Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Coherus BioSciences Political Action Committee 33 Twin Dolphin Drive ADDRESS (number and street) Suite 600 (Check if address is changed) Redwood City 94065 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS bkenney@coherus.com (Check if address is changed) Optional Second E-Mail Address dsanders@coherus.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00789370 FEC IDENTIFICATION NUMBER > 3. 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. Stilwell, McDavid, , , Type or Print Name of Treasurer Stilwell, McDavid, , , [Electronically Filed] 09 2021 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	
	naidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	rty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	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.)	
Joir	nt Fund	raising 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

	_		
١,,	FEC Form 1 (Revised (Page 3
	/rite or Type Committee Name		
_	Jonerus BioSci	iences Political Action Committee	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
С	oherus BioSciences		
L			
	Mailing Address	333 Twin Dolphen Drive	
	Mailing Address	Suite 600	
		Redwood City CA 94065	
		CITY STATE Z	IP CODE
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in posse	ession of committee
	Sanders, I Full Name	David, , ,	
	Mailing Address	333 Twin Dolphin Drive	.
	J	Suite 600	
		Redwood City CA 94065	
	Title or Position	CITY STATE Z	IP CODE
	VP, Govt Affairs	1	
		Telephone number	
	Treasurer: List the name and	d address (phone number optional) of the treasurer of the committee; and the nam	e and address of
	any designated agent (e.g., a		o una address or
	Full Name Stilwell, Mo	cDavid, , ,	
	Mailing Address	333 Twin Dolphin Drive	1
	aiig / iddi 000	Suite 600	
		D. I. 10':	
			P CODE
	Title or Position		
		Telephone number $\begin{bmatrix} 202 \\ $	22 - 2375

FEC Form 1	(Revised 02/2009)	Page 4
Full Name of Designated Ke	enney, Ben, , ,	
Mailing Address	333 Twin Dolphin Drive	
	Suite 600	
	Redwood City CA 94065 CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit boxes Name of Bank, Depo		; accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc. Vells Fargo 330 N WASHINGTON ST	accounts, rents
safety deposit boxes Name of Bank, Depo	ository, etc. Vells Fargo 330 N WASHINGTON ST	; accounts, rents
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria VA 22314	zip code
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria CITY STATE	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria CITY STATE	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria CITY STATE	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria CITY STATE	
safety deposit boxes Name of Bank, Depo	Sor maintains funds. ository, etc. Vells Fargo 330 N WASHINGTON ST Alexandria CITY STATE	