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) ARCTIC SLOPE REGIONAL CORPORATION POLITICAL ACTION COMMITTEE (ASRC PAC) 3900 C STREET SUITE 801 ADDRESS (number and street) (Check if address is changed) **ANCHORAGE** 99503 ΑK CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS mspeldrich@asrc.com (Check if address is changed) Optional Second E-Mail Address ktanner@asrc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00511899 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. TANNER, KAYLA, , , Type or Print Name of Treasurer TANNER, KAYLA, , , [Electronically Filed] 06 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.

0	Office		For further information contact:
lι	Use		Federal Election Commission
c	Only		Toll Free 800-424-9530 Local 202-694-1100
	•		Local 202-034-1100

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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 information below.)	. (Complete the candidate			
Name of Candidate ''', '', '', '', '', '', '', '', '', '				
Candidate Party Affiliation Office Sought: House Penate P	State President District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized commit				
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) x 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 sepa committee. (i.e., nonconnected committee)	rate segregated 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.)				
(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 account	unts (Hybrid PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
(i) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal	· · · · · · · · · · · · · · · · · · ·			
	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.   , , , , , , , , , , , , , , , , , ,				

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W	/rite or Type Comn	nittee Name	
	ARCTIC SL	OPE REGIONAL CORPORATION POLITICAL ACTION COMMITTEE (A	ASRC PAC)
6.	=	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
	ARCTIC SL	OPE REGIONAL CORPORATION	
	Mailing Address	3900 C STREET, SUITE 801	
		ANCHORAGE AK 99503	
		CITY ▲ STATE ▲ ZIF	CODE ▲
	Relationship:	Connected Organization	dership PAC Sponso
7.	Custodian of Rec	cords: Identify by name, address (phone number optional) and position of the person in possession ds.	of committee
		SPELDRICH, MONICA, , ,	
	Full Name		1
	Mailing Address	3900 C STREET, SUITE 801	
		ANCHORAGE   AK   99503	
	Title or Position		P CODE ▲
	ASSISTANT TRE	EASURER Telephone number 907 - 339	9   6887
3.		he name and address (phone number optional) of the treasurer of the committee; and the name agent (e.g., assistant treasurer).	and address of
	Full Name	TANNER, KAYLA, , ,	
	of Treasurer		
	Mailing Address	3900 C STREET, SUITE 801	
		ANCHORAGE AK 99503	
		CITY ▲ STATE ▲ ZII	P CODE ▲
	Title or Position		- <del>-</del>
	TREASURER		9 - 6853

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FEC Form 1  Full Name of Designated Agent  Mailing Address  Title or Position	SPELDRICH, MONICA, , , , 3900 C STREET, SUITE 801  ANCHORAGE  AK 99503				
ASSISTANT TRE	ASURER   Telephone number   907	339   -   6887			
	Depositories: List all banks or other depositories in which the committee deposits funds, ho ses or maintains funds.	lds accounts, rents			
Name of Bank, Depository, etc.					
Mailing Address	WELLS FARGO BANK, N.A.  301 W NORTHERN LIGHTS BLVD.  SUITE 212  ANCHORAGE  AK 99503				
	CITY ▲ STATE ▲	ZIP CODE ▲			
Name of Bank, Depository, etc.					
Mailing Address					
	CITY ▲ STATE ▲	ZIP CODE ▲			