M / D	D / Y Y Y Y	in the			
October 15 Quarter	ly Report (Q3)	Election on			State of			
January 31 Year-En	d Report (YE)	(c) 30-Day POS	ST -Election Report f	for the:				
		П	General (30G)	Runoff (30R) Special (30S)			
			General (30G)	nulioli (son	special (303)			
Termination Report	(TER)	Election on	M M / D	D / Y Y Y Y	in the State of			
5. Covering Period 04	M / D D /	Y Y Y Y Y 2021	through	M M / D D / 30	y y y y y 2021			
I certify that I have examined the	Waters, Sarah,		nowledge and belief	f it is true, correct and o	complete.			
	ers, Sarah, Hill, Mrs.,		[Electronically Filed]	Date 07	/ D D / Y Y Y Y Y Y 2021			
NOTE: Submission of false, errone	eous, or incomplete	information may	subject the person s	signing this Report to the	penalties of 52 U.S.C. \$30109			
Office		oadon may						
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	t Covering the Period: From:	04 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M 06		
			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))	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)	1211.02			
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		Committee (Itemize all on	0.00			
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	188950.00			

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

FEC Form 3 (Revised 05/2016)

of Receipts

PAGE 3 / 11

Write or Type Committee Name John Whitley for Congress 04 01 2021 06 30 2021 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 32450.00 (i) Itemized (use Schedule A)..... 2905.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 35355.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) 0.00 7652.49 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 43007.49 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 188950.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 188950.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 231957.49 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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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
1.	OTHER DISBURSEMENTS	0.00	1005.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	230746.47
	III. CASH SU	JMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1211.02
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
5.	SUBTOTAL (add Line 23 and Line 24)		1211.02
6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
7.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	1211.02

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

PAGE 5 OF FOR LINE NUMBER: **X** 13a (check only one)

11

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 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 6 OF
FOR LINE NUMBER:
(check only one)

13a 13b

11

		130
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4314
LOAN SOURCE Full Name (Last, First, Mic	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 Pay	yment To Date Balance Outstanding at Close of This Period
20000.00		0.00 20000.00
TERMS Date Incurred	C	late Due Interest Rate Secured: (If none, enter 0)
M12M / D20D / Y Ž01Ť Y	M M / D D	ÖN ĎEMĂNĎ 0.00 % (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 State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	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:
SUBTOTALS This Period This Page (optional)		
THIS PERIOD THIS PAGE (OPTIONAL)		20000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sch	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

FOR LINE NUMBER: (check only one)

PAGE

X 13a 13b

11

OF

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 (FOR LINE NUMBER: (check only one)

X 13a 13b

11

OF

Transaction ID: SC/10.4446 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 22000.00 0.00 22000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D20^D M 03M 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)..... 22000.00 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

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FOR LINE NUMBER: (check only one)

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OF

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) 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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Transaction ID: SC/10.4466 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 10250.00 0.00 10250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 18D 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)..... 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.

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

11

			Detailed Guilli	nary rage		13b		
AME OF COMMITTEE (In Full) John Whitley for Congress				Transaction I	D : SC/10.4479			
LOAN SOURCE Full Name (Last, First, Mic Whitley, John, Matthew, Dr., Mailing Address PO Box 314	ddle Initial)		☐ Mer	mo Item Elec	etion: 2012 Primary General Other (specify)			
City Kannapolis	State NC	ZIP Code 28082		×	Personal Funds of the C	andidate		
Original Amount of Loan 2500.00	Cumulative Payment To D		Date Bala		lance Outstanding at Close of This Period			
TERMS Date Incurred	D D D	Oate Due		rest Rate one, enter 0) 0.00	Secured: % (apr) Yes	x No		
List All Endorsers or Guarantors (if any) to	o Loan Source							
Full Name (Last, First, Middle Initial)			Name of Employe	er				
Mailing Address		(Occupation					
City	ZIP Code		Amount Guaranteed Outstanding:	,]		
2. Full Name (Last, First, Middle Initial)	1	Name of Employer						
Mailing Address			Occupation					
City State	ZIP Code		Amount Guaranteed Outstanding:		9			
3. Full Name (Last, First, Middle Initial)	3. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address	(Occupation						
City State	ZIP Code		Amount Guaranteed Outstanding:	,	9]		
4. Full Name (Last, First, Middle Initial)		1	Name of Employe	er				
Mailing Address	(Occupation						
City	ZIP Code		Amount Guaranteed Dutstanding:	7]		
SUBTOTALS This Period This Page (optional)			·····		2500.	00		
FOTALS This Period (last page in this line only	·) ·······		·····•		188950.	00		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D. ca	arry forward	to appropriate line of Su	mmary.		