PAGE 1 / 4 —

FEC FORM 1			TEMEN SANIZA			'
1. NAME OF		(Checl	k if name	Example: If typing, type		Office Use Only
COMMITTEE (ir	full)	is cha		over the lines.	12FE4M5	
Bennet for	Colora	do	1 1 1 1 1			
ADDRESS (number and street) (Check if address is changed)		PO Box 3078				
		Denver CITY A			CO 80 STATE ▲	2201
	AL ADDDE	• • • • • • • • • • • • • • • • • • • •			SIAIL	ZIF CODE
COMMITTEE'S E-MA		ss .brian@pcm	sllc com			
is changed	d)					
		Optional Seco	nd E-Mail Add	Iress		1
☐ ◀ (Check if a is changed		https://michaelt	bennet.com/			
2. DATE 1		2020				
3. FEC IDENTIFIC	CATION NU	MBER ▶	C co	00458398		
4. IS THIS STATEM	MENT	NEW (N)	OR	x AMENDED (A)		
I certify that I have e	examined th	s Statement an	d to the best	of my knowledge and belief	it is true, correct ar	nd complete.
Type or Print Name	of Treasurer	Fischer, Joyce	2, , ,			
Signature of Treasure	er <i>Fische</i>	r, Joyce, , ,		[Electronically Filed]	Date 12	17 2020
NOTE: Submission of				may subject the person signing DN SHOULD BE REPORTED		e penalties of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
	te Committee:	
(a) x	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. (Corinformation below.)	nplete the candidate
Name of Candidate	Bennet, Michael, , ,	
Candidate Party Affilia	tion DEM Office Sought: House X Senate President	State CO District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political	Action 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)	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 Fun	draising 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
Cor	mmittees Participating in Joint Fundraiser	
1.	Colorado Way FEC ID number C C00	0634006
2.	Common Sense 2020-II	0756544
3.	Common Sense 2020 FEC ID number C COO	0747469
4	Common Sense 2020-III	763029

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Write or Type Committee Na		90 -
Bennet for Co		
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
NONE		
Mailing Address		
Maining Madress		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
books and records.	Identify by name, address (phone number optional) and position of the person	in possession of committee
Foucar	rt, Brian, , ,	
	910 17th St NW	
Mailing Address	Ste 950	
	Washington DC 20	0006
Title or Position	CITY STATE	ZIP CODE
	Telephone number	- 628 - 1581
Treasurer: List the name any designated agent (e.g.)	e and address (phone number optional) of the treasurer of the committee; and t g., assistant treasurer).	he name and address of
Full Name Fischer of Treasurer	r, Joyce, , ,	
Mailing Address	PO Box 3078	
	Denver	
Title or Position Joyce Fischer	CITY STATE	ZIP CODE
	Telephone number	

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	II I (Reviseu UZ/ZUU9)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other safety deposit be Name of Bank, I	r Depositories: List all banks or other depositories in which the committee deposits funds, oxes or maintains funds. Depository, etc. Amalgamated Bank	noius accounts, rents
Mailing Address	1825 K Street	
Mailing Address	1825 K Street	
Mailing Address	Washington DC 200	006
Mailing Address		206 ZIP CODE
Mailing Address Name of Bank, I	Washington DC 200 CITY STATE	
	Washington DC 200 CITY STATE	ZIP CODE
	Washington DC 200 CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Washington DC 200 CITY STATE Depository, etc.	ZIP CODE
Name of Bank, I	Washington DC 200 CITY STATE Depository, etc.	ZIP CODE