**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. ONE APIA PAC 6675 S. Tenaya Way ADDRESS (number and street) Suite 200 (Check if address is changed) Las Vegas 89113 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS daniel@ha-firm.com (Check if address is changed) Optional Second E-Mail Address austin@ha-firm.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 31 2023 C00761072 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. Jeng, Eric, , , Type or Print Name of Treasurer Jeng, Eric,,, [Electronically Filed] 07 13 2023 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 <b>2</b>
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate info	ermation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign coinformation below.)	ommittee. (Complete the candidate
Name of Candidate    '', '', '', '', ', ', ', ', ', ', ', ',	
Candidate Party Affiliation Office Sought: House Senate	President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	d committee.
Name of Candidate	
Party Committee:	
(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 of	on line 6.) Its connected 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 committee. (i.e., nonconnected committee)	Γ a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on I	ine 6.)
(g) This committee is an independent expenditure-only political committee (Super PA	AC).
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution	on accounts (Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, at least one of which is an authorized committee of a	·
(j) This committee collects contributions, pays fundraising expenses and disburses committees/organizations, none of which is an authorized committee of a federal	•
Committees Participating in Joint Fundraiser	
1.	C
	C

I	FEC Form 1	(Revised 02/2009)	Page <b>3</b>
V	/rite or Type Comm	ittee Name	
	ONE API	IA PAC	
ŝ.	Name of Any Con	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship:	Connected Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Rec	cords: Identify by name, address (phone number optional) and position of the person in posses.	ession of committee
		Jeng, Eric, , ,	
	Full Name	16675 S. Tenaya Way	
	Mailing Address	10073 S. Tellaya Way	
		Suite 200	
		Las Vegas NV 8911	3
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	•	
	Executive Director	Telephone number 702 -	
3.		e name and address (phone number optional) of the treasurer of the committee; and the gent (e.g., assistant treasurer).	name and address of
	Full Name	Jeng, Eric, , ,	
	of Treasurer	2077 0 7	
	Mailing Address	6675 S. Tenaya Way	
		Suite 200	
		Las Vegas NV 8911	3
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
		Telephone number	286 9678

FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Arellano, Daniel, A., ,		
Mailing Address	1001 N Central Ave		
	Suite 404		
	Phoenix	AZ	85004
Title or Position	CITY ▲	STATE ▲	ZIP CODE ▲
Legal Counsel		number 5	20   -   409   -   4496
	<b>Depositories:</b> List all banks or other depositories in which the commes or maintains funds.	nittee deposits f	unds, holds accounts, rents
Name of Bank, D	epository, etc.		
	Bank of Nevada		
Mailing Address	2700 W Sahara Ave		
	Las Vegas	NV	89102
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

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h). <b>Joint Fundraising</b>	·		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected O	rganization, Affiliated Committee, Joint F	undraising Representativ	e, or Leadership PAC Spon
<u> </u>			
Mailing Address	<u> </u>		
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Connected C	Organization Affiliated Committee	Joint Fundraising Represent	tative Leadership PAC S
Connected Connec	Organization Affiliated Committee		Leadership PAC S
Connected Connec	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave		Leadership PAC S
Connected Connec	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404	i)	
Connected Connec	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave		Leadership PAC S
Connected Connec	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix	i)	
esignated Agent: Identify be Marshall, A Full Name Mailing Address	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix	I)	85004
Connected of Marshall, A Full Name Mailing Address  TITLE OR POSITION Legal Counsel  anks or Other Depositoricatety deposit boxes or main mame of Bank,	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix  CITY A  es: List all banks or other depositories in which is the committee of t	STATE A Telephone Number	85004 ZIP CODE <b>A</b> 928 - 446 - 44
Connected of Marshall, A Full Name Mailing Address  TITLE OR POSITION Legal Counsel Address  anks or Other Depositories aftery deposit boxes or main arme of Bank, epository, etc.	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix  CITY A  es: List all banks or other depositories in which is the committee of t	STATE A Telephone Number	85004 ZIP CODE <b>A</b> 928 - 446 - 44
Connected of Marshall, A Full Name Mailing Address  TITLE OR POSITION Legal Counsel  anks or Other Depositoricatety deposit boxes or main mame of Bank,	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix  CITY A  es: List all banks or other depositories in which is the committee of t	STATE A Telephone Number	85004 ZIP CODE <b>A</b> 928 - 446 - 44
esignated Agent: Identify the Marshall, A Full Name Mailing Address  TITLE OR POSITION Legal Counsel Mailing Address  anks or Other Depositories affety deposit boxes or main arme of Bank, epository, etc.	Organization Affiliated Committee  by name, address (phone number – optional ustin, T., ,  1001 N Central Ave  Suite 404  Phoenix  CITY A  es: List all banks or other depositories in which is the committee of t	STATE A Telephone Number	85004 ZIP CODE <b>A</b> 928 - 446 - 44