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. JIM COSTA FOR CONGRESS 2037 W Bullard Ave ADDRESS (number and street) # 355 (Check if address is changed) Fresno 93711-1200 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sdiebert@att.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://www.jimcosta.com/ (Check if address is changed) DATE 2020 C00391029 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. Diebert, Steven, D.,, Type or Print Name of Treasurer Diebert, Steven, D.,, [Electronically Filed] 80 19 2020 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

-	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
(a)	x	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. (Compinformation below.)	plete the candidate
Nam Cand	lidate	Costa, Jim, , Mr.,	
	lidate Æffiliati	on DEM Office Sought: X House Senate President	State CA District 16
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Par	ty Con	nmittee: (National, State	Democratic,
(d)			Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its confi	nected 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 secommittee. (i.e., nonconnected committee)	gregated 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 Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	1		

FFC Forms 1 (Deviced	02/2000\	Daga 2
FEC Form 1 (Revised Write or Type Committee Name		Page 3
	OR CONGRESS	
	Organization, Affiliated Committee, Joint Fundraising Representativ	a or Leadership DAC Sponsor
-		e, or Leadership PAC Sponsor
Problem Solvers Hero) es	
Mailing Address	918 Pennsylvania Ave SE	
	Washington	20003-2140
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Represen	Leadership PAC Sponsor
 Custodian of Records: Idea books and records. 	ntify by name, address (phone number optional) and position of the	person in possession of committee
	steven, D., ,	
Full Name	2037 W Bullard Ave	
Mailing Address	# 355	
	Fresno	,93711-1200
	industrial in the second secon	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	559
Treasurer: List the name an any designated agent (e.g., and the second sec	d address (phone number optional) of the treasurer of the committe assistant treasurer).	e; and the name and address of
	teven, D., ,	I
of Treasurer	j2037 W Bullard Ave	
Mailing Address		
	# 355	100744 4000
	Fresno	93711-1200
Title or Position	CITY STATE	ZIP CODE 559 252 2004
	Telephone number	

9.

			Page 4
Full Name of Designated Agent	iebert, Steven, D., ,		
Mailing Address	2037 W Bullard Ave		
	# 355		
	Fresno		3711-1200
Title or Desition	CITY	STATE	ZIP CODE
Title or Position Treasurer	Telephor	ne number 559	_ 252 _ 2004
	epositories: List all banks or other depositories in which the cost or maintains funds. ository, etc.	ommittee deposits funds	, holds accounts, rents
F	Premier Valley Bank		
Mailing Address	255 East Park Circle		
	Suite 180		
	Fresno	CA93	720
	CITY	STATE	ZIP CODE
Name of Bank, Dep	ository, etc.		
Ŀ	Premier Valley Bank 255 East Park Circle		
Mailing Address	Suite 180		
	Fresno	CA 93	7720
	CITY	STATE	ZIP CODE

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisir	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
Mailing Address	PO Box 75357		
	Washington	DC	20013-0357
Data Carata Sa	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connecte			Leadership PAC S
Connecte esignated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee		Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	Affiliated Committee y by name, address (phone number – optional) CITY	Fundraising Representation	
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail	Affiliated Committee y by name, address (phone number – optional) CITY Te ries: List all banks or other depositories in which	Fundraising Representation	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depository, etc. Premieses	Affiliated Committee y by name, address (phone number – optional) CITY CITY Te ries: List all banks or other depositories in which aintains funds. Per Valley Bank 255 East Park Circle	Fundraising Representation	ZIP CODE A