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Image# 14978047508

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 For An A	Authorized Com	mittee			Office Use Only
NAME OF TYPE OR PRIN COMMITTEE (in full)		cample: If typing er the lines.	g, type	12FE4M5	
John Whitley for Congress					I
ADDRESS (number and street)					
Check if different					
than previously reported. (ACC) Kannapolis				NC 2	28082
2. FEC IDENTIFICATION NUMBER ▼	CITY			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00504431	3. IS THIS REPORT	× NEW (N)	OR	AMEND (A)	
4. TYPE OF REPORT (Choose One)					
(a) Quarterly Reports:	(b) 12-Day PRE	-Election Repor	rt for the:		
		Primary (12P)		General (12	2G) Runoff (12R)
April 15 Quarterly Report (Q1)		Convention (1	2C)	Special (12	2S)
July 15 Quarterly Report (Q2)					
X October 15 Quarterly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
January 31 Year-End Report (YE)	(c) 30-Day POS	T-Election Rep	ort for the:		
		General (30G)		Runoff (30	R) Special (30S)
Termination Report (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period 07 01	2014	through	M M M 09	/ 30 /	2014
I certify that I have examined this Report and to	o the best of my kr	nowledge and b	elief it is tr	rue, correct and	complete.
Type or Print Name of Treasurer Mrs. Sarah H	lill Waters				
Signature of Treasurer Mrs. Sarah Hill Waters		[Electronically F	iled] [Date 10	/ DDD / Y Y Y Y Y Y Y Z014
NOTE: Submission of false, erroneous, or incompl	ete information may	subject the pers	son signing	this Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements FEC Form 3 (Revised 02/2003)

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Write or Type Committee Name

John Whitley for Congress

2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period 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)) 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 0.00 229741.47 (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 12/2003)

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Write or Type Committee Name

John Whitley for Congress

Report Covering the Period: From: 07 01 2014 To: 09 30 2014

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. CON	NTRIBUTIONS (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
	Political Party Committees Other Political Committees	0.00	0.00
(0)	(such as PACs)	0.00	0.00
. ,	The Candidate	0.00	7652.49
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49
	NSFERS FROM OTHER HORIZED COMMITTEES	0.00	0.00
3. LOA (a)	NS: Made or Guaranteed by the		
(a)	Candidate	0.00	188950.00
. ,	All Other Loans	0.00	0.00
(0)	(add Lines 13(a) and (b))	0.00	188950.00
EXP	SETS TO OPERATING ENDITURES	0.00	0.00
(Ref	unds, Rebates, etc.)	0.00	0.00
	IER RECEIPTS dends, Interest, etc.)	0.00	0.00
11(e	AL RECEIPTS (add Lines), 12, 13(c), 14, and 15) ry Total to Line 24, page 4)	0.00	231957.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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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
		0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(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 REPOR	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 (from	m Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	G PERIOD	1211.02

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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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: ^м 12^м ^D16 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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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: 20 ^M 12^M 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)..... 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

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4445 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 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 06 Ž012 0.00 ONDEMAND % (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)..... 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

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(check only one) Detailed Summary Page Transaction ID: SC/10.4446 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 22000.00 0.00 22000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 20 ^M 03^M Ž012 0.00 ONDEMAND % (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)..... 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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LOAITO			Detailed Summar	y Page		,	13b
NAME OF COMMITTEE (In Full)			Tra	ansaction	ID : SC/10.4465		
John Whitley for Congress							
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		[PERSONAL FUNI		ection: 2012		
Dr. John Matthew Whitley				X	Primary General		
Mailing Address PO Box 314					Other (specify)	,	
City	State	ZIP Code)				
Kannapolis	NC	28082					
Original Amount of Loan	Cumulative Payr	ment To D	ate	Balance	Outstanding at Clo	ose of This	s Period
27200.00	9		0.00	L.	· · · · · · · ·	27200.0)0
TERMS Date Incurred	Da	ate Due	Interes	t Rate		Secured:	
M 04 M / D 04 D / Y 2012 Y	M M / D D	On E	Demand	0.00	% (apr)	Yes	X _{No}
List All Endorsers or Guarantors (if any) t	to Loan Source					103	110
1. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:		,	-	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
			Amount				1
City State	ZIP Code		Guaranteed Outstanding:	7	7	-	
3. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
			Amount				1
City State	ZIP Code		Guaranteed Outstanding:	7	7		ı
4. Full Name (Last, First, Middle Initial)		1	Name of Employer				
Mailing Address		(Occupation				
	710.0		Amount				1
City State	ZIP Code		Guaranteed Dutstanding:	7	7		
SUBTOTALS This Period This Page (optional)			,0				
TOTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	line. If no	Schedule D, carr	y forward	to appropriate lin	ne of Sum	mary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4466 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 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: ^D 18^D ^M 04 Ž012 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)..... 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

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4479 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 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D30 ^M 04^M Ž012 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)..... 2500.00 TOTALS This Period (last page in this line only) 188950.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.