RECEIVED

Committee Name:	2812 DEC 26 AN 10: 58
Defending Main Street Super	PAC Incenter
If registered, FEC ID:	FLOTING
(not yet registered)	
Today's Date:	
12-18-12	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

## To Whom It May Concern:

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.

Respectfully submitted,

Treasurer's Name:	
Sarah Chamberlain	. Treasurer

## 12030992618

FEC FORM

## STATEMENT OF ORGANIZATION

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2012 DEC 26 AM 10: 58

FORM 1		Ondai	<b>~</b>			FEC MAIL CENTI	ER
1. NAME OF COMMITTEE (ir	n full)	(Check if nai		ample:If typing, type or the lines.	12FE4M		
Defendin	g <sub>.</sub> Mai	n Street S	Superf	ΡΑζ, Ιης.			
	1 1 1 1						
ADDRESS (number a	nd street)	<del></del>	Street	NW <sub></sub>			لــــ
(Check if a	ddress	Suite 610	<b>)</b>	1 1 1 1 1 1 1			
is changed)	•	Washing	ton ,		DC	20004	
			CITY		STATE	ZIP CODE	
COMMITTEE'S E-MA	AL ADDRES			•			
(Check if	address	sarahjqa1@	)gmail,c	ρη			لــــا
is change							لب
COMMITTEE'S WEE	PAGE ADD	RESS (URL)					
(Check if	address		1 1 1 1				
is change							لـــ
2. DATE 12	2 ′ 18	2012					
3. FEC IDENTIFIC	CATION NU	MBER	С				
4. IS THIS STATE	MENT 🔀	NEW (N)	OR	AMENDED (A)			
I certify that I have o	examined this	s Statement and to th	ne best of my	knowledge and belief it	is true, corre	ct and complete.	
Type or Print Name	of Treasurer	Sarah	Cham	nerlas—			
Signature of Treasure	er	Sand O	h		Date 12	2 18 2012	2
NOTE: Submission of		• •	=	ibject the person signing to		to the penalties of 2 U.S.C. §-S.	437g.
Office Use Only				For further information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	

FEC For	m 1 (Revised 02/2009)	Page 2		
TYPE OF Co	OMMITTEE  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 on Sought: House Senate President	State District		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Com		(D		
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.		
Political A	ction Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:		
	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 procommittee. (i.e., nonconnected committee)			
٠	In addition, thie committee is a Lobbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint Fund	raising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political		
Comr	nittees Participating in Joint Fundraiser			
1.	FEC ID number C			
2.	FEC ID number C			
3.	FEC ID number C			
4.				

D	•
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FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ain Street SuperPAC, Inc.	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Spanear
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundralsing Representative, or Le	sadersnip PAC Sponsor
<b>N/A</b>		
Mailing Address		
	CITY STATE	ZIP CODE
		ZIF CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person	in possession of committee
Full Name  Sara	h Chamberlain	1
Mailing Address	430 Ferdinand Day Drive	
•		
	Alexandria 2	2304  -
Title or Position	CITY STATE	ZIP CODE
Secretary/Trea	asurer 202	- 661 <u>,</u>  - 4153
Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and tassistant treasurer).	the name and address of
Full Name Sara	ıh Chamberlain	
Mailing Address	430 Ferdinand Day Drive	
	Alexandria VA 2	2304   -
Title or Position Secretary/Treasu	rer Telephone number	_[661, ]-[4153, ]

i	FEC For	1 (Revised 02/2009) ,		Page 4	
	Full Name of Designated Agent	ıKirk Walder			
	Mailing Address	325 7th Street NW			
		Suite 610			
		Washington	DC	20004  - [	
	<b></b>	CITY	STATE	ZIP CODE	
	Title or Position Director	Telephone num	nber [30]	12105915	
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.				
		Sun Trust Bank			
	Mailing Address	624 H Street NW			
		624 H Street NW			
		Washington, , , , , , , ,	DC	[20001]	
		СІТУ	STATE	ZIP CODE	
	Name of Bank,	Depository, etc.			
		<b>NA</b>			
	Mailing Address				
		СІТУ	STATE	ZIP CODE	

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):