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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Resurgent Left 770 S Grand Ave ADDRESS (number and street) Unit 6102 (Check if address is changed) Los Angeles 90017 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS theresurgentleft@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) resurgentleft.org (Check if address is changed) DATE 2020 C00629154 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Gonzalez, Joseph, , , Type or Print Name of Treasurer Gonzalez, Joseph,,, [Electronically Filed] 07 22 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 Only

Local 202-694-1100

_	EC E 0	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	ray e Z
Can	didate	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. (Cor information below.)	nplete the candidate
Name Cand			
Cand Party	idate Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Candi			
Part	y Con	nmittee:	(Dama anati
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Polit	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (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.)	
Joint	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo 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 N	Name	
Resurgent Le	eft	
	ted Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
Ü		
	CITY STATE	ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	n in possession of committee
Politic	cal CFOs, Inc., -, , ,	
	3000 Airport Dr.	
Mailing Address	#204	
	Erie CO 8	30516
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name Gonza	alez, Joseph, , ,	
Mailing Address	770 S Grand Ave Unit 6102	
	Los Angeles CA 9	00017
Title or Position Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent	Political CFOs, Inc, Political CFOs, Inc, , ,	
Mailing Address	3000 Airport Dr.	
	Unit 204	
	Erie CO 80516 CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other D	Depositories: List all banks or other depositories in which the committee deposits funds, hold	s accounts, rents
safety deposit box	tes or maintains funds.	s accounts, rents
Banks or Other D safety deposit boxe Name of Bank, De	tes or maintains funds.	s accounts, rents
safety deposit box Name of Bank, De	tes or maintains funds.	s accounts, rents
safety deposit box Name of Bank, De	epository, etc.	s accounts, rents
safety deposit box Name of Bank, De	ces or maintains funds. epository, etc. Chase	s accounts, rents
safety deposit box Name of Bank, De	ces or maintains funds. epository, etc. Chase	s accounts, rents
safety deposit box Name of Bank, De	ces or maintains funds. epository, etc. Chase 595 Market St	s accounts, rents
safety deposit box Name of Bank, De	Chase San Francisco CITY STATE	
safety deposit boxon Name of Bank, Design Mailing Address	Chase San Francisco CITY STATE	
safety deposit boxon Name of Bank, Design Mailing Address	Chase San Francisco CITY STATE	
Safety deposit boxon Name of Bank, Description Mailing Address Name of Bank, Description Description (Control of Bank), Des	Chase San Francisco CITY STATE	
Safety deposit boxon Name of Bank, Description Mailing Address Name of Bank, Description Description (Control of Bank), Des	Chase San Francisco CITY STATE	