

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

The Arena Candidate PAC Victory Fund

ADDRESS (number and street)

611 Pennsylvania Ave SE

(Check if address is changed)

Ste 143

Washington

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

llee@mbacg.com

Optional Second E-Mail Address

smele@mbacg.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 31 / 2017

3. FEC IDENTIFICATION NUMBER ►

C C00659540

4. 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.

Type or Print Name of Treasurer Lee, Lauren, , ,

Signature of Treasurer

Lee, Lauren, , ,

[Electronically Filed]

Date

10 / 31 / 2017

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 Use Only				
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

5. TYPE OF COMMITTEE

**Candidate 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 candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  District

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized 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 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 a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  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.
- (h)  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. ANDY KIM FOR CONGRESS FEC ID number  C  C00648220
2. CHRISSEY HOULAHAN FOR CONGRESS FEC ID number  C  C00637371
3. MCCREADY FOR CONGRESS FEC ID number  C  C00641381
4. ELISSA SLOTKIN FOR CONGRESS FEC ID number  C  C00650150

Write or Type Committee Name

# The Arena Candidate PAC Victory Fund

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

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  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.

Full Name Lee, Lauren, , ,

Mailing Address 611 Pennsylvania Ave SE

Ste 143

Washington DC 20003

Title or Position CITY STATE ZIP CODE

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 Lee, Lauren, , ,

Mailing Address 611 Pennsylvania Ave SE

Ste 143

Washington DC 20003

Title or Position CITY STATE ZIP CODE

Telephone number

Full Name of Designated Agent | Mele, Steven, , ,

Mailing Address | 611 Pennsylvania Ave SE  
| Ste 143  
| Washington | DC | 20003 | - |  
CITY STATE ZIP CODE

Title or Position | Assistant Treasurer | 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.

| Amalgamated Bank

Mailing Address | 1825 K St NW  
|  
| Washington | DC | 20006 | - |  
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

|

Mailing Address |  
|  
| | | - |  
CITY STATE ZIP CODE

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

5(g) or (h).

Joint Fundraising Participant:

- 1. GINA ORTIZ JONES FOR CONGRESS
- 2. JESSICA MORSE FOR CONGRESS
- 3. HARDER FOR CONGRESS
- 4. KEN HARBAUGH FOR CONGRESS

FEC ID number	C00652297
FEC ID number	C00650408
FEC ID number	C00639146
FEC ID number	C00646752

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

Name of organization field

Mailing Address

Mailing address fields

Relationship:

CITY ▲

STATE ▲

ZIP CODE ▲

- Connected Organization
- Affiliated Committee
- Joint Fundraising Representative
- Leadership PAC Sponsor

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

Full Name

Full name field

Mailing Address

Mailing address fields

TITLE OR POSITION ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Title or position field

Telephone Number

Telephone number field

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.

Name of bank field

Mailing Address

Mailing address fields

CITY ▲

STATE ▲

ZIP CODE ▲

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

5(g) or (h). Joint Fundraising Participant:

- 1. LAUREN UNDERWOOD FOR CONGRESS
2.
3.
4.

FEC ID number C C00652719
FEC ID number C
FEC ID number C
FEC ID number C

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

Name of organization field

Mailing Address field

Relationship: CITY STATE ZIP CODE
Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Full Name
Mailing Address
TITLE OR POSITION CITY STATE 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
CITY STATE ZIP CODE