

JOHNSON LAW FIRM
A PROFESSIONAL LEGAL LIMITED LIABILITY COMPANY

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502 TUNICA DRIVE EAST
POST OFFICE BOX 468
MARKSVILLE, LOUISIANA 71351

2013 AUG 26 PM 5:33

FEC MAIL CENTER

ROBERT ALLEN JOHNSON
MARY HELEN JOHNSON

TELEPHONE: (318) 253-0935
FACSIMILE: (318) 240-9796

August 20, 2013

Federal Election Commission
999 E Street, NW
Washington, DC. 20463

**RE: ROBERT JOHNSON FOR CONGRESS
FEC FORM 1 STATEMENT OF ORGANIZATION
FEC FORM 2 STATEMENT OF CANDIDACY**

Dear Sir or Madam:

Enclosed herewith please find the above-referenced Federal Election Commission forms which I am submitting to you for filing.

If you have any questions in regard to same, please do not hesitate to contact me at the above telephone number or address.

Thanking you in advance for your kind cooperation and assistance in this matter and with best wishes and kindest personal regards, I remain

Very truly yours,


ROBERT JOHNSON

RAJ/jdj
Enclosures



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FEC FORM 1

STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

ROBERT JOHNSON FOR CONGRESS

ADDRESS (number and street)

Post Office Box 468

(Check if address is changed)

Marksville

LA

71351

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

robertjohnsoncongress@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

08 / 20 / 2013

3. FEC IDENTIFICATION NUMBER

C

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

Hope Gagnard

Signature of Treasurer

Hope Gagnard

Date

08 / 20 / 2013

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 Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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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 **ROBERT JOHNSON**

Candidate Party Affiliation **DEM** Office Sought: House Senate President State **LA** District **05**

- (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.)

Joint Fundraising Representative:

- (g) 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.
- (h) 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.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

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Write or Type Committee Name

ROBERT JOHNSON FOR CONGRESS

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

NONE

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee 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.

Full Name HOPE GAGNARD

Mailing Address Post Office Box 309

Marksville LA 71351

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 318 - 253 - 6501

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 Hope Gagnard

Mailing Address Post Office Box 309

Marksville LA 71351

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 318 - 253 - 6501

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Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

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.

UNION BANK

Mailing Address

305 North Main Street

[Empty grid for Mailing Address]

Marksville

LA

71351

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY

STATE

ZIP CODE

13031111858

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
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USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


 PREPARER

8/26/13
 DATE PREPARED

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