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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		Authorized Co		•		Office Use Only
NAME OF COMMITTEE (in fu	TYPE OR PR	INT ▼	Example: If typin over the lines.	g, type	12FE4M5	
BERT JOHNSO	N FOR U. S. CO	NGRESS				
ADDRESS (number and	street)	IST				
Check if differ than previousl reported. (ACC	ly HIGHLAND	PARK			MI L	48203
2. FEC IDENTIFICA	TION NUMBER ▼	CITY	\	5	STATE A	ZIP CODE
C C00504837		3. IS THIS REPORT	NEW (N)	OR	× AMEND (A)	STATE ▼ DISTRICT ED MI 13 13
(a) Quarterly Rep	ORT (Choose One) orts: Quarterly Report (Q1) uarterly Report (Q2)	(b) 12-Day F	PRE-Election Repo		General (1 Special (12	
October 1	5 Quarterly Report (Q3)	Election	on M M	D D /	Y Y Y	in the State of
January 3	1 Year-End Report (YE)	(c) 30-Day P	POST-Election Rep	port for the:		
			General (300	i)	Runoff (30	R) Special (30S)
Terminatio	on Report (TER)	Election		D D /	Y Y Y Y	in the State of
5. Covering Period	M M / D D D D D D D D D D D D D D D D D	/ Y Y Y Y Y Y Y Y Y 2015	through	M M 06	/ 0 0 /	2015
I certify that I have exa		-	knowledge and	belief it is tru	ue, correct and	complete.
Signature of Treasurer	Brandy Robinson		[Electronically	Filed] D	ate 07	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	lse, erroneous, or incom	plete information m	nay subject the per	son signing tl	his Report to th	ne penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

BERT JOHNSON FOR U. S. CONGRESS

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
ò.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	2750.00	135721.08
	(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))	2750.00	135721.08
	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	3172.22	146231.31
	(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))	3172.22	146231.31
	Cash on Hand at Close of Reporting Period (from Line 27)	0.00	
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
).	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25250.00	

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

BERT JOHNSON FOR U.S. CONGRESS

06 2015 04 01 2015 30 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 2750.00 123210.24 (i) Itemized (use Schedule A)...... 0.00 7440.84 (ii) Unitemized (iii) TOTAL of contributions 2750.00 130651.08 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 4350.00 (such as PACs)..... 0.00 720.00 The Candidate..... TOTAL CONTRIBUTIONS (other than loans) 2750.00 135721.08 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 15000.00 Candidate..... 350.00 0.00 (b) All Other Loans..... TOTAL LOANS 350.00 15000.00 (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) 3100.00 150721.08 (Carry Total to Line 24, page 4).....

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	3172.22	146231.31
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
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (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	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	3172.22	146231.31
	III. CASH SU	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	ORTING PERIOD	72.22
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	3100.00
25.	SUBTOTAL (add Line 23 and Line 24)		3172.22
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	3172.22
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	ig period	0.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE	NUMBER:	PAGE	5	OF	13		
(check only one)							
X 11a	11b	11c	11	d			
12	13a	13b	14	. [15		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS Full Name (Last, First, Middle Initial) Justin Johnson Date of Receipt Mailing Address 19994 Woodmont St. 2015 09 City State Zip Code Transaction ID: SA11AI.4942 MI 48225 Harper Woods FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Contribution City of Detroit Assistant Receipt For: 2010 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Whitney Johnson Date of Receipt Mailing Address 524 W. 152nd. St. 09 2015 City State Zip Code Transaction ID: SA11AI.4941 New York NY 10031 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation Actress Contribution Self Employed Receipt For: 2010 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 2750.00 SUBTOTAL of Receipts This Page (optional)..... 2750.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FC	R LINE	NU	MBER:	:	PAGE	:	6 OF	13
Use separate schedule(s)	(cr	neck only	or	ne)					
for each category of the		11a		11b		11c		11d	
Detailed Summary Page		12		13a	X	13b		14	15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS Full Name (Last, First, Middle Initial) Bertram Johnson Date of Receipt Mailing Address 36 McLean 2015 09 City State Zip Code Transaction ID: SA13B.4943 MI 48203 Highland Park FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 350.00 Name of Employer Occupation Loan from candidate State of Michigan State Legislator Receipt For: 2010 Election Cycle-to-Date | Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt B. Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Receipt For: Election Cycle-to-Date Primary General Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... 350.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 7 13 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the X 17 18 19b 19a Detailed Summary Page 20a 20b 20c 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U. S. CONGRESS Full Name (Last, First, Middle Initial) Date of Disbursement Citizens Bank 2015 Mailing Address PO Box 42001 06 30 City State Zip Code Amount of Each Disbursement this Period RΙ Providence 09420 Purpose of Disbursement 150.02 Bank Fees Transaction ID: SB17.4945 Candidate Name Category/ Type Disbursement For: 2010 Office Sought: House Senate Primary General Other (specify) President District: State: Full Name (Last, First, Middle Initial) U.S. Postal Service Date of Disbursement Mailing Address Information Requested 05 80 2015 City State Zip Code Amount of Each Disbursement this Period MI 48933 Information Requested 2935.10 Purpose of Disbursement Postage Transaction ID: SB17.4944 Candidate Name Category/ Type Disbursement For: Office Sought: 2010 House Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: 3085.12 SUBTOTAL of Disbursements This Page (optional)..... 3085.12

TOTAL This Period (last page this line number only).....

Use separate schedule(s)

FOR LINE NUMBER:

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DANS			Detailed Summary Pag	
AME OF COMMITTEE (In Full) BERT JOHNSON FOR U. S	S CONCDI	=00	Transac	etion ID : SC/10.4866
LOAN SOURCE Full Name (Last, BERTRAM COURTNEY)	First, Middle I	nitial)	[PERSONAL FUNDS]	Election: 2012 Primary
Mailing Address 36 MCLEAN ST				General Other (specify) ▼
City	Stat	e ZIP Co	de	
HIGHLAND PARK	М	l 48203		
Original Amount of Loan	Cu	mulative Payment To	Date Bala	ance Outstanding at Close of This Period
1500	00.00	,	0.00	15000.00
Date Incurred May 29 2012	M M M	Date Due	Interest Rate 2/31/2012 0.00	
List All Endorsers or Guarantors	(if any) to Lo	an Source		163 140
1. Full Name (Last, First, Middle	Initial)		Name of Employer	
Mailing Address			Occupation	
City	State ZI	P Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZI	P Code	Amount Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZI	P Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Middle I	nitial)		Name of Employer	
Mailing Address			Occupation	
City	State ZI	P Code	Amount Guaranteed Outstanding:	7
UBTOTALS This Period This Page	(optional)		>	15000.00
OTALS This Period (last page in the	s line only)		·····	, , , , , , , , , , , , , , , , , , , ,
Carry outstanding balance only to L	INE 3. Schedul	e D. for this line. If	no Schedule D. carry forv	vard to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

Detailed Summary Page Transaction ID: SC/10.4943 NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2010 Primary Bertram Johnson General Mailing Address Other (specify) 36 McLean City State ZIP Code MI 48203 Highland Park Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 350.00 0.00 350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 04^M 09 2015 % (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)..... 350.00 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

FOR LINE NUMBER: (check only one)

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JANS		Detailed Summary Page X 13b
AME OF COMMITTEE (In Full)		Transaction ID : SC/10.4887
BERT JOHNSON FOR U.S. C	CONGRESS	
LOAN SOURCE Full Name (Last, Firs	st, Middle Initial)	Election: 2012
Heather Johnson		Primary General
Mailing Address 5310 Bentley Road, #202		Other (specify) ▼
City	State ZIP	Code
West Bloomfield	MI 4832	22
Original Amount of Loan	Cumulative Payment	To Date Balance Outstanding at Close of This Period
2500.00		0.00 2500.00
TERMS Date Incurred	Date D	ue Interest Rate Secured:
M 03 M / D 23 D / Y 2015 Y	M M / D D /	[°] 12/31/2015 ° 0.00 % (apr)
List All Endorsers or Guarantors (if a	any) to Loan Source	
1. Full Name (Last, First, Middle Initia	al)	Name of Employer
Mailing Address		Occupation
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial))	Name of Employer
Mailing Address		Occupation
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial))	Name of Employer
Mailing Address		Occupation
City Sta	ate ZIP Code	Amount Guaranteed
		Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	onal)	2500.00
TOTALS This Period (last page in this line	e 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/10.4888 NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Justin Johnson General Mailing Address Other (specify) 5310 Bentley Road, #202 State ZIP Code City MI 48322 West Bloomfield Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2400.00 0.00 2400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D 15 ^M 03^M 2015 12/31/2015 0.00 % (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 ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2400.00 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/10.4884 NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Brandy Robinson General Mailing Address Other (specify) 4031 Fullerton City State ZIP Code MI 48238 Detroit Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 03^M 2015 12/31/2015 0.00 % (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) 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

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: SC/10.4885 NAME OF COMMITTEE (In Full) BERT JOHNSON FOR U.S. CONGRESS LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Primary Damon Robinson General Mailing Address Other (specify) 4031 Fullerton City State ZIP Code MI 48238 Detroit Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 23 ^M 03^M 2015 12/31/2015 0.00 % (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 ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 TOTALS This Period (last page in this line only) 25250.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.