

Image# 202308049596497176

# FEC FORM 2

## STATEMENT OF CANDIDACY

|   |                            |  |   |  |
|---|----------------------------|--|---|--|
| 1. (a) Name of Candidate (in full)<br>Johnson, Gloria, , ,        |                            |  | 2. Candidate's FEC Identification Number<br>S4TN00526 |  |
| (b) Address (number and street)<br>73 White Bridge Rd<br>#103-353 |                            | <input type="checkbox"/> Check if address changed  |   |  |
| (c) City, State, and ZIP Code<br>Nashville TN 37205               |                            | 3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A) |   |  |
| 4. Party Affiliation<br>DEMOCRATIC PARTY                          | 5. Office Sought<br>Senate | 6. State & District of Candidate<br>TN 00  |   |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

|   |  |  |
|---|--|--|
| (a) Name of Committee (in full)<br>Gloria for Tennessee Exploratory Committee |  |  |
| (b) Address (number and street)<br>73 White Bridge Rd<br>#103-353             |  |  |
| (c) City, State, and ZIP Code<br>Nashville TN 37205                           |  |  |

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

|                                 |  |  |
|---------------------------------|--|--|
| (a) Name of Committee (in full) |  |  |
| (b) Address (number and street) |  |  |
| (c) City, State, and ZIP Code   |  |  |

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

|  |                    |
|--|--------------------|
| Signature of Candidate<br>Johnson, Gloria, , , | Date<br>08/04/2023 |
|--|--------------------|

**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
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: 97 `A-G79 @ @ B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F2N

Transaction ID :

Though this is an exploratory committee, for the sake of transparency and full compliance with the law, State Representative Gloria Johnson and her principal campaign committee will abide by all requirements for principal campaign committees and candidates under the Federal Election Campaign Act of 1971, as amended.

Form/Schedule:

Transaction ID: