

Image# 202404129627599529

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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) JOHNSON, SHERYL, , ,		
(b) Address (number and street) 6640 WEST THATCHER DRIVE		<input type="checkbox"/> Check if address changed
(c) City, State, and ZIP Code SIOUX FALLS SD 57106		2. Candidate's FEC Identification Number H4SD00064
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought House
6. State & District of Candidate SD 00		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)

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) SHERYL JOHNSON FOR CONGRESS		
(b) Address (number and street) P.O. BOX 91215		
(c) City, State, and ZIP Code SIOUX FALLS SD 57109		

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 Johnson, Sheryl, , ,	Date 04/12/2024
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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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Form/Schedule: F2N
Transaction ID :

Filing amended FEC Form 2 by the candidate as the original was apparently auto-generated after the filing of Form 1.

Form/Schedule:
Transaction ID: