01/22/2023 16:57

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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 011111 0	For An Autho	rized Committee	(Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typir over the lines.	ng, type 12FE4M5		
John Whitley for Co	ongress				
		1 1 1 1 1 1 1 1			
ADDRESS (number and street	PO Box 314				
▼					
Check if different than previously reported. (ACC)	Kannapolis		NC 2	NC 28082 -	
	N NIIMDED W	CITY ▲	STATE ▲	ZIP CODE ▲	
2. FEC IDENTIFICATION C C00504431	3.	IS THIS NEW (N)	OR AMENDE	STATE ▼ DISTRICT NC 08 08	
July 15 Quarte	(b) erly Report (Q1) erly Report (Q2) uarterly Report (Q3) ar-End Report (YE) (c)	Primary (12F) Convention (Election on 30-Day POST-Election Report General (300)	General (12) (12C) Special (12) port for the:	in the State of	
5. Covering Period	M M / D D / Y	Election on 2002 through	M M / D D / 12 31	State of	
I certify that I have examine Type or Print Name of Treas Signature of Treasurer	Waters, Sarah, Hill,		belief it is true, correct and Filed Date	complete.	
	erroneous, or incomplete info			penalties of 52 U.S.C. §30109	
Office		January Subject the per	Saming and respect to the		
Use Only				FEC FORM 3 (Revised 05/2016)	

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
John Whitley for Congress

2022 10 2022 12 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** 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)) 7. 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 229741.47 0.00 (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 05/2016)

PAGE 3 / 11

Write or Type Committee Name

John Whitley for Congress

10 12 2022 01 2022 31 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 32450.00 (i) Itemized (use Schedule A)..... 2905.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 35355.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) 0.00 7652.49 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 43007.49 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 188950.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 188950.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 231957.49 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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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
0.	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
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	1005.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	230746.47
	III. CASH SU	JMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	1211.02	
4	TOTAL RECEIPTS THIS PERIOD (from Line	0.00	
5.	SUBTOTAL (add Line 23 and Line 24)		1211.02
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
7.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		1211.02

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

PAGE 5 OF
FOR LINE NUMBER:
(check only one)

X 13a 13b

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NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction 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	State	ZIP Code
Kannapolis	NC	28082 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
7000.00		0.00 7000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M12 ^M / D16 ^D / Y Ž01† Y	M M / D D	ÓN ĎEMĂNĎ 0.00 % (apr) Yes ✗ No
List All Endorsers or Guarantors (if a		
1. Full Name (Last, First, Middle Initial))	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	te ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
_		Amount
City	te ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed
City	le ZIP Code	Outstanding:
SUBTOTALS This Period This Page (optio	nal)	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 Detailed Summary Page

PAGE 6 (FOR LINE NUMBER: (check only one)

X 13a 13b

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OF

Transaction ID: SC/10.4314 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 20000.00 0.00 20000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 ^D20^D Ž011 ŎN ĎEMANĎ x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

PAGE FOR LINE NUMBER: **x** 13a (check only one)

OF

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13b Transaction ID: SC/10.4445 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) \blacktriangledown PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D06D M 02M Ž01Ž **ÖNDEMÄND** x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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		100
NAME OF COMMITTEE (In Full) John Whitley for Congress		Transaction ID : SC/10.4446
LOAN SOURCE Full Name (Last, First, Mid Whitley, John, Matthew, Dr.,	Memo Item Election: 2012 Primary Occupant	
Mailing Address PO Box 314	General Other (specify) ▼	
City Kannapolis	State NC	ZIP Code 28082 Personal Funds of the Candidate
·	_	
Original Amount of Loan 22000.00	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period 0.00 22000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M03 ^M / D20 ^D / Y Ž01Ž Y	M " M / D " D	✓ ŎNĎEMĂNĎ 0.00 % (apr) Yes 🗷 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:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
4. Full Name (Last, First, Middle Initial)	Zii Gode	Outstanding: Name of Employer
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed 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. Sci	nedule 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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Transaction ID: SC/10.4465 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) PO Box 314 City State ZIP Code X Personal Funds of the Candidate NC 28082 Kannapolis Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 27200.00 0.00 27200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D04D M 04M Ž01Ž On Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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Transaction ID: SC/10.4466 NAME OF COMMITTEE (In Full) John Whitley for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Whitley, John, Matthew, Dr., General Mailing Address Other (specify) \blacktriangledown PO Box 314 City State ZIP Code X Personal Funds of the Candidate 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: (If none, enter 0) 0.00 D 18D M 04M Ž01Ž On Demand x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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 Detailed Summary Page

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X 13a 13b

OF

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AME OF COMMITTEE (In ohn Whitley for Co	•		Transa	action ID : SC/10.4479	
LOAN SOURCE Full Name (Last, First, Middle Initial) Whitley, John, Matthew, Dr.,			Election: 2012 X Primary General		
Mailing Address PO Box 314				Other (specify)	
City		State	ZIP Code	▼ Personal Funds of the Candidate	
Kannapolis		NC	28082	T CISONAL I UNOS OF THE CAMULACE	
Original Amount of Loa	ın	Cumulative Pa	ment To Date Ba	alance Outstanding at Close of This Period	
9	2500.00		0.00	2500.00	
TERMS Date Inc	urred	С	ate Due Interest Ra		
M04M / D30D /	ž01ž ^Y	M M / D D		0.00 % (apr) Yes X No	
List All Endorsers or G	, ,,	o Loan Source			
1. Full Name (Last, First	st, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,	
2. Full Name (Last, First	2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation		
0"	la	710.0.1	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9 9	
3. Full Name (Last, First	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
Cit.	Ctata	ZID Code	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer		
			Occupation		
0't.		Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9	
JEIOIALS This Period 7	inis Page (optional)		·····	2500.00	
TALS This Period (last)	page in this line only	r)	·····	188950.00	
arry outstanding halance	only to LINE 3 Sch	edule D for this	s line If no Schedule D. carry fo	rward to appropriate line of Summary.	