01/31/2012 20 : 50

PAGE 1 / 21

## FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 / '	For An Au	thorized Com	mittee			Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT		ample: If typinger the lines.	g, type	12FE4M5	
John Whitley for Cong	ress					I
ADDRESS (number and street)	PO Box 314					
Check if different						
than previously reported. (ACC)	Kannapolis				NC 2	28082
2. FEC IDENTIFICATION N	UMBER ▼	CITY ▲			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00504431		3. IS THIS REPORT	× NEW (N)	OR	AMEND (A)	
4. TYPE OF REPORT (Ch	noose One)					
(a) Quarterly Reports:	(	b) 12-Day PRE	-Election Repo	rt for the:		
			Primary (12P)	. [	General (1	2G) Runoff (12R)
April 15 Quarterly I	Report (Q1)	П	Convention (	12C)	Special (12	2S)
July 15 Quarterly F	Report (Q2)				(12	
October 15 Quarte	erly Report (Q3)	Election on	M M /	D D /	Y Y Y Y	in the State of
X January 31 Year-Er	nd Report (YE)	c) 30-Day <b>POS</b>	<b>T</b> -Election Rep	ort for the:		
			General (30G		Runoff (30	R) Special (30S)
Termination Report	: (TER)	Election on	M M /	D " D /	Y Y Y Y	in the State of
5. Covering Period 1	M / D D / 01	Y Y Y Y Y 2011	through	м <sup>в</sup> м 12	/ 31 /	2011
I certify that I have examined th	his Report and to th	he best of my kr	nowledge and b	pelief it is ti	rue, correct and	l complete.
Type or Print Name of Treasure	er Mrs. Sarah Hill E	Barrington				
Signature of Treasurer Mrs	:. Sarah Hill Barrington		[Electronically I	Filed]	Date 01	1 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false, erron	eous, or incomplete	information may	subject the per	son signing	this Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

### SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 21

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

### John Whitley for Congress

12 31 2011 01 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 27947.49 27947.49 (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) 27947.49 27947.49 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 29996.67 29996.67 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 29996.67 29996.67 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 24950.82 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 27000.00 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**

FEC Form 3 (Revised 12/2003) of Receipts PAGE 3 / 21

Write or Type Committee Name

### John Whitley for Congress

Report Covering the Period: From: 10 01 2011 To: 12 31 2011

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11. CONTRIBUTIONS (other than loa	nns) FROM:			
(a) Individuals/Persons Other The Political Committees  (i) Itemized (use Schedule A	19250.00	18250.00		
(ii) Unitemized	2045.00	2045.00		
(iii) TOTAL of contributions from individuals	20295.00	20295.00		
(b) Political Party Committees		0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) The Candidate(e) TOTAL CONTRIBUTIONS	7652.49	7652.49		
(other than loans) (add Lines 11(a)(iii), (b), (c), a	and (d)) 27947.49	27947.49		
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
3. LOANS:				
(a) Made or Guaranteed by the Candidate		27000.00		
(b) All Other Loans	0.00	0.00		
(c) TOTAL LOANS (add Lines 13(a) and (b))	27000.00	27000.00		
4. OFFSETS TO OPERATING EXPENDITURES				
(Refunds, Rebates, etc.)		0.00		
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
6. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	54947.49	54947.49		

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

ursements

PAGE 4 / 21

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	29996.67	29996.67
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
	(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)	29996.67	29996.67
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	54947.49
25.	SUBTOTAL (add Line 23 and Line 24)		54947.49
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	29996.67
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		24950.82

**1mage# 12950416337** PAGE 5 / 21

### : 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F3N Transaction ID:

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold.

Form/Schedule: Transaction ID:

FOR LINE NUMBER: **PAGE** 6 OF 21 Use separate schedule(s) (check only one) for each category of the 11a 11d 11b 11c Detailed Summary Page 12 13a 13b

ITEMIZED RECEIPTS 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 Whitley for Congress Full Name (Last, First, Middle Initial) **Gregory Antoine** Date of Receipt Mailing Address 40 Salisbury Road 10 2011 28 City State Zip Code Transaction ID: SA11AI.4290 MA 02458 Newton FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation Self Self Receipt For: 2012 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Dr. Dominic Joseph Cottrell Date of Receipt Mailing Address 187 Tierra Road 03 2011 City State Zip Code Transaction ID: SA11AI.4172 Wheeling WV 26003 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Physician Medical Park Anesthesiologists Receipt For: 2012 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Mr. Troy L. Day Date of Receipt Mailing Address 1620 Eastwood Drive 2011 25 City State Zip Code Transaction ID: SA11AI.4113 NC Kannapolis 28081 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Day Enterprises, Inc CEO Receipt For: 2012 Election Cycle-to-Date Y Primary General 1000.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) 11a 11b 11c 12 13a 13b

21

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 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 Whitley for Congress Full Name (Last, First, Middle Initial) Mr. Alan T. Dickson Date of Receipt Mailing Address 301 S. Tryon Street 10 2011 21 Suite 1800 City State Zip Code Transaction ID: SA11AI.4136 NC 28202 Charlotte FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation **Ruddick Corporation** Retired Receipt For: 2012 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Dr. James M. Fox Date of Receipt Mailing Address 2 Cherryhurst Lane 11 2011 Citv State Zip Code Transaction ID: SA11AI.4174 Grosse Pointe Farms MI 48236 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Physician **Emergency Medicine Specialists** Receipt For: 2012 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Mrs. Alyson Hodgkin Date of Receipt Mailing Address 513 Northview Drive 2011 13 City State Zip Code Transaction ID: SA11AI.4292 NC Fayetteville 28303 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1500.00 Name of Employer Occupation Homemaker Homemaker Receipt For: 2012 Election Cycle-to-Date | Y Primary General 1500.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF 21 Use separate schedule(s) (check only one) for each category of the 11a 11b 11d 11c Detailed Summary Page 12 13a 13b 14

ITEMIZED RECEIPTS 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 Whitley for Congress Full Name (Last, First, Middle Initial) Mrs. Alyson Hodgkin Date of Receipt Mailing Address 513 Northview Drive 2011 25 City State Zip Code Transaction ID: SA11AI.4137 NC 28303 Fayetteville FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation Homemaker Homemaker Receipt For: 2012 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Mr. Jay Hodgkin Date of Receipt Mailing Address 513 Northview Drive 25 2011 Citv State Zip Code Transaction ID: SA11AI.4138 Fayetteville NC 28303 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Medical Equipment Sales Self Receipt For: 2012 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Jason Miller Date of Receipt Mailing Address 253 14th Street, SE 2011 26 City State Zip Code Transaction ID: SA11AI.4289 DC Washington 20003 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation Jamestown Associates Consultant Receipt For: 2012 Election Cycle-to-Date | Y Primary General Other (specify) 500.00 4000.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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

FOR LINE NUMBER: [					PAGE	:	9	OF	21
(che	ck only	or	ne)						
X	11a		11b		11c		11	d	
	12		13a		13b		14		15

		Statements may not be sold or used by any pe e name and address of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  John Whitley for Congress		
Δ.	Full Name (Last, First, Middle Initial) Mrs. Johnette P. Whitley		Date of Receipt
۸.	Mailing Address PO Box 43		10 26 2011
	City	Transaction ID : SA11AI.4122	
	Kannapolis	NC 28082	_
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	2500.00
	Homemaker	Homemaker	
	Receipt For: 2012  Primary General Other (specify)	Election Cycle-to-Date 2500.00	
В.	Full Name (Last, First, Middle Initial) Mrs. Johnette P. Whitley		Date of Receipt
	Mailing Address PO Box 43		10 26 YYYYY 2011
	City Kannapolis	State Zip Code NC 28082	Transaction ID : SA11AI.4123
	FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
	Name of Employer	Occupation	2500.00
	Homemaker	Homemaker	
	Receipt For: 2012 Primary General Other (specify)	Election Cycle-to-Date 5000.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. William L. Whitley Sr.		Date of Receipt
U.	Mailing Address PO Box 43		10 26 2011
	City	State Zip Code	Transaction ID : SA11AI.4120
	Kannapolis	NC 28082	-
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer	Occupation	2500.00
	Whitley Funeral Home	Owner	, , , , , , , , , , , , , , , , , , , ,
	Receipt For: 2012	Election Cycle-to-Date	1
	Primary General Other (specify)	2500.00	
s	SUBTOTAL of Receipts This Page (optional)		7500.00
Т	<b>'OTAL</b> This Period (last page this line number	only)	

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:					PAGE	10 OF	-	21
(che	ck only	or	ne)					
×	11a		11b		11c	11d		_
	12		13a		13b	14		15

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)  John Whitley for Congress		
Full Name (Last, First, Middle Initial) Mr. William L. Whitley Sr.  Mailing Address PO Box 43  City Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer Whitley Funeral Home  Receipt For: 2012  Primary General	State Zip Code NC 28082  C Occupation Owner  Election Cycle-to-Date	Date of Receipt  M M M / D D / 2011  Transaction ID : SA11AI.4121  Amount of Each Receipt this Period  2500.00
Full Name (Last, First, Middle Initial)  Mailing Address  City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code		Date of Receipt
FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:	Occupation  Election Cycle-to-Date	Amount of Each Receipt this Period
Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		2500.00 18250.00

# S

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 21 (check only one)  11a 11b 11c X 11d 12 13a 13b 14 15
Any information copied from such Reports and sor for commercial purposes, other than using the			person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  John Whitley for Congress			
Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley  Mailing Address PO Box 314  City  Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer Cape Fear Valley Health System  Receipt For: 2012  Primary General	Occupation Physician	ycle-to-Date	Date of Receipt  10 14 2011  Transaction ID: SA11D.4309  Amount of Each Receipt this Period  5000.00  In-kind - Management Consulting
Other (specify)  Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley  Mailing Address PO Box 314  City  Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer  Cape Fear Valley Health System  Receipt For: 2012  Primary General  Other (specify)	Occupation Physician	Zip Code 28082 NC08177 n ycle-to-Date	Date of Receipt  10 18 2011  Transaction ID: SA11D.4334  Amount of Each Receipt this Period  1199.40  In-kind - Email List
Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley  Mailing Address PO Box 314  City Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer Cape Fear Valley Health System  Receipt For: 2012  Primary General Other (specify)	Occupation Physician	Zip Code 28082 NC08177 n ycle-to-Date	Date of Receipt  10 21 2011  Transaction ID: SA11D.4317  Amount of Each Receipt this Period  1250.00  In-kind - Website Design
SUBTOTAL of Receipts This Page (optional)			7449.40

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

	FOR LINE NUMBER:					PAGE	. 1	12 OF		21
Use separate schedule(s)	(check only one)									
for each category of the		11a		11b		11c	X	11d		
Detailed Summary Page		12		13a		13b		14		15
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.										

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad-NAME OF COMMITTEE (In Full) John Whitley for Congress Full Name (Last, First, Middle Initial) Dr. John Matthew Whitley Date of Receipt Mailing Address PO Box 314 10 2011 24 City State Zip Code Transaction ID: SA11D.4299 NC 28082 Kannapolis FEC ID number of contributing Amount of Each Receipt this Period H2NC08177 federal political committee. 93.14 Name of Employer Occupation In-kind - Printed Materials Cape Fear Valley Health System Physician Receipt For: 2012 Election Cycle-to-Date | Primary General 7542.54 Other (specify) Full Name (Last, First, Middle Initial) Dr. John Matthew Whitley Date of Receipt Mailing Address PO Box 314 10 24 2011 City State Zip Code Transaction ID: SA11D.4332 Kannapolis NC 28082 FEC ID number of contributing C H2NC08177 Amount of Each Receipt this Period federal political committee. 109.95 Name of Employer Occupation Physician In-kind - Business Cards Cape Fear Valley Health System Receipt For: 2912 Election Cycle-to-Date Primary General 7652.49 Other (specify) C.

	, ,	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M   M   / D   D / Y   Y   Y   Y
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		203.09

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

# S

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 OF 21 (check only one)  11a
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per part and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  John Whitley for Congress		
Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley  Mailing Address PO Box 314  City  Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer  Cape Fear Valley Health System  Receipt For: 2012  Primary General  Other (specify)	State Zip Code NC 28082  C H2NC08177  Occupation Physician  Election Cycle-to-Date	Date of Receipt  12
Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley  Mailing Address PO Box 314  City Kannapolis  FEC ID number of contributing federal political committee.  Name of Employer Cape Fear Valley Health System  Receipt For: 2012  Primary General Other (specify)	State Zip Code NC 28082  C H2NC08177  Occupation Physician Election Cycle-to-Date	Date of Receipt  12 20 2011  Transaction ID: SA13A.4314  Amount of Each Receipt this Period  20000.00  Personal Funds
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y  Amount of Each Receipt this Period
Receipt For:  Primary General Other (specify)	Occupation  Election Cycle-to-Date	

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

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

27000.00

lm	nage# 12950416346					
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	I I		FOR LINE NUMBER: PAGE 14 OF 21 (check only one)    X   17		
	ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a					
$\rangle$	NAME OF COMMITTEE (In Full)  John Whitley for Congress					
۹.	Full Name (Last, First, Middle Initial)  Ms. Connie Blue  Mailing Address 3400 Arboretum Place			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Fayetteville NC  Purpose of Disbursement Photography For Campaign Material	Zip Code 29303		Amount of Each Disbursement this Period  250.00  Transaction ID: SB17.4170		
	Candidate Name  Office Sought: House Disbursement For Senate Primary Other (s	General	Category/ Type	Transaction ID: SB17.4170		
3.	Full Name (Last, First, Middle Initial) BRW Fundraising Group, LLC  Mailing Address PO Box 12684			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City State Raleigh NC  Purpose of Disbursement Finance Consulting  Candidate Name  Office Sought: House Disbursement For Senate Primary President Other (s	General	Category/ Type	Amount of Each Disbursement this Period  3000.00  Transaction ID : SB17.4160		
Э.	State: District: Full Name (Last, First, Middle Initial) BRW Fundraising Group, LLC			Date of Disbursement		
	Raleigh NC 2  Purpose of Disbursement Finance Consulting  Candidate Name	p Code 7605	Category/ Type	Amount of Each Disbursement this Period  3000.00  Transaction ID: SB17.4161		
	Office Sought: House Dishursement For					

General

Primary Other (specify)

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

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

State:

Senate

District:

President

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

Mailing Address 15511 Britley Ridge Drive

Image# 12950416347							
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate sch for each category Detailed Summar	nedule(s) y of the	FOR LINE NUMBER: PAGE 15 OF 21 (check only one)    X   17		
					erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
$\rangle$	NAME OF COMMITTEE (In Full)  John Whitley for Congress						
Full Name (Last, First, Middle Initial)  A. Campaign Solutions/The Donatelli Group				Date of Disbursement			
Mailing Address 117 North Saint Asaph Street  City State Zip Code Alexandria VA 22314  Purpose of Disbursement Online Fundraising - Transaction Fees				11 03 2011			
				Amount of Each Disbursement this Period			
					1540.91 Transaction ID : SB17.4329		
	Candidate Name			Category/ Type			
	Senate President	Disbursement For: Primary Other (sp	General				
	State: District: Full Name (Last, First, Middle Initial)						
В.	Campaign Solutions/The Do  Mailing Address 117 North Saint Asaph S	·	)		Date of Disbursement  M M / D D / Y Y Y Y Y  11 03 _ 2011 _		
	The saping of th	oneer			11 03 2011		

Othe President State: District: Full Name (Last, First, Middle Initial) Campaign Solutions/The Donatelli Gro Mailing Address 117 North Saint Asaph Street City Zip Code State Amount of Each Disbursement this Period VA 22314 Alexandria 683.27 Purpose of Disbursement Online Fundraising - Transaction Fees Transaction ID: SB17.4331 Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) c. Capitol Strategies Date of Disbursement

Type Office Sought: House Disbursement For: Senate General Primary President Other (specify) State: District: 6224.18 SUBTOTAL of Disbursements This Page (optional)..... TOTAL This Period (last page this line number only).....

Category/

Zip Code

28078

State

NC

City

Huntersville

Candidate Name

Purpose of Disbursement

Management Consulting

2011

4000.00

Amount of Each Disbursement this Period

Transaction ID : SB17.4152

# S

•••	.age 12000 1100	.0				
SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			-	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: (check only one)    X   17
						verson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMM			, ,		
Α.	Capitol Stra					Date of Disbursement
	Mailing Address 15511 Britley Ridge Drive				12 20 2011	
	City Huntersville		State NC	Zip Code 28078		Amount of Each Disbursement this Period
	Purpose of Disbu Management Co Candidate Name	onsulting				4000.00 Transaction ID : SB17.4153
	Office Sought:	House Senate President District:	Disbursement Form Primary Other (s	General	Category/ Type	
	•	First, Middle Initial)				
B.	Pioneer Strategies  Mailing Address PO Box 1986					Date of Disbursement  M M / D D / Y Y Y Y Y Y Y 11  11 15 2011
	City Leland Purpose of Disbu	ırsement	State NC	Zip Code 28451		Amount of Each Disbursement this Period
	Social Media Co	onsulting			004 Category/ Type	Transaction ID : SB17.4155
	Office Sought: State:	House Senate President District:	Disbursement For: Primary Other (s	General		
C.	Full Name (Last, Pioneer Str	First, Middle Initial)				Date of Disbursement
	Mailing Address PO Box 1986				12 14 2011	
	City State Zip Code Leland NC 28451					Amount of Each Disbursement this Period
	Purpose of Disbursement Social Media Consulting				1100.00  Transaction ID : SB17.4156	
	Typ				Category/ Type	
	Office Sought:	House Senate President	Disbursement Form Primary Other (s	General		
	State:	District:				

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

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

SC	CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 17 OF 21			
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one)    X   17   18   19a   19b   20a   20b   20c   21			
	by information copied from such Reports and Statements me for commercial purposes, other than using the name and		ny person for the purpose of soliciting contributions			
\	NAME OF COMMITTEE (In Full)					
$\rangle$	John Whitley for Congress					
	Full Name (Last, First, Middle Initial)		Date of Disbursement			
۹.	Dr. John Matthew Whitley	M M / D D / Y Y Y Y				
	Mailing Address PO Box 314	10 14 2011				
	City State	Zip Code	Amount of Each Disbursement this Period			
	Kannapolis NC Purpose of Disbursement	28082	5000.00			
	In-kind - Management Consulting		Transaction ID : SB17.4310			
	Candidate Name	Catego Type	pry/			
	Office Sought: House Disbursement For Senate Primary	: 2012				
	President Other (s					
	State: NC District: 08					
3.	Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley		Date of Disbursement			
	Mailing Address PO Box 314	10 18 2011				
	City State	Zip Code	Associated Foods State of Stat			
	Kannapolis NC	28082	Amount of Each Disbursement this Period			
	Purpose of Disbursement In-kind - Email List	1199.40				
	Candidate Name	Catego				
	Office Sought: House Disbursement For Senate Primary	1				
	Senate Primary President Other (s					
	State: NC District: 08					
2.	Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley		Date of Disbursement			
	Mailing Address PO Box 314		M M / D D / Y Y Y Y 1 1 10 21 2011			
		p Code	Amount of Each Disbursement this Period			
	Kannapolis NC 2 Purpose of Disbursement	28082	1250.00			
	In-kind - Website Design					
	Candidate Name	Catego Type				
	Office Sought: House Disbursement For Senate Primary					
	President Other (s					
	State: NC District: 08					
s	UBTOTAL of Disbursements This Page (optional)		7449.40			

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

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate so for each categor Detailed Summa	hedule(s) ( ry of the	FOR LINE NUMBER: PAGE 18 OF 21 check only one)    X   17				
	y information copied from such Reports and Stateme for commercial purposes, other than using the name							
$\rangle$	NAME OF COMMITTEE (In Full)  John Whitley for Congress							
Full Name (Last, First, Middle Initial)  Dr. John Matthew Whitley				Date of Disbursement				
	Mailing Address PO Box 314	10 24 2011						
	City Sta Kannapolis NC	'		Amount of Each Disbursement this Period				
	Purpose of Disbursement In-kind - Printed Materials			93.14 Transaction ID : SB17.4300				
	Candidate Name		Category/ Type					
	Senate President Ot	nt For: 2012 imary General ther (specify)						
_	State: NC District: 08  Full Name (Last, First, Middle Initial)							
3.	Dr. John Matthew Whitley			Date of Disbursement				
	Mailing Address PO Box 314			10 24 2011				
	City Sta Kannapolis NC	•		Amount of Each Disbursement this Period				
	Purpose of Disbursement			109.95				
	In-kind - Business Cards  Candidate Name		Category/ Type	Transaction ID : SB17.4333				
	Senate President Ot	nt For: 2912 imary General ther (specify)	1,750					
	State: NC District: 08  Full Name (Last, First, Middle Initial)							
).	Mr. Andy Yates			Date of Disbursement				
Mailing Address 15511 Britley Ridge Drive				11 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City State Huntersville NC	Zip Code 28078		Amount of Each Disbursement this Period				
	Huntersville NC Purpose of Disbursement Reimbursement - Travel Expenses, Printed Materials,	2864.31						
	Candidate Name		Category/ Type	Transaction ID : SB17.4165				
	President Ot	nt For: imary General ther (specify)						
_	State: District:							
				3067.40				

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

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

	FOR LINE NUMBER:				PAGE	19	OF	21
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	×	17		18		19a		19b
Detailed Suffillary Fage		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions address of any political committee to solicit contributions from such committee.								

ITEMIZED DISBURSEMENTS	Detailed Summary Page	
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full)  John Whitley for Congress		
Full Name (Last, First, Middle Initial)  A. Desumo Strategies		Date of Disbursement
Mailing Address 9211 Forest Hill Ave #207		10 24 2011
City State Richmond VA	Zip Code 23235-6877	Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement - Printed Brochures  Candidate Name		2320.00 Transaction ID : SB17.4165.3
	Ту	egory/ jype [MEMO ITEM]
Office Sought:  House Senate President  Other (s	General	
State: District: Full Name (Last, First, Middle Initial)		
B		Date of Disbursement
Mailing Address		
City State	Amount of Each Disbursement this Period	
Purpose of Disbursement		
Candidate Name	egory/ ýpe	
Office Sought:  House  Senate  President  State:  Disbursement For  Primary  Other (s	General	
Full Name (Last, First, Middle Initial)		Data of Dishumana
C. 		Date of Disbursement
Mailing Address		
City State Zi	Amount of Each Disbursement this Period	
Purpose of Disbursement		
Candidate Name		egory/ ype
Office Sought:  House  Senate  Primary  President  State:  Disbursement For  Primary  Other (s	General	
SUBTOTAL of Disbursements This Page (optional)		0.00
TOTAL This Period (last page this line number only)		29490.98

### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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X	13a
	13h

21

(check only one) Detailed Summary Page Transaction ID: SC/10.4313 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. John Matthew Whitley General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 314 City State ZIP Code NC 28082 Kannapolis Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 7000.00 0.00 7000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>м</sup> 12<sup>м</sup> <sup>D</sup>16 2011 0.00 **ON DEMAND** % (apr) 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 City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

### SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

21

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	13h				

21

Detailed Summary Page Transaction ID: SC/10.4314 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 [PERSONAL FUNDS] Primary Dr. John Matthew Whitley General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 314 City State ZIP Code NC 28082 Kannapolis Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 12<sup>M</sup> 20 2011 0.00 **ON DEMAND** % (apr) 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 City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 20000.00 TOTALS This Period (last page in this line only) ...... 27000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.