FEC FORM 1		STATEMEN ORGANIZA		Office	PAGE 1 / 5
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Tom Steye	r PAC				
		PO Box 2581			
ADDRESS (number an					
(Check if a is changed	address 1)	Boise		ID 83701 STATE ▲	– [ZIP CODE ▲
COMMITTEE'S E-MA	AIL ADDRES	S			
(Check if a is changed		info@zintzoconsulting.c	om 		
		Optional Second E-Mail Add	ress		
COMMITTEE'S WEB	address	RESS (URL)			
2. DATE	6 / D 16	2020			
3. FEC IDENTIFIC	CATION NU	MBER ► C CO	0745869		
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have e	examined this	s Statement and to the best of	of my knowledge and belief it i	s true, correct and co	mplete.
Type or Print Name	of Treasurer	Blas, Hunter, , ,			
Signature of Treasure	er Blas, H	lunter, , ,	[Electronically Filed]	Date 06	16 / Y Y Y Y 2020
NOTE: Submission of			nay subject the person signing th N SHOULD BE REPORTED WI		alties of 2 U.S.C. §437g.
Office Use Only			For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	n FE	C FORM 1 Revised 06/2012)

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FEC Form 1 (Rev	ised 02/2009)	Page 2
TYPE OF COMMITTE		
Candidate Commi	ttee:	
(a) This con	nmittee is a principal campaign committee. (Complete the candidate information below.)	
	nmittee is an authorized committee, and is NOT a principal campaign committee. (Compl ion below.)	ete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) This con	nmittee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This con		Democratic, epublican, etc.) Party
Political Action Co	ommittee (PAC):	
(e) This con	nmittee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
		Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	mmittee supports/opposes more than one Federal candidate, and is NOT a separate seg ee. (i.e., nonconnected committee)	regated fund or part
	n addition, this committee is a Lobbyist/Registrant PAC.	
	n addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising	Representative:	
	mittee collects contributions, pays fundraising expenses and disburses net proceeds for two ses/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	mittee collects contributions, pays fundraising expenses and disburses net proceeds for two ses/organizations, none of which is an authorized committee of a federal candidate.	or more political
Committees P	Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

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Write or Type Committee Name

Tom Steyer PAC

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

N																																					
	Mailing Address																																				
																											L] -				
											CI	ΤY											S	TA	ΓE						ZIF	°С	OD	Ε			
	Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor																																				
7.	Custodian of Records.		tify	by	nar	ne,	ac	ldre	ess	s (þ	bho	ne	nu	mb	er ·	0	ptio	onal	l) a	nd	ро	sitic	on	of	the	pe	rso	n i	n p	005	ses	sio	n c	of c	om	mitt	tee
			~ "																																		

1	
Full Name	
Mailing Address	PO Box 2581
	Boise ID 83701
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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	Blas, Hunter, , ,
Mailing Address	PO Box 2581
	Boise
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														 								1				I		1			_
Mailing Address																															
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	CITY										STATE ZIP CODE																				
Title or Position																															
															Tele	eph	ione	e ni	umt	ber				_							

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.

Amalg	amated Bank										
Mailing Address	1825 K St NW										
	Washington	DC 20006	-								
	CITY	STATE ZIP CO	ODE								
Name of Bank, Depository,	Name of Bank, Depository, etc.										
Mailing Address											
			-								
	CITY	STATE ZIP CO	ZIP CODE								

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account to deposit and withdraw funds raisedin unlimited amounts from individuals, corporations, labor organizations, and/or other political committees. The funds maintained in this separate account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: