PAGE 1 / 16 =

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. Bennet for Colorado PO Box 3078 ADDRESS (number and street) (Check if address is changed) Denver 80201 CO CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance2@bluewavepolitics.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) https://michaelbennet.com/ (Check if address is changed) DATE 05 2022 C00458398 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. Fischer, Joyce, , , Type or Print Name of Treasurer Fischer, Joyce, , , [Electronically Filed] 04 05 2022 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

| | Form 1 (Revised 02/2009) | Page 2 |
|---------------------------|--|--|
| | COMMITTEE ate Committee: | |
| (a) x | | |
| (b) | This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.) | plete the candidate |
| Name of Candidate | Bennet. Michael | |
| Candidate Party Affili | DEM S | State CO District |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name of Candidate | | |
| Party Co | ommittee: | |
| (d) | | (Democratic, Republican, etc.) Party. |
| Political | Action Committee (PAC): | |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con | 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 se committee. (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.) | |
| Joint Fu | ndraising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 |
| Co | ommittees Participating in Joint Fundraiser | |
| 1. | | |
| 2. | FEC ID number | |
| 3. | | |
| 4. | | |

| FEC Form 1 (Revised | 02/2009) | Page 3 |
|---|---|---------------------------------|
| Write or Type Committee Nam | | . 232 🐱 |
| Bennet for Cold | | |
| | Organization, Affiliated Committee, Joint Fundraising Representative, o | or Leadership PAC Sponsor |
| The Colorado Way | | |
| The Obiorado Way | | |
| | PD D 00779 | |
| Mailing Address | PO Box 3078 | |
| | | |
| | Denver CO | 80201 |
| | CITY STATE | ZIP CODE |
| Relationship: Connecte | d Organization Affiliated Committee 🗶 Joint Fundraising Representati | ve Leadership PAC Sponsor |
| Custodian of Records: Ide books and records. | ntify by name, address (phone number optional) and position of the per | rson in possession of committee |
| Haggard, | Lora, , , | |
| | 499 S Capitol St SE | |
| Mailing Address | Ste 407 | |
| | Washington | 20003 |
| | | |
| Title or Position | CITY STATE | ZIP CODE |
| Custodian of Records | Telephone number | 2 730 2779 |
| Treasurer: List the name ar any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; a assistant treasurer). | and the name and address of |
| Full Name Fischer, J | oyce, , , | |
| of Treasurer | IPO Box 3078 | |
| Mailing Address | | |
| | | |
| | Denver | 7ID CODE |
| Title or Position Joyce Fischer | CITY STATE 20 Telephone number | ZIP CODE 2 730 - 2779 |
| | | |

| FEC For i | n 1 (Revised 02/2009) | Page 4 |
|---|---|---------------|
| | | |
| Full Name of Designated Agent | <u> </u> | |
| Mailing Address | | |
| | | |
| | CITY STATE ZI | IP CODE |
| Title or Position | | 1 1 |
| | Telephone number | |
| safety deposit be Name of Bank, | Depository, etc. | |
| | Depository, etc. Amalgamated Bank 1825 K Street | |
| Name of Bank, | Depository, etc. Amalgamated Bank 1825 K Street Washington DC 20006 | |
| Name of Bank, Mailing Address | Depository, etc. Amalgamated Bank 1825 K Street Washington CITY STATE Z | IP CODE |
| Name of Bank, | Depository, etc. Amalgamated Bank 1825 K Street Washington CITY STATE Z | IP CODE |
| Name of Bank, Mailing Address Name of Bank, | Depository, etc. Amalgamated Bank 1825 K Street Washington CITY STATE Z | IP CODE |
| Name of Bank, Mailing Address | Depository, etc. Amalgamated Bank 1825 K Street Washington CITY STATE Z Depository, etc. | IP CODE |

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

| | • | Participant: | | | | | |
|-------------|----------------------|-----------------------------|------------------|----------------------------|--------------|--------------------------|----------|
| 1. | | | | FEC II | O number | С | |
| 2. | | | | FEC II | O number | C | |
| 3. | | | | FEC II | O number | C | |
| 4. | | | | FEC II | O number | С | |
| | | | | | | | |
| | | rganization, Affiliated Com | mittee, Joint Fu | ındraising Re _l | presentative | e, or Leadership PAC Spo | onsor |
| Cor | nmon Sense 20 | 20 | | | | | |
| | | | | | | | |
| N .4 | Inilian Address | 910 18th St NW | | | | | |
| IV | lailing Address | Suite 925 | | | | | |
| | | Washington | | | DC I | 20006 | |
| 5 | odente coloto | | | | | | |
| К | elationship: | CIT | Y A | | STATE ▲ | ZIP CODE ▲ | L |
| Designa | ated Agent: Identify | by name, address (phone nu | ımber – optional |) | | | |
| Full | Name | oy name, address (phone nu | ımber – optional |) | | | |
| Full | | oy name, address (phone nu | ımber – optional |) | | | |
| Full | Name | oy name, address (phone nu | ımber – optional |) | | | |
| Full Mai | Name | CITY | | | STATE A | ZIP CODE A | |
| Full Mai | Name | CITY | | | STATE A | ZIP CODE A | |

FEC Form 1S (Revised 02/2017)

| h). Joint Fundraisin | | | === | C ID number | C |
|--|-------------------|---|-------------------|------------------|----------------------------|
| 1. | | | | | |
| 2. | | | | C ID number | C |
| 3. | | | FE(| C ID number | C |
| 4 | | | FE(| C ID number | C |
| ame of Any Connected | Organization, Aff | iliated Committee, Joi | int Fundraising | Representativ | ve, or Leadership PAC Spor |
| Common Sense 2 | 2020 - II | | | | |
| | | | | | |
| Mailing Address | 910 17th St NW | <i>!</i> | | | |
| | Suite 925 | | | | |
| | Washington | | | DC | 20006 |
| Relationship: | | CITY ▲ | | STATE A | ZIP CODE ▲ |
| | d Organization | 1 | Y laint Fundra | ioina Donrocco | totive Leadership DAC C |
| Connected | d Organization | Affiliated Committee | Joint Fundra | ising Represen | tative Leadership PAC S |
| | | Affiliated Committee | | ising Represen | tative Leadership PAC S |
| Connected esignated Agent: Identify | | Affiliated Committee | | ising Represen | Leadership PAC S |
| Connected esignated Agent: Identify Full Name | | Affiliated Committee | | ising Represen | Leadership PAC S |
| Connected esignated Agent: Identify Full Name | y by name, addres | Affiliated Committee | itional) | | |
| Connected esignated Agent: Identify Full Name | y by name, addres | Affiliated Committee | itional) | state | |
| esignated Agent: Identify Full Name Mailing Address | y by name, addres | Affiliated Committee | itional) | | |
| esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail | y by name, addres | Affiliated Committee ss (phone number – op | tional) Telephon | STATE A e Number | |
| Esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION Anks or Other Deposito | y by name, addres | Affiliated Committee ss (phone number – op | tional) Telephon | STATE A e Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposito aftety deposit boxes or ma | y by name, addres | Affiliated Committee ss (phone number – op | tional) Telephon | STATE A e Number | ZIP CODE A |
| connected esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Deposito tiety deposit boxes or material depository, etc. | y by name, addres | Affiliated Committee ss (phone number – op | tional) Telephon | STATE A e Number | ZIP CODE A |

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

| h). Joint Fundraisi | ng Participant: | | |
|--|--|---------------------------|---------------------------|
| 1. | | FEC ID number | C |
| 2. | | FEC ID number | С |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | C |
| | | | |
| | Organization, Affiliated Committee, Joint Fun | draising Representative | e, or Leadership PAC Spon |
| Bennet Wyden V | ictory Fund | | |
| | | | |
| | 600 Pennsylvania Ave SE #15180 | | |
| Mailing Address | | | |
| | | | 00000 |
| | Washington | DC | 20003 |
| Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| Connecte | ed Organization Affiliated Committee | int Fundraising Represent | ative Leadership PAC S |
| | Affiliated Committee Joint Jo | int Fundraising Represent | ative Leadership PAC S |
| esignated Agent: Identi | | int Fundraising Represent | ative Leadership PAC S |
| esignated Agent: Identi | | int Fundraising Represent | ative Leadership PAC S |
| esignated Agent: Identi | fy by name, address (phone number – optional) | int Fundraising Represent | |
| esignated Agent: Identi Full Name Mailing Address | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi | fy by name, address (phone number – optional) | STATE A | |
| esignated Agent: Identi Full Name Mailing Address | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi Full Name | fy by name, address (phone number – optional) CITY CITY | STATE A Telephone Number | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and managemen | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and managemen | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |

FEC Form 1S (Revised 02/2017)

| 5(g) c | or(h). Joint Fundraisin g | Participant: | | |
|--------|--|--|------------------------|------------------------------|
| | 1. | | FEC ID number | С |
| | 2. | | FEC ID number | C |
| | 3. | | FEC ID number | C |
| | 4. | | FEC ID number | C |
| 6. | | Organization, Affiliated Committee, Joint Fundra | ising Representative | e, or Leadership PAC Sponsor |
| | Colorado New Har | mpshire Victory Fund | | |
| | | | | |
| | Mailing Address | 600 Pennsylvania Ave SE #15180 | | |
| | | | | |
| | | Washington | DC DC | 20003 |
| | Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Connected | Organization Affiliated Committee | Fundraising Representa | ative Leadership PAC Sponsor |
| | | | | |
| 8. | Designated Agent: Identify | by name, address (phone number - optional) | | |
| 8. | Designated Agent: Identify Full Name | by name, address (phone number – optional) | | |
| 8. | | by name, address (phone number – optional) | | |
| 8. | Full Name | by name, address (phone number – optional) | | |
| 8. | Full Name | by name, address (phone number – optional) | | |
| 8. | Full Name | CITY | STATE A | ZIP CODE A |
| 8. | Full Name | CITY A | | |
| | Full Name Mailing Address TITLE OR POSITION | CITY A Tele ies: List all banks or other depositories in which the | STATE ▲ ephone Number | ZIP CODE 🛦 |
| | Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mai | CITY A Tele ies: List all banks or other depositories in which the | STATE ▲ ephone Number | ZIP CODE 🛦 |
| | Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mail | CITY A Tele ies: List all banks or other depositories in which the | STATE ▲ ephone Number | ZIP CODE 🛦 |
| | Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mail Name of Bank, Depository, etc. | CITY A Tele ies: List all banks or other depositories in which the | STATE ▲ ephone Number | ZIP CODE 🛦 |
| 9. | Full Name Mailing Address TITLE OR POSITION Banks or Other Depositorisafety deposit boxes or mail Name of Bank, Depository, etc. | CITY A Tele ies: List all banks or other depositories in which the | STATE ▲ ephone Number | ZIP CODE 🛦 |

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

| | ing Participant: | | |
|--|---|---------------------------|---------------------------------|
| 1. | | FEC ID number | С |
| 2. | | FEC ID number | C |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | С |
| | | | |
| Name of Any Connected Bennet Blumenth | d Organization, Affiliated Committee, Joint F าลl Victory Fund | undraising Representativ | e, or Leadership PAC Spons |
| | | | |
| | | | |
| Mailing Address | 499 S Capitol St SE | | |
| | | | |
| | Washington | DC | 20003 |
| Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| Designated Agent: Ident | ify by name, address (phone number – optiona | l) | |
| Designated Agent: Ident | ify by name, address (phone number – optiona | I) | |
| | ify by name, address (phone number – optiona | I) | |
| Full Name | ify by name, address (phone number – optiona | i) | |
| Full Name | ify by name, address (phone number – optiona | i) | |
| Full Name | CITY A | STATE A | ZIP CODE A |
| Full Name | CITY A | | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION | CITY A | STATE A Telephone Number | |
| Full Name Mailing Address TITLE OR POSITION | CITY ▲ Cories: List all banks or other depositories in w | STATE A Telephone Number | |
| Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit | CITY ▲ Cories: List all banks or other depositories in wanaintains funds. | STATE A Telephone Number | |
| Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite the properties of the position of the p | CITY ▲ Cories: List all banks or other depositories in wanaintains funds. | STATE A Telephone Number | ts funds, holds accounts, rents |
| Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or not be boxed by the second state of Bank, Depository, etc. | CITY A cories: List all banks or other depositories in water an annual stands. | STATE A Telephone Number | ts funds, holds accounts, rents |
| Full Name Mailing Address TITLE OR POSITION Banks or Other Deposit afety deposit boxes or not be boxed by the second state of Bank, Depository, etc. | CITY A cories: List all banks or other depositories in water an annual stands. | STATE A Telephone Number | ts funds, holds accounts, rents |

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

| h). Joint Fundraisi | .g . apa | | |
|--|--|----------------------------|---------------------------|
| 1. | | FEC ID number | C |
| 2. | | FEC ID number | С |
| 3. | | FEC ID number | С |
| 4. | | FEC ID number | C |
| | | | |
| ame of Any Connected Justice 2022 | Organization, Affiliated Committee, Joint Fur | ndraising Representativ | e, or Leadership PAC Spon |
| Justice 2022 | | | |
| | | | |
| Mailing Address | 600 Pennsylvania Ave SE #15180 | | |
| Mailing Address | | | |
| | Washington | ı DC ı | , 20003 |
| Relationship: | | | |
| neialionsnip. | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | Affiliated Committee X Joint J | oint Fundraising Represent | ative Leadership PAC S |
| | | | ative Leadership PAC S |
| esignated Agent: Identif | | | ative Leadership PAC S |
| esignated Agent: Identif | | | ative Leadership PAC S |
| esignated Agent: Identif | | | ative Leadership PAC S |
| esignated Agent: Identif | fy by name, address (phone number – optional) | | |
| esignated Agent: Identii Full Name Mailing Address | fy by name, address (phone number – optional) | | |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mane of Bank, | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc. | fy by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which | STATE A Telephone Number | ZIP CODE A |

FEC Form 1S (Revised 02/2017)

| or(h). Joint Fundraisi | • | | |
|--|--|-----------------------|------------------------------|
| 1. | | FEC ID number | C |
| 2. | | FEC ID number | C |
| 3. | | FEC ID number | С |
| 4 | | FEC ID number | C |
| Name of Any Connected Bennet Colorado | l Organization, Affiliated Committee, Joint Fundrais | sing Representative | e, or Leadership PAC Sponsor |
| | | | |
| | | | |
| Mailing Address | 499 S Capitol St SE #407 | | |
| | | | |
| | Washington | DC | 20003 |
| Relationship: | CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| riciationship. | CITT Z | | _ |
| Connecte | ed Organization Affiliated Committee | undraising Representa | ative Leadership PAC Spon |
| Designated Agent: Identification | | | Leadership PAC Spons |
| Connecte Designated Agent: Identif | ed Organization Affiliated Committee | | Leadership PAC Spons |
| Designated Agent: Identification | ed Organization Affiliated Committee | | Leadership PAC Spons |
| Designated Agent: Identification Full Name Mailing Address | Affiliated Committee Joint Formation Affiliated Committee Joint Formation (phone number – optional) | | Leadership PAC Spon- |
| Designated Agent: Identification | Affiliated Committee Joint Formation Affiliated Committee Type Joi | undraising Representa | |
| Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION | Affiliated Committee Joint Form Tole CITY Tele Tories: List all banks or other depositories in which the | state A | ZIP CODE A |
| Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many Name of Bank, | Affiliated Committee Joint Form Tole CITY Tele Tories: List all banks or other depositories in which the | state A | ZIP CODE A |
| Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many Name of Bank, Depository, etc. | Affiliated Committee Joint Form Tole CITY Tele Tories: List all banks or other depositories in which the | state A | ZIP CODE A |
| Designated Agent: Identification Full Name Mailing Address TITLE OR POSITION Banks or Other Deposite safety deposit boxes or many Name of Bank, Depository, etc. | Affiliated Committee Joint Form Tole CITY Tele Tories: List all banks or other depositories in which the | state A | ZIP CODE A |

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

| n). Joint Fundraising | · | | | | |
|---|---------------------|----------------------|---------------|--------------------------|----------------------------|
| 1. | | | | FEC ID number | С |
| 2. | | | | FEC ID number | C |
| 3 | | | | FEC ID number | С |
| 4. | | | | FEC ID number | С |
| | Organization, Affil | iated Committee, | Joint Fundrai | sing Representativ | ve, or Leadership PAC Spor |
| Blue Senate 2022 | | | | | |
| | | | | | |
| Mailing Address | 600 Pennsylvani | a Ave SE #15180 | | | |
| | | | | | |
| | Washington | | | DC DC | 20003 |
| Relationship: | | CITY A | | STATE A | ZIP CODE ▲ |
| Connected | Organization | Affiliated Committee | y Joint F | - undraising Represen | tative Leadership PAC S |
| | | ' | | Fundraising Represen | tative Leadership PAC S |
| | | ' | | Fundraising Represen | tative Leadership PAC S |
| esignated Agent: Identify | | ' | | Fundraising Represen | tative Leadership PAC S |
| esignated Agent: Identify Full Name | | ' | | Fundraising Represen | tative Leadership PAC S |
| esignated Agent: Identify Full Name | by name, address | ' | optional) | | tative Leadership PAC S |
| esignated Agent: Identify Full Name | by name, address | s (phone number – | optional) | | |
| esignated Agent: Identify Full Name Mailing Address | by name, address | s (phone number – | optional) | | |
| Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main | by name, address | c (phone number – | optional) | STATE A | |
| Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main | by name, address | c (phone number – | optional) | STATE A | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc. | by name, address | c (phone number – | optional) | STATE A | ZIP CODE A |

FEC Form 1S (Revised 02/2017)

| h). Joint Fundraisir | | | 1 === | C ID number | С |
|--|--------------------|----------------------|-----------------------|-----------------|----------------------------|
| 1. | | | | | |
| 2. | | | | C ID number | С |
| 3. | | | FE | C ID number | С |
| 4. | | | FE | C ID number | C |
| | | ated Committee, Joir | nt Fundraising | Representativ | ve, or Leadership PAC Spon |
| Bennet Neguse V | ictory Fund | | | | |
| | | | | | |
| Mailing Address | 499 S Capitol St S | SW #407 | | | |
| | | | | | |
| | Washington | | | DC DC | 20003 |
| Relationship: | | CITY A | | STATE A | ZIP CODE ▲ |
| | | | | | |
| Connecte | d Organization | Affiliated Committee | X Joint Fundra | aising Represen | tative Leadership PAC S |
| | | | | aising Represen | tative Leadership PAC S |
| | | | | aising Represen | tative Leadership PAC S |
| esignated Agent: Identif | | | | aising Represen | tative Leadership PAC S |
| esignated Agent: Identif | | | | aising Represen | tative Leadership PAC S |
| esignated Agent: Identif | y by name, address | (phone number – opt | ional) | | |
| esignated Agent: Identif | y by name, address | (phone number – opt | ional) | aising Represen | |
| esignated Agent: Identify Full Name Mailing Address | y by name, address | (phone number – opt | ional) | | |
| esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION | y by name, address | (phone number – opt | ional) | STATE A | |
| Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail | y by name, address | (phone number – opt | ional) | STATE A | ZIP CODE A |
| esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or mail | y by name, address | (phone number – opt | ional) | STATE A | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or material depositions are of Bank, | y by name, address | (phone number – opt | ional) | STATE A | ZIP CODE A |
| esignated Agent: Identify Full Name Mailing Address TITLE OR POSITION anks or Other Depositor defety deposit boxes or main ame of Bank, epository, etc | y by name, address | (phone number – opt | ional) | STATE A | ZIP CODE A |

FEC Form 1S (Revised 02/2017) for I

| h). Joint Fundraisi r | | | === | C ID number | C |
|---|------------------|-------------------------|--------------------|----------------|---------------------------|
| 1. | | | | | -1 - 1 - 1 - 1 - 1 |
| 2. | | | | D ID number | С |
| 3. | | | FEC | D ID number | C |
| 4. | | | FEC | D number | C |
| ame of Any Connected | Organization, Af | filiated Committee, Joi | nt Fundraising | Representativ | e, or Leadership PAC Spor |
| Bennet Crow Vict | ory Fund | | | | |
| | | | | | |
| Mailing Address | PO Box 3078 | | | | |
| | | | | | |
| | Denver | 1 1 1 1 1 1 1 | | CO | 80201 |
| Relationship: | | CITY ▲ | | STATE A | ZIP CODE ▲ |
| | | | | | |
| Connecte | d Organization | Affiliated Committee | Joint Fundra | sing Represent | tative Leadership PAC S |
| esignated Agent: Identif | | | | sing Represent | tative Leadership PAC S |
| Connecte esignated Agent: Identif | | | | sing Represent | Leadership PAC S |
| esignated Agent: Identif | | | | sing Represent | Leadership PAC S |
| esignated Agent: Identif | | | | sing Represent | Leadership PAC S |
| esignated Agent: Identif | y by name, addre | | tional) | sing Represent | Leadership PAC S |
| esignated Agent: Identif | y by name, addre | ss (phone number – op | tional) | STATE A | |
| esignated Agent: Identification Full Name Mailing Address | y by name, addre | ss (phone number – op | tional) | | |
| Full Name Mailing Address TITLE OR POSITION | y by name, addre | ss (phone number – op | tional) Telephone | STATE A | |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or ma | y by name, addre | ss (phone number – op | tional) Telephone | STATE A | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or ma | y by name, addre | ss (phone number – op | tional) Telephone | STATE A | ZIP CODE A |
| Full Name Mailing Address TITLE OR POSITION anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc. | y by name, addre | ss (phone number – op | tional) Telephone | STATE A | ZIP CODE A |

FEC Form 1S (Revised 02/2017)

| h). Joint Fundraisi | | FEC ID number | C |
|--|--|------------------------|---------------------------|
| 1. | | FEC ID number | C |
| 2. | | | |
| 3. | | FEC ID number | C |
| 4. | | FEC ID number | C |
| ame of Any Connected | d Organization, Affiliated Committee, Joint Fundr | aising Representative | e, or Leadership PAC Spon |
| Arizona Colorado | 2022 Victory Fund | | |
| | | | |
| Mailing Address | 3104 E Camelback Rd #924 | | |
| | | | |
| | Phoenix | AZ | 85016 |
| Relationship: | CITY A | STATE ▲ | ZIP CODE ▲ |
| Connecte | ed Organization Affiliated Committee | Fundraising Representa | ative Leadership PAC Sp |
| | ed Organization Affiliated Committee | Fundraising Representa | ative Leadership PAC Sp |
| | | Fundraising Representa | Leadership PAC S |
| esignated Agent: Identi | | Fundraising Representa | Leadership PAC Sp |
| esignated Agent: Identi | | Fundraising Representa | Leadership PAC S |
| esignated Agent: Identi | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi | fy by name, address (phone number – optional) | | |
| esignated Agent: Identi Full Name Mailing Address | fy by name, address (phone number – optional) CITY | | |
| esignated Agent: Identi Full Name | fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which | STATE A | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc | fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which | STATE A | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management and ma | fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which | STATE A | ZIP CODE A |
| esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc | fy by name, address (phone number – optional) CITY CITY Telepories: List all banks or other depositories in which | STATE A | ZIP CODE A |

FEC Form 1S (Revised 02/2017) for Lines 5(g) or (h

| Mailing Address | | | |
|-------------------------------------|--|---------------------------------|----------------------------------|
| lame of Bank, Depository, etc. | | | |
| afety deposit boxes or ma | ries: List all banks or other depositories aintains funds. | in which the committee depos | its runds, noids accounts, rents |
| Jamka au Othan Barra | wise. List all bender on although to the | in which the constitution to | ito fundo heldo servicio de |
| | | Telephone Number | |
| TITLE OR POSITION | ▼ CITY ▲ | STATE ▲ | ZIP CODE ▲ |
| | | | |
| | | | |
| Mailing Address | | | |
| Full Name | | | |
| Designated Agent: Identify | y by name, address (phone number - o | ptional) | |
| Connected | d Organization Affiliated Committee | Joint Fundraising Represen | tative Leadership PAC Spo |
| Relationship: | CITY ▲ | STATE A | ZIP CODE ▲ |
| | Washington | DC | 20006 |
| ivialility Address | | | |
| Mailing Address | 910 17th St NW Suite 925 | | |
| | | | |
| Name of Any Connected Majority 2022 | Organization, Affiliated Committee, Jo | oint Fundraising Representation | ve, or Leadership PAC Spons |
| 4. | | FEC ID Humber | U |
| 3. | | FEC ID number | C |
| ۷. | | FEC ID number | C |
| 2. | | | |