FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. The Arena PAC 700 13th Street, N.W. ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PLGroup@perkinscoie.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2017 C00634584 FEC IDENTIFICATION NUMBER > 3. X 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. Mylavarapu, Swati, , , Type or Print Name of Treasurer Mylavarapu, Swati, , , [Electronically Filed] 03 08 2017 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

_			D 0
		OMMITTEE	Page 2
		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. (Compinformation below.)	lete the candidate
Name Cand	e of lidate		
	lidate ⁄ Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Part	ty Com	nmittee:	Domoovatio
(d)		· · · ·	Democratic, Republican, etc.) Party
Poli	tical 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
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (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.)	
Join	t 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.		

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Write or Type Committee Na		<u> </u>
The Arena PA	.C	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representa	ative Leadership PAC Sponsor
. Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the p	erson in possession of committee
Mylavai Full Name	rapu, Swati, , ,	
Mailing Address	700 13th Street, N.W.	
Mailing Address	Suite 600	
	Washington	20005
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
B. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee, ., assistant treasurer).	; and the name and address of
Full Name Mylavar of Treasurer	apu, Swati, , ,	
Mailing Address	700 13th Street, N.W.	
	Suite 600	
	Washington	20005
Title or Position , Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
		5 docounts, Tents
safety deposit bo	oxes or maintains funds.	- Line -
safety deposit bo Name of Bank, [Depository, etc. Bank of America P.O. Box 15019	ZIP CODE
safety deposit bo Name of Bank, [Depository, etc. Bank of America P.O. Box 15019 Wilmington DE 19850 CITY STATE	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America	
Name of Bank, I	Depository, etc. Bank of America P.O. Box 15019 Wilmington DE 19850 CITY STATE	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America	
Name of Bank, I	Depository, etc. Bank of America	
Name of Bank, I	Depository, etc. Bank of America	

: 97 'A = G7 9 @ G5 B9 CI G'H9 LHF 9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: