I

PAGE 1 / 11

FEC FORM 3		D DIS		CEIPTS MENTS			Office Use Only
1. NAME OF COMMITTEE (in f		PE OR PRINT		Example: If typin over the lines.	g, type	12FE4M5	
John Whitley fo	r Congres	S 					
		O Box 314					
ADDRESS (number and Check if diffe	erent						
than previous reported. (AC		Cannapolis │				STATE ▲	28082
2. FEC IDENTIFIC		BER ▼	3. IS THIS REPORT	× NEW (N)		AMEND (A)	STATE ▼ DISTRICT
July 15 (rt (Q1) rt (Q2)		RE-Election Report Primary (12P Convention ()	General (12 Special (12	2S) in the
	31 Year-End R		Election o (c) 30-Day PC	n Instantion Rep	port for the:		State of
Terminati	on Report (TEI	3)	Election o	General (30G) D D /	Runoff (30	R) Special (30S) in the State of
5. Covering Period	M M 01	/ 01 /	Y Y Y Y 2018	through	M M 03	/ D D / 31	Y Y Y Y 2018
I certify that I have ex Type or Print Name or		eport and to a Waters, Sarah,		knowledge and	belief it is t	rue, correct and	complete.
Signature of Treasurer		arah, Hill, Mrs.,		[Electronically	Filed]	Date	/ D D / Y Y Y Y 02 / 2018
	alse, erroneous	, or incomplete	e information ma	y subject the per	son signing	this Report to th	e penalties of 52 U.S.C. §30109
Office Use Only							FEC FORM 3 (Revised 05/2016)

(b) Total Contribution Refunds

the Committee (Itemize all on

Schedule C and/or Schedule D)

6.

FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements		PAGE 2
Write or Type Committee Name John Whitley for Congress			
	M / D D / Y Y Y Y 01 01 2018	To:	M M / D J / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
. Net Contributions (other than loans)	COLUMN A This Period		COLUMN B Election Cycle-to-Date
(a) Total Contributions(other than loans) (from Line 11(e))	0.00] [43007.49

2/11

0.00

43007.49

229741.47

229741.47

0.00

0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 (from Line 17) (b) Total Offsets to Operating 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 (subtract Line 7(b) from Line 7(a)) 8. Cash on Hand at Close of 1211.02 Reporting Period (from Line 27)..... 9. Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY

For further information contact:

188950.00

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

	D	ETAILED SUMMARY PAGE	
	FEC Form 3 (Revised 05/2016)	of Receipts	PAGE 3 / 11
Wr	ite or Type Committee Name		
J	ohn Whitley for Congress		
Re	port Covering the Period: From:	M / D D / Y Y Y Y 01 / 2018 To:	M M / D D / Y Y Y Y 03 31 2018
	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	0.00	35355.00
	from individuals		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate	0.00	7652.49
	(e) TOTAL CONTRIBUTIONS (other than loans)		
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49
	TRANSFERS FROM OTHER	0.00	0.00
	AUTHORIZED COMMITTEES	0.00	0.00
	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
14.	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)	0.00	231957.49
	(Carry Total to Line 24, page 4)	0.00	201907.49

Image# 201804029097936394

of Disbursements PAGE 4 / 11 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 229741.47 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 by the Candidate..... 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 1005.00 21. OTHER DISBURSEMENTS

0.00

0.00

230746.47

DETAILED SUMMARY PAGE

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING 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 (from Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	1211.02

0.00

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) FOR LINE NUMBER: for each category of the check only one) Detailed Summary Page 13a			
AME OF COMMITTEE (In Full) John Whitley for Congress			Transact	tion ID : SC/10.4313	
LOAN SOURCE Full Name (Last, First Whitley, John, Matthew, Dr.,	, Middle Initial)		🗌 Memo Item	Election: 2012 X Primary General	
Mailing Address PO Box 314				Other (specify)	
City Kannapolis	State NC	ZIP Code 28082	e	X Personal Funds of the Candidat	
Original Amount of Loan 7000.00	Cumulative F	Payment To D	Date Balar 0.00	nce Outstanding at Close of This Perio 7000.00	
TERMS Date Incurred M12M / D16D / Y Ž01Ť Y	M M / D		Interest Rate (If none, enter ĎEMĂNĎ	0)	
List All Endorsers or Guarantors (if a 1. Full Name (Last, First, Middle Initial			Name of Employer		
Mailing Address			Occupation		
City Sta	te ZIP Code		Amount Guaranteed Outstanding:	ng 1 1 ng 1 1 ng 1	
2. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer Occupation		
City Sta	te ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City Sta	te ZIP Code		Amount Guaranteed Outstanding:	g : ; g : ; m :	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City Sta	te ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 a 1	
UBTOTALS This Period This Page (optio	nal)		····· [7000.00	
OTALS This Period (last page in this line Carry outstanding balance only to LINE 3				vard to appropriate line of Summary	

					PAGE 6 OF 11
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) X 13a	
ohn Whitley	TEE (In Full) for Congress			Transac	ction ID : SC/10.4314
	Full Name (Last, First, Mic nn, Matthew, Dr.,	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 314					Other (specify)
City Kannapolis		State NC	ZIP Code 28082	e	Personal Funds of the Candidate
Original Amou	nt of Loan 20000.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio 20000.00
	Date Incurred	C M M / D D	Date Due	Interest Rate (If none, enter ĎEMĂNĎ 0.	n 0) 00 0/ / / N
List All Endors	ers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Add	ress			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (L	ast, First, Middle Initial)			Name of Employer	
Mailing Addr	ess			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (L	ast, First, Middle Initial)			Name of Employer	
Mailing Addr	ess			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (L	ast, First, Middle Initial)			Name of Employer	
Mailing Addr	ess			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
	Period This Page (optional). od (last page in this line only				, 20000.00
Carry outstanding	balance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forv	ward to appropriate line of Summary.

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) ohn Whitley for Congress			Transac	tion ID : SC/10.4445
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 NC	ZIP Code 28082	e	X Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Peri 100000.00
TERMS Date Incurred M02 ^M / D06 ^D / Y Ž01Ž Y	M M / D D		Interest Rate (If none, enter ŽEMĂNĎ 0.0	0)
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source		Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	ay 1 1 ay 1 1 ay 1
2. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer	
-			Amount Guaranteed	
City State	ZIP Code		Outstanding:	y y y
3. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1
UBTOTALS This Period This Page (optional)			····· [100000.00
OTALS This Period (last page in this line onl Carry outstanding balance only to LINE 3, Sc				

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	for each category of the (check only one) 13a			
AME OF COMMITTEE (In Full) ohn Whitley for Congress		Transaction II	D : SC/10.4446			
LOAN SOURCE Full Name (Last, First, M Whitley, John, Matthew, Dr.,	1iddle Initial)		tion: 2012 Primary General			
Mailing Address PO Box 314			Other (specify)			
City Kannapolis	State NC	ZIP Code x 28082 x	Personal Funds of the Candidat			
Original Amount of Loan 22000.00	Cumulative Pa	ent To Date Balance C	Dutstanding at Close of This Perio 22000.00			
TERMS Date Incurred M03 ^M / D20 ^D / Y Ž01Ž	M M / D D	e Due Interest Rate (If none, enter 0) / ŎNĎĔMĂNĎ 0.00	Secured: % (apr) Yes X N			
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial) Mailing Address		Name of Employer Occupation				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:	ý			
3. Full Name (Last, First, Middle Initial) Mailing Address		Name of Employer				
City State	ZIP Code	Amount Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
City State	ZIP Code	Amount Guaranteed Outstanding:				
UBTOTALS This Period This Page (optional)	······	22000.00			
OTALS This Period (last page in this line or	nly)	·····	7 7			

					PAGE 9 OF 11
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) X 13a	
ame of commi Iohn Whitley	TTEE (In Full) for Congress			Transac	ction ID : SC/10.4465
	E Full Name (Last, First, Mid hn, Matthew, Dr.,	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 314	\$				Other (specify) ▼
City Kannapolis		State NC	ZIP Code 28082	e	X Personal Funds of the Candidate
Original Amou	int of Loan 27200.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio 27200.00
TERMS	Date Incurred	M M / D D	Date Due	Interest Rate (If none, enter Ďemand ^Y 0.	00 0 1 1 1 1 1 1
	sers or Guarantors (if any) t (Last, First, Middle Initial)	o Loan Source		Name of Employer	
Mailing Add	dress			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
2. Full Name (I	ast, First, Middle Initial)	L.		Name of Employer	
Mailing Add	ress			Occupation Amount	
City	State	ZIP Code		Guaranteed	
3. Full Name (l	ast, First, Middle Initial)			Name of Employer	
Mailing Add	ress			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (l	ast, First, Middle Initial)	·		Name of Employer	
Mailing Add	ress			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9
	Period This Page (optional).				27200.00
Carry outstanding	g balance only to LINE 3, Sci	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

age# 20100-020001000+01					
CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) X 13a
ME OF COMMITTEE (In Full) ohn Whitley for Congre	ess			Transa	ction ID : SC/10.4466
LOAN SOURCE Full Name Whitley, John, Matthe	•	ddle Initial)		🗌 Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 314					Other (specify) ▼
City Kannapolis		State NC	ZIP Code 28082	, ,	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To Da	ate Bala	ance Outstanding at Close of This Perio
<u> </u>	10250.00			0.00	10250.00
TERMS Date Incurred		[Date Due	Interest Rat (If none, ente	r 0)
^M 04 ^M / ^D 18 ^D / Y	ž012 ^v	M M / D D	Ón Ě	Demand ^Y 0	.00 % (apr) Yes X No
List All Endorsers or Guara	ntors (if any) t	o Loan Source			
1. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	
Mailing Address			0	Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y y
2. Full Name (Last, First, Mic	dle Initial)		١	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Mic	dle Initial)		١	Name of Employer	
Mailing Address			(Decupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	
4. Full Name (Last, First, Mic	dle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y 1 1 y 1 1 x 1
UBTOTALS This Period This F OTALS This Period (last page					10250.00

CHEDULE C	(FEC Form 3)			Use separate schedule for each category of th	he (check only one) × 13a
AME OF COMMITTE	E (In Full)			Detailed Summary Pag	ction ID : SC/10.4479
ohn Whitley fo	· · · ·				
	Full Name (Last, First, Mic , Matthew, Dr.,	ddle Initial)		Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 314					Other (specify)
City Kannapolis		State NC	ZIP Code 28082	e	Y Personal Funds of the Candidate
Original Amount	of Loan 2500.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
TERMS Data M04 ^M / 930	te Incurred	M M / D D	Date Due	Interest Rate (If none, enter Demand ^Y 0.	
	s or Guarantors (if any) t st, First, Middle Initial)	o Loan Source		Name of Employer	
Mailing Addres	35			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Las	t, First, Middle Initial)	·		Name of Employer	
Mailing Address	S			Occupation Amount	
City	State	ZIP Code		Guaranteed	y y
3. Full Name (Las	t, First, Middle Initial)			Name of Employer	
Mailing Address	S			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Las	t, First, Middle Initial)			Name of Employer	
Mailing Address	S			Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
UBTOTALS This Pe	eriod This Page (optional)			······	2500.00
OTALS This Period	(last page in this line only	/)		······	188950.00
Carry outstanding b	alance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary