FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ronald Edward Johnson 284 Linden Ave ADDRESS (number and street) (Check if address is changed) Oil City 16301 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ronjohnson2@yahoo.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00779389 FEC IDENTIFICATION NUMBER > 3. X 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. Rupp, Derek, J, Mr, Type or Print Name of Treasurer Rupp, Derek, J, Mr, [Electronically Filed] 05 12 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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. (Cominformation below.)	nplete the candidate
Nam Can	e of didate	Johnson, Ronald, Edward, Mr, II	
	didate y Affiliati	on REP Office Sought: House Senate President	State PA District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	'
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee	Name	
Ronald Edwa	ard Johnson	
. Name of Any Connec	ted Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Representative Joint Fundraising Representative Identify by name, address (phone number optional) and position of the pers	
Full Name	o, Derek, J, Mr,	
Mailing Address	284 Linden Ave	
	Oil City PA	16301
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
Treasurer: List the nam any designated agent (6	ne and address (phone number optional) of the treasurer of the committee; are.g., assistant treasurer).	d the name and address of
Full Name Rupp of Treasurer	o, Derek, J, Mr,	
Mailing Address	284 Linden Ave	
	Oil City	
	CITY	16301 ZIP CODE

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Full Name of Designated Agent		
Mailing Address		
g : .aa. 033		
	CITY STATE Z	IP CODE
Title or Position		1 1
	Telephone number	
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