Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Common Sense New Yorkers Inc. 82 Nassau Street, Suite 558 ADDRESS (number and street) (Check if address is changed) New York 10038 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS CommonSenseNYC2021@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00827923 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. Leb, Jeffrey, , , Type or Print Name of Treasurer Leb, Jeffrey, , , [Electronically Filed] 2022 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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 Form 1 (Revised 03/2022)	Page 2					
TYPE OF COMMITTEE:						
Candidate Committee:	didate Committee:					
(a) This committee is a principal campaign committee. (Cor	nplete the candidate information below.)					
(b) This committee is an authorized committee, and is NOT information below.)	a principal campaign committee. (Complete the candidate					
Name of Candidate						
Candidate Office Party Affiliation Sought: House	State President District					
(c) This committee supports/opposes only one candidate, a	nd is NOT an authorized committee.					
Name of Candidate						
Party Committee:						
(d) This committee is a (National, State or subordinate) co	(Democratic, Republican, etc.) Party					
Political Action Committee (PAC):						
(e) This committee is a separate segregated fund. (Identify	connected organization on line 6.) Its connected organization is a					
Corporation Corpora	tion w/o Capital Stock Labor Organization					
Membership Organization Trade A	ssociation Cooperative					
In addition, this committee is a Lobbyist/Regis	trant PAC.					
(f) This committee supports/opposes more than one Feder committee. (i.e., nonconnected committee)	al candidate, and is NOT a separate segregated fund or party					
In addition, this committee is a Lobbyist/Regis	trant PAC.					
In addition, this committee is a Leadership PA	.C. (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) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC	
In addition, this committee is a Lobbyist/Regis	trant PAC.					
Joint Fundraising Representative:						
(1)	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.					
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.						
Committees Participating in Joint Fundraiser						
1.	C					

ı	FEC Form 1 (Revised 02	2/2009)			Page 3	
٧	Vrite or Type Committee Name					
		e New Yorkers Ind				
6.	Name of Any Connected Or NONE	ganization, Affiliated Committee	e, Joint Fundraising Represen	tative, or Leaders	ship PAC Sponsor	
	Mailing Address					
		CITY ▲	STA	ATE A	ZIP CODE ▲	
	Relationship: Connected	Organization Affiliated Organization	ation Joint Fundraising Rep	presentative	Leadership PAC Sponso	
7.	Custodian of Records: Identification books and records.	fy by name, address (phone numbe	er optional) and position of the	person in possess	ion of committee	
	Leb, Jeffrey	, , ,				
	Full Name					
	Mailing Address	82 Nassau Street, Suite 558				
		New York	N	IY 10038		
		CITY ▲	STA	ATE A	ZIP CODE ▲	
	Title or Position ▼					
	Treasurer		Telephone number	646	760	
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 Leb, Jeffrey	, , ,				
	of Treasurer					
	Mailing Address	82 Nassau Street, Suite 558				
		New York		NY 10038		
		CITY ▲	STA	ATE A	ZIP CODE ▲	
	Title or Position ▼					
	Treasurer		Telephone number	646	760	

FEC	C Form 1 (Rev	rised 02/2009)		Page 4			
Full Nar Designa	me of	.552 62.2555					
Agent							
Mailing	Address						
Title or	Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲			
			Telephone number				
		sitories: List all banks or other depositories in w r maintains funds.	hich the committee deposits fu	nds, holds accounts, rents			
Name o	Name of Bank, Depository, etc.						
	Sig	nature Bank					
Mailing /	Address	565 Fifth Avenue					
		New York	NY NY	10017			
		CITY ▲	STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.							
Mailing A	Address						
		CITY ▲	STATE ▲	ZIP CODE ▲			