08/22/2023 15 : 08

STATEMENT OF
ORGANIZATION

FEC FORM 1	STATEMENT ORGANIZAT	_		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)		Example:If typing, type over the lines.	12FE4M5	
Common Sense				
ADDRESS (number and street)	Law Offices of Michael R Shapiro			
(Check if address	11500 W Olymic Blvd Suite 400			
is changed)	Los Angeles CITY ▲		CA 90 STATE ▲	0064
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	npcommonsense@proton.me			
;	Optional Second E-Mail Address	S		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 04 / 24	D / Y Y Y Y 2023			
3. FEC IDENTIFICATION N	JMBER ► C C0083	8805		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined th	nis Statement and to the best of r	ny knowledge and belief it i	s true, correct an	d complete.
Type or Print Name of Treasure	r porter, nate, , ,			
Signature of Treasurer porte	r, nate, , ,		Date 08	/ D D / Y Y Y Y Y 22 2023
NOTE: Submission of false, erron	eous, or incomplete information may ANY CHANGE IN INFORMATION			e penalties of 52 U.S.C. §30109
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 03/2022)	Page 2
. TYPE OF COMMITTEE:	
Candidate 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. (Complete the information below.)	e candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee: (National, State or subordinate) committee of the (Democratic, Republican, Republica	
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
Corporation Corporation w/o Capital Stock Labor Or	rganization
Membership Organization Trade Association Cooperat	tive
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) X This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	C).

Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 (j) Committees/organizations, none of which is an authorized committee of a federal candidate.
 (j) Committees Participating in Joint Fundraiser
 (j) Committees Participating in Joint Fundraiser

1.	L													С
2.	ī													С

In addition, this committee is a Lobbyist/Registrant PAC.

EC Form 1	(Revised	02/2009)
-----------	----------	----------

Write or Type Committee Name

Common Sense

Name of Any	Con	nected	l Org	gani	izati	on,	Aff	ilia	ted	С	om	mit	tee	, J	oin	t F	un	dra	isir	ng I	Rej	ore	ser	ntat	ive	, o	r L	.ea	deı	rshi	ip I	PAC	s	por	iso	r	
NONE																																					
Mailing Addres	SS																																				
																											L						- [
											CIT	Y.											ST	λΤΕ						Z	ΊP	СС	DE				
Relationship:	C	Connec	ted C	Orga	nizat	tion		A	ffilia	atec	9 0	rga	niza	atio	n		J	oint	Fu	ndr	aisi	ng	Re	pre	sen	tati	ve			Le	ade	ersh	ip	PAC	s Sp	ons	301
- -	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE Mailing Address Image: I	NONE Mailing Address Image: I	NONE	NONE Mailing Address	NONE	NONE Mailing Address L L CITY	NONE Mailing Address	NONE Mailing Address L L L L CITY ▲ STATE ▲	NONE Mailing Address	NONE Mailing Address L L L L CITY ▲ STATE ▲ Z	NONE Mailing Address L L CITY ▲ STATE ▲ ZIP	NONE Mailing Address	NONE Mailing Address	NONE Mailing Address	NONE Mailing Address	Hereining Address Image: City ▲ State ▲ ZIP CODE ▲														

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Becker, Jef	irey, , ,
Full Name	
Mailing Address	Winningham Becker & Company
	21031 Ventura Blvd, Ste 1000
	Woodland Hills CA 91364
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Custodian of Records	Telephone number 818 - 598 - 6525

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	porter, nate, , ,
of Treasurer	
Mailing Address	Law Offices of Michael R Shapiro
	11500 W Olympic Blvd Suite 400
	Los Angeles
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Image: Telephone number 310 472 8900

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Porter, Nathan, , ,
Mailing Address	Law Offices of Michael R Shapiro
	11500 W Olympic Blvd Suite 400
	Los Angeles CA 90064
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
	Telephone number -

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.

	Comerica Bank		
Mailing Address	1442 N Main St		
	Walnut Creek	CA9459	96
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I	Depository, etc.		
Mailing Address			
	CITY 🔺	STATE 🔺	ZIP CODE ▲