

Image# 202210109532121277

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JOHNSON, DUSTY, , ,		2. Candidate's FEC Identification Number H8SD01055
(b) Address (number and street) <input type="checkbox"/> Check if address changed 501 GREENRIDGE LANE		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)
(c) City, State, and ZIP Code MITCHELL SD 57301		
4. Party Affiliation Rep	5. Office Sought House	6. State & District of Candidate SD 01

### 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) FRIENDS OF DUSTY JOHNSON	
(b) Address (number and street) PO BOX 278	
(c) City, State, and ZIP Code MITCHELL SD 57301	

### 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) FRESHMAN AGRICULTURAL REPUBLICAN MEMBERS TRUST AKA FARM TRUST	
(b) Address (number and street) PO BOX 30844	
(c) City, State, and ZIP Code BETHESDA MD 20824	

*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 JOHNSON, DUSTY, , ,  <i>[Electronically Filed]</i>	Date 10/10/2022
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**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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Optional Supplemental Page for Designation  
of Additional Authorized Committees

FEC Form 2S (Revised 02/2017)

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(a) Name of Committee (in full)

**PROBLEM SOLVERS PATRIOTS**

(b) Address (number and street)

824 S MILLEDGE AVE STE 101

(c) City, State, and ZIP Code

ATHENS

GA

30605

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)

**Dusty Johnson Victory Committee**

(b) Address (number and street)

PO Box 365

(c) City, State, and ZIP Code

McLean

VA

22101

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**Problem Solver Republicans**

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