10/02/2017 19 : 18

PAGE 1 / 11

FEC FORM 3	AND D		ECEIPIS EMENTS Committee		C	Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR PR full)	INT V	Example: If typing over the lines.	, type	12FE4M5	
John Whitley f	or Congress					
ADDRESS (number ar	PO Box 314					
Check if dit than previo reported. (A	ferent usly Kannapolis					8082
2. FEC IDENTIFIC	CATION NUMBER V	CITY		S	STATE A	ZIP CODE
C C0050443	31	3. IS THIS REPOR	~	OR	AMENDE (A)	D STATE ▼ DISTRICT
 (a) Quarterly R April 15 July 15 Octobe January 	PORT (Choose One) eports: 5 Quarterly Report (Q1) Quarterly Report (Q2) r 15 Quarterly Report (Q3) r 31 Year-End Report (YE)	Election	POST-Election Repo	2C)	General (120 Special (120 Y Y Y Y Y Runoff (30R	5) in the State of
5. Covering Period	examined this Report and		through	09 elief it is tru	/ D D / 30	2017 complete.
Type or Print Name		ırah, Hill, Mrs., Mrs.,			M M	/ D D / Y Y Y Y
Signature of Treasure	er		[Electronically F	iled] D	ate 10	02 2017
NOTE: Submission of Office	false, erroneous, or incom	plete information I	may subject the perso	on signing th	his Report to the	penalties of 52 U.S.C. §30109
Use Only						FEC FORM 3 (Revised 05/2016)

Ima	ge# 201710029075570481		
Γ	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 11
	rite or Type Committee Name ohn Whitley for Congress		
Re	eport Covering the Period: From:	M / D D / Y Y Y Y 01 / 2017 To:	M 09 / D D / Y Y Y Y Y 30 / 2017
		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.	Cash on Hand at Close of Reporting Period (from Line 27)	1211.02	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule 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

Image#	20171	002907	5570482
mayom	20171	002301	JJ1 0402

Γ	E FEC Form 3 (Revised 05/2016)	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 11
	e or Type Committee Name		
Jo	hn Whitley for Congress		
Rep	ort Covering the Period: From:	7 01 / Y Y Y Y 7 01 To:	M M / D D / Y Y Y Y Y 09 30 / 2017
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. C	ONTRIBUTIONS (other than loans) FROM:		
(a	,		
	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	, , , , , , , , , , , , , , , , , , ,	0.00	, 0.00
(C	 Other Political Committees (such as PACs) 	0.00	0.00
(c	,	0.00	7652.49
(e	(other than loans)		10007.10
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49
	RANSFERS FROM OTHER UTHORIZED COMMITTEES	0.00	0.00
13. L	OANS:		
(a	 Made or Guaranteed by the Candidate 	0.00	188950.00
(b	,	0.00	0.00
(C) TOTAL LOANS (add Lines 13(a) and (b))	0.00	, 188950.00
	FFSETS TO OPERATING		
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00
	THER RECEIPTS Dividends, Interest, etc.)	0.00	y y y 0.00
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	231957.49

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 0.00 by the Candidate..... 0.00 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 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

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 11

230746.47

					PAGE 5 OF 11
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:	
AME OF COMMITTEE (In Full) Iohn Whitley for Congress				Transac	tion ID : SC/10.4313
LOAN SOURCE Full Name (Last, F	irst, Mid	Idle Initial)		Memo Item	Election: 2012
Whitley, John, Matthew, Dr	• ,				× Primary
Mailing Address PO Box 314					General Other (specify) ▼
City		State	ZIP Cod	e	
Kannapolis		NC	28082		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To [Date Bala	nce Outstanding at Close of This Perio
7000.0	00		,	0.00	7000.00
TERMS Date Incurred		C	ate Due	Interest Rate	
M12M / D16D / Y Ž01Ť	Y	M M / D D	′ ŎN I	(If none, enter ĎEMĂNĎ 0.	
List All Endorsers or Guarantors (i	f any) to	o Loan Source			
1. Full Name (Last, First, Middle Ini	itial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Middle Init	ial)			Name of Employer	
Mailing Address				Occupation	
			\vdash	Amount	
City	State	ZIP Code		Guaranteed	y y
3. Full Name (Last, First, Middle Init	ial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Init	ial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
CUBTOTALS This Period This Page (or COTALS This Period (last page in this	-				7000.00
Carry outstanding balance only to LIN					vard to appropriate line of Summary.

					PAGE 6 OF 11
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one) 13a	
AME OF COMMITTEE (In Full) ohn Whitley for Congress				Transac	ction ID : SC/10.4314
LOAN SOURCE Full Name (Las Whitley, John, Matthew,		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 Amount of Loan	00.00	Cumulative Pa	yment To [Date Bala	ance Outstanding at Close of This Peric 20000.00
TERMS Date Incurred			Date Due	Interest Rate (If none, enter	
M12M / D20D / Y Ž01	Ť	M M / D D	′ ŎN [ĎΕΜĂNĎ 0.	00 % (apr) Yes X No
List All Endorsers or Guaranton 1. Full Name (Last, First, Middle		to Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 1 9 1 1 A
3. Full Name (Last, First, Middle	Initial)			Name of Employer	
Mailing Address				Occupation	
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:	y y
UBTOTALS This Period This Page					, 20000.00
Carry outstanding balance only to	LINE 3. Sc	hedule D, for this	s line. If n	o Schedule D, carry forv	ward to appropriate line of Summary.

•			r	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of the Detailed Summary Pag	^{1e} (check only one) X 13a
ME OF COMMITTEE (In Full) ohn Whitley for Congress			Transac	tion ID : SC/10.4445
LOAN SOURCE Full Name (Last, First, Mid 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	9	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	I Ince Outstanding at Close of This Peric
100000.00	9		0.00	100000.00
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter	
M02 ^M / D06 ^D / Y Ž01Ž Y	M M / D D	ÓND	YEMĂND 0.	00 % (apr) Yes X 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	
City State	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 y 1
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
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:	y y
UBTOTALS This Period This Page (optional).			L	100000.00

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CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a
ME OF COMMITTEE (In Full) ohn Whitley for Congress			Transac	tion ID : SC/10.4446
LOAN SOURCE Full Name (Last, First, M Whitley, John, Matthew, Dr.,	iddle 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 Candidat
Original Amount of Loan	Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Peric
22000.00	2		0.00	22000.00
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter	
M03 ^M / D20 ^D / Y Ž012 Y	M M / D C	ÓNĎ	EMĂND 0.0	00 % (apr) Yes ✗ №
List All Endorsers or Guarantors (if any)	to Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
3. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
4. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	g 1 1 g 1 1 x 1
UBTOTALS This Period This Page (optional)			H	, 22000.00

0				
CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a	
ME OF COMMITTEE (In Full) ohn Whitley for Congress			Transac	tion ID : SC/10.4465
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	;	Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	nce Outstanding at Close of This Peric
27200.00	9		0.00	27200.00
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter	
M04 ^M / D04 ^D / Y Ž01Ž Y	M M / D D	Ón Ľ	Demand ^Y 0.0	00 % (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	
City State	ZIP Code		Amount Guaranteed Dutstanding:	y y
2. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address		(Occupation	
City State	ZIP Code		Amount Guaranteed Dutstanding:	g 1 1 g 1 1 m 1
3. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
4. Full Name (Last, First, Middle Initial)		1	Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code	(Amount Guaranteed Dutstanding:	y y
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line onl			H	27200.00

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CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a	
ME OF COMMITTEE (In Full) ohn Whitley for Congress			Transac	tion ID : SC/10.4466
LOAN SOURCE Full Name (Last, First, Mid 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	9	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio
10250.00	9		0.00	10250.00
TERMS Date Incurred	[Date Due	Interest Rate (If none, enter	
M04 ^M / D18 ^D / Y Ž01Ž Y	M M / D D	Ý Ôn Ì	Demand ^Y 0.1	00 % (apr) Yes ✗ №
List All Endorsers or Guarantors (if any) t	o Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 y 1
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
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:	g 1 1 g 1 1 x 1
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CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In ohn Whitley for Co	,			Transac	tion ID : SC/10.4479
LOAN SOURCE Full Name (Last, First, Middle Initial) Whitley, John, Matthew, Dr.,				Memo Item	Election: 2012 X Primary General
Mailing Address PO Box 314					Other (specify)
City Kannapolis		State NC	ZIP Code 28082	3	X Personal Funds of the Candidat
Original Amount of Loa	an 2500.00	Cumulative Pa	yment To D	ate Bala 0.00	nce Outstanding at Close of This Perio
TERMS Date Inc M04M / 30D /	^ү Ž01Ž ^ү	M M / D D	Date Due	Interest Rate (If none, enter Demand ^Y 0.0	0)
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(Amount Guaranteed Outstanding:	g
2. Full Name (Last, Firs	t, Middle Initial)		1	Name of Employer	
Mailing Address				Occupation Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
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:	y
UBTOTALS This Period ⁻	This Page (optional)		I		2500.00
OTALS This Period (last page in this line only)				······	188950.00
					188950.00 vard to appropriate line of Sumn