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FEC FORM 1		STATEMEN ORGANIZ	_	Of	PAGE 1 / 5
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
People for	Ben				
ADDRESS (number a	nd street)	PO Box 25371			
(Check if a is changed		Albuquerque CITY▲		NM 871 STATE ▲	25
COMMITTEE'S E-MA		SS			
(Check if a is changed		brl@mbacg.com			
	,	Optional Second E-Mail Add rfleming@mbacg.cor	dress M		
COMMITTEE'S WEB	address	PRESS (URL)			
2. DATE 0.	4 / D 15	D / Y Y Y Y 2021			
3. FEC IDENTIFIC	CATION NU	MBER ► C co	00443689		
4. IS THIS STATEM		NEW (N) OR	X AMENDED (A)		
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name	of Treasurer	Denish, Diane, , ,			
Signature of Treasure	er Denish	n, Diane, , ,	[Electronically Filed]	Date 04	15 / Y Y Y Y Y 2021
NOTE: Submission of			may subject the person signing t ON SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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	FE	EC For	orm 1 (Revised 02/2009) P	age 2	
. 1	YPE	OF C	COMMITTEE		
(Cand	lidate	e 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.)	candidate	
	Name Candio		Lujan, Ben, Ray, ,		
	Candic Party /	date Affiliatio	ion DEM Office State President Distribution		V
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candic				
I	Party	v Com	nmittee:		
(d)		This committee is a (National, State or subordinate) committee of the (Democratical Republication)	atic, an, etc.) Par	ty.
F	Politi	cal A	Action Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected o	rganization is	s a:
			Corporation Corporation w/o Capital Stock	Organization	
			Membership Organization Trade Association Cooper	ative	
			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 par	ty
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
J	oint	Fund	draising Representative:		
(g	J)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mor committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	e political	
		Com	mittees Participating in Joint Fundraiser		
		1.	FEC ID number		
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

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Write or Type Committee Name

People for Ben

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Lujan Victory Fund				
Mailing Address	611 Pennsylvania Ave SE			
-	Num 143			
	Washington		DC	20003
	CITY		STATE	ZIP CODE
Relationship: Connected	Organization	X Joint Fundraising	Representative	e Leadership PAC Sponsor

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

Koob, Chr	istopher, , ,	
Full Name		
Mailing Address	611 Pennsylvania Ave SE	
	Num 143	
	Washington	DC 20003
Title or Position	CITY	STATE ZIP CODE
Assistant Treasurer	Telephone	number

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 of Treasurer	Denish, Diane, , ,					
Mailing Address	PO Box 25371					
	Albuquerque			NM	87125	
	Albuquerque	CITY		STATE		P CODE

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Full Name of Designated Agent	Koob, Christopher, , ,
Mailing Address	611 Pennsylvania Ave SE
	Num 143
	Washington DC 20003
	CITY STATE ZIP CODE
Title or Position	rer

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.

	Amalgamated Bank	
Mailing Address	1825 K St	
	Washington	DC 20006
	CITY	STATE ZIP CODE
Name of Bank, D	epository, etc.	
Mailing Address		
	CITY	STATE ZIP CODE

FFC	Form	1S	(Revised	02/2017)
			(11001000	02/2017/

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

5(g) or (h).	Joint	Fundraising	Participant:
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1	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Common Sense 2020-II

Mailing Address	910 17th St NW				
	Ste 925				
	Washington				D6
Relationship:		CITY A		STATE A	ZIP CODE
Connected C	Drganization Affilia	ted Committee	Joint Fundraising	Representative	Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name											
Mailing Address											
TITLE OR POSITION	7	CITY A	STATE A	ZIP CODE							
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.																															
Mailing Address	L																														
	L																														
	L																											. [
	CITY 🔺											STATE A								ZIP CODE											