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Image# 15951102634

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authoriz	ed Committee	Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
John Whitley for C	ongress			
ADDRESS (number and street	PO Box 314			
Check if different				
than previously reported. (ACC)	Kannapolis		NC 2808	2
2. FEC IDENTIFICATION	N NUMBER ▼	CITY	STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00504431		S THIS X NEW (N) OR	AMENDED (A)	NC 08
4. TYPE OF REPOR	(Choose One)	. D. DDF El 11 D. 1 ( 11		
(a) Quarterly Reports		-Day PRE-Election Report for th	e:	
X April 15 Quar	terly Report (Q1)	Primary (12P)	General (12G)	Runoff (12R)
	erly Report (Q2)	Convention (12C)	Special (12S)	
		lection on	/ Y = Y = Y	in the State of
January 31 Y	ear-End Report (YE) (c) 30	-Day <b>POST</b> -Election Report for	the:	
		General (30G)	Runoff (30R)	Special (30S)
Termination R		lection on	/ Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D / Y Y Y 20		03 / D D / Y	Y Y Y 2015
I certify that I have examin	ed this Report and to the bes	t of my knowledge and belief it	is true, correct and con	mplete.
Type or Print Name of Trea	asurer Mrs. Sarah Hill Waters			
Signature of Treasurer	Mrs. Sarah Hill Waters	[Electronically Filed]	Date 04	01 / Y Y Y Y Y 2015
NOTE: Submission of false,	erroneous, or incomplete inform	ation may subject the person sign	ing this Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3 (Revised 02/2003)

# **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

#### John Whitley for Congress

01 03 31 2015 01 2015 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**

FEC Form 3 (Revised 12/2003) of Receipts PAGE 3/11

Write or Type Committee Name

# John Whitley for Congress

Report Covering the Period: From: 01 01 2015 To: 03 31 2015

	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 from individuals	0.00	35355.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	7652.49
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	43007.49
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:	7	· · · · · · · · · · · · · · · · · · ·
	(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
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry 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.	OP	ERATING EXPENDITURES	0.00	229741.47
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN 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.	REI	FUNDS 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
			7 7 7 7	7 7 7 7 7
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTI	HER DISBURSEMENTS	0.00	1005.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	230746.47
		III. CASH SU	IMMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	1211.02
24	TO	TAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		1211.02
26.	TO	TAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
27.		SH ON HAND AT CLOSE OF REPORTING	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: <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.

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 <sup>M</sup> 12<sup>M</sup> 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:

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(check only one) 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: <sup>M</sup> 02<sup>M</sup> 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

FOR LINE NUMBER: (check only one)

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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 <sup>M</sup> 03<sup>M</sup> 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

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Detailed Summary Page Transaction ID: SC/10.4465 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 27200.00 0.00 27200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 04 <sup>M</sup> 04<sup>M</sup> 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)..... 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

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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 Balance Outstanding at Close of This Period Cumulative Payment To Date 10250.00 0.00 10250.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>D</sup> 18<sup>D</sup> <sup>M</sup> 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) ulletPO 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: <sup>D</sup>30 <sup>M</sup> 04<sup>M</sup> 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.