

Statement of Organization
Recipient Committee

1465198

RECEIVED AND FILED
in the office of the Secretary of State
of the State of California
Date Stamp
DEC 04 2023
DEC 27 2023

CALIFORNIA FORM 410
RECEIVED AND FILED
in the office of the Secretary of State
of the State of California
DEC 15 2023

Statement Type

Initial
 Not yet qualified or
 Date qualification threshold met

Amendment
Date qualification threshold met

Termination - See Part 5
Date of termination

1. Committee Information

I.D. Number (if applicable)

NAME OF COMMITTEE
The Committee 2 Elect Diahna Garcia-Ruiz Imperial County Supervisor, District 2 - 2024

STREET ADDRESS (NO P.O. BOX)
23 E. Main St

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Heber	CA	92249	760-455-1790

FULL MAILING ADDRESS (IF DIFFERENT)
PO Box 234 Heber CA 92249

E-MAIL ADDRESS (REQUIRED) / FAX (OPTIONAL)
diahnagarcia@yahoo.com

COUNTY OF DOMICILE
Imperial

JURISDICTION WHERE COMMITTEE IS ACTIVE
Imperial

2. Treasurer and Other Principal Officers

NAME OF TREASURER
Laura Fischer

STREET ADDRESS (NO P.O. BOX)
770 Circle Drive

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Holtville	CA	92243	760-791-0949

NAME OF ASSISTANT TREASURER, IF ANY
Moises G. Cardenas

STREET ADDRESS (NO P.O. BOX)
52 E. Fawcett Rd

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Heber	CA	92249	760-960-3644

NAME OF PRINCIPAL OFFICER(S)
Olivia Delgado

STREET ADDRESS (NO P.O. BOX)
70 W. Second St.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Heber	CA	92249	760-540-2080

lfischer821@yahoo.com

Attach additional information on appropriately labeled continuation sheets.

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11/30/2023 By [Signature] SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 11/30/2023 By [Signature] SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

Executed on _____ By _____ SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

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INSTRUCTIONS ON REVERSE

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COMMITTEE NAME

The Committee 2 Elect Diahna Garcia-Ruiz Imperial County Supervisor, District 2 -2024

I.D. NUMBER

Pending ✓

4. Type of Committee (Continued)

General Purpose Committee

Not formed to support or oppose specific candidates or measures in a single election. Check only one box:

CITY Committee

COUNTY Committee

STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Small Contributor Committee

_____ / _____ / _____
Date qualified

5. Termination Requirements

By signing the verification, the treasurer, assistant treasurer and/or candidate, officerholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
 - This committee does not anticipate receiving contributions or making expenditures in the future;
 - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
 - This committee has no surplus funds; and
 - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.