

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Audra Johnson for Congress

ADDRESS (number and street) 7615 42nd Ave

(Check if address is changed) 7615 42nd Ave

Hudsonville MI 49426
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) brassfieldmedia@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.audraforcongress.com

2. DATE 03 / 17 / 2021

3. FEC IDENTIFICATION NUMBER C C00773069

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Johnson, Audra, L, Ms.,

Signature of Treasurer Johnson, Audra, L, Ms., [Electronically Filed] Date 05 / 24 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE:

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Johnson, Audra, Joy, Mrs.,

Candidate Party Affiliation REP Office Sought: House Senate President State MI District 03

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

- (g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____

C _____

2. _____

C _____

Write or Type Committee Name

Audra Johnson for Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Grid for organization name

Mailing Address

Grid for mailing address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Crawford, Audra, L, Ms.,

Full Name

Grid for full name

Mailing Address

4708 Chalmers

Grid for mailing address

Detroit

MI

48215

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Grid for title or position

Telephone number

586

675

2361

Grid for telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Johnson, Audra, L, Ms.,

Grid for full name of treasurer

Mailing Address

7615 42nd Ave

Grid for mailing address

Hudsonville

MI

49426

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Treasurer

Grid for title or position

Telephone number

616

264

8152

Grid for telephone number

Full Name of Designated Agent Brassfield, Adam, , ,

Mailing Address 236 County Road 4421
Poplar Bluff MO 63901
CITY STATE ZIP CODE

Title or Position Campaign Manager Telephone number 573 300 8562

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

The Bancorp Bank

Mailing Address ATTN: Deposit Operations
P.O. Box 15329
Wilmington DE 19885
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address
CITY STATE ZIP CODE