PAGE 1 / 13

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man	All Authorized			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing, type or the lines.	12FE4M	5
Defending Main Street	SuperPAC Inc	C.			
ADDRESS (number and street)	410 First Street SE	=			
▼ Observe if alifferent	Suite 200				
Check if different than previously reported. (ACC)	Washington			DC	20003
2. FEC IDENTIFICATION NU	JMBER ▼	CITY A		STATE ▲	ZIP CODE ▲
C C00540203		3. IS THIS REPORT	NEW (N) O		MENDED)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (I		20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	340 0	Mar 20 (M3)			20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (C	21)	Apr 20 (M4)			20 (M10) Jan 31 (YE)
July 15 Quarterly Report (C	(c) 12-Day PRE-Ele		Primary (12P)	General	
October 15 Quarterly Report (C	Report	for the:	Convention (12C)	Special (
January 31 Year-End Report (Y	Œ)	Election on	M M / D D	/	in the State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-E		General (30G)	Runoff (3	Special (30S)
Termination Report (TER)		Election on	M = M / D = D	/ Y = Y = Y = Y	in the State of
5. Covering Period 08		2022	through 08	31	2022
I certify that I have examined th	is Report and to the Chamberlain, San		wledge and belief it is	s true, correct and	d complete.
Type or Print Name of Treasure		ω.,,,			
Signature of Treasurer Chan	nberlain, Sarah, , ,		[Electronically Filed]	Date 09	07 / 2022
NOTE: Submission of false, erron	eous, or incomplete i	nformation may su	ubject the person signir	ng this Report to the	ne penalties of 52 U.S.C. § 3010
Office Use					FEC FORM 3X Rev. 05/2016

SUMMARY PAGE

OF FEC Form 3X (Rev. 05/2016)	RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
Defending Main Street SuperPAC Inc	C.	
Report Covering the Period: From: 08	/ 01 / 2022 T	To: 08 / 31 / 2022
_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2022		929397.60
(b) Cash on Hand at Beginning of Reporting Period	152795.94	
(c) Total Receipts (from Line 19)	580142.42	3871854.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	732938.36	4801252.46
7. Total Disbursements (from Line 31)	615187.45	4683501.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	117750.91	117750.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multicand	lidate committee. (see FEC FORM 1M)	
Fo	r further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Defending Main Street SuperPAC Inc.

80 01 2022 08 31 2022 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 555131.26 2816336.34 (i) Itemized (use Schedule A)..... 0.00 125.00 (ii) Unitemized (iii) TOTAL (add 2816461.34 555131.26 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 25000.00 1055000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 3871461.34 580131.26 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 393.52 (Dividends, Interest, etc.)..... 11.16 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 (from Schedule H3)..... 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 3871854.86 580142.42 20. Total Federal Receipts 580142.42 3871854.86 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal				
Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(i) Tederal Share		1 1 1 1 1 1 1 1		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	16836.99	111107.74		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	16836.99	111107.74		
Transfers to Affiliated/Other Party	4			
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures (use Schedule E)	598350.46	4572303 81		
Coordinated Party Expenditures (52 U.S.C. § 30116(d))		4572393.81		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	3.00	4 4		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 30101(20	0))			
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(,, , , , , , , , , , , , , , , , , , ,	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	4 4			
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	615187.45	4683501.55		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	615187.45	4000504.55		
,	010107.40	4683501.55		

DETAILED SUMMARY PAGE

of Disbursements

	,		Page 5
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) (from Line 11(d), page 3)	580131.26	3871461.34
34.	(from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	580131.26	3871461.34
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	16836.99	111107.74
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	16836.99	111107.74

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

FOR LINE NUMBER:					PAGE	6	OF	13	
(check only one)									
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Defending Main Street SuperPAC Inc. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Main Street Advocacy Fund Date of Receipt Mailing Address 410 First Street, SE Suite 200 2022 City Zip Code State Transaction ID: SA11AI.6272 DC Washington 20003 Amount of Each Receipt this Period FEC ID number of contributing C 500000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General 1500000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. The Strategy Group for Media Date of Receipt Mailing Address 7669 Stagers Loop 10 2022 City State Zip Code Transaction ID: SA11AI.6266 OH Delaware 43015 Amount of Each Receipt this Period FEC ID number of contributing 55131.26 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 55131.26 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 555131.26 SUBTOTAL of Receipts This Page (optional)..... 555131.26

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SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 13 (check only one) 11a 11b				
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) Defending Main Street Super	PAC Inc.						
Full Name of Individual (Last, First, Middle A. Engineers Political Education Comm			Date of Receipt				
Mailing Address 1125 Seventeenth Street,	NW		08 26 2022				
City Washington	State DC	Zip Code 20036	Transaction ID : SA11C.6269 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C co	0029504	25000.00				
Name of Employer (for Individual)	Occ	supation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Primary General Aggregate real-to-bate V						
Full Name of Individual (Last, First, Middle B.	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address			M M / D D / Y Y Y Y				
City	State	Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼					
Full Name of Individual (Last, First, Middle C.	e Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address			M = M / D = D / Y = Y = Y				
City	State	Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		25000.00				

TOTAL This Period (last page this line number only).....

25000.00

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF 13							
,		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 13 (check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a11b11c12							
			13 14 15 16 X 17							
Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Defending Main Street SuperPA	\C Inc									
Defending Main Street Superi F	NO IIIC.									
Full Name of Individual (Last, First, Middle Init	tial) or Full C	Organization Name	Date of Receipt							
Mailing Address 2275 Research Blvd.			M = M / D = D / Y = Y = Y							
Suite 600 City	State	Zip Code	08 31 2022 Transaction ID : SA17.6270							
Rockville	MD	20850	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		9.62							
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	199/194/1		1							
Other (specify) ▼		388.81								
Full Name of Individual (Last, First, Middle Init	tial) or Full C	Organization Name								
3.			Date of Receipt							
Mailing Address			M = M / D = D / Y = Y = Y							
City	State	Zip Code								
			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C									
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		A A A								
		<u> </u>	1							
Full Name of Individual (Last, First, Middle Init	tial) or Full C	Organization Name	Date of Receipt							
Mailing Address			M = M / D = D / Y = Y = Y							
City	State	Zip Code	Amount of Each Receipt this Period							
FEC ID number of contributing			7 anount of Lacif receipt this i chou							
federal political committee.	C									
Name of Employer (for Individual)	Name of Employer (for Individual) Occupation (for Individual)									
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General			1							
Other (specify)		7 7 7	1							
SUBTOTAL of Receipts This Page (ontional)			9.62							

TOTAL This Period (last page this line number only).....

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9.62

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	CHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)	FOR LINE NUMBER: PAGE 9 OF (check only one)					
	ITEMIZED DISBURSEMENTS for ea		or each category of the etailed Summary Page		22 23 26 27 28b 28c 29 30b				
	y information copied from such Reports and Stater for commercial purposes, other than using the name								
\setminus	NAME OF COMMITTEE (In Full) Defending Main Street SuperPAC	Inc.							
Α.	Full Name (Last, First, Middle Initial) Blank Rome LLP				Date of Disbursement				
	Mailing Address 1825 Eye Street NW				08 09 / Y Y Y Y Y Y				
	Washington	State DC	Zip Code 20006		FEC Identification Number				
	Purpose of Disbursement Legal Services Candidate Name				Transaction ID : SB21B.6261				
	Office Sought: House Disburser	nent For:		Category/ Type	Amount of Each Disbursement this Period 510.00				
	Senate President		Memo Item						
— В.	State: District: Full Name (Last, First, Middle Initial) Chase Card Services				Date of Disbursement				
	Mailing Address PO Box 15123		08 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	Wilmington	State Zip Code DE 19850-5123			FEC Identification Number				
	Purpose of Disbursement See Memo Entry Candidate Name	[Category/	Transaction ID : SB21B.6262 Amount of Each Disbursement this Period					
	Office Sought: House Disburser Senate	nent For:	General	Туре	15054.90				
	President State: District:	Other (spec			Memo Item				
C.	Full Name (Last, First, Middle Initial) The Ritz Carlton - Amelia Island				Date of Disbursement				
	Mailing Address 4750 Ameila Island Parkway				08 02 7 2022				
	City Amelia Island Purpose of Disbursement	State FL	Zip Code 32034		FEC Identification Number				
	Facilities/Catering Candidate Name			Category/ Type	Transaction ID: SB21B.6262. Amount of Each Disbursement this Period				
	Office Sought: House Disburser Senate President	nent For: Primary Other (spec	General		15054.90				
	State: District:	(-1- 7-	-, .		X Memo Item				
H	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)				15564.90				

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Temized Disbursement Disburseme	SCHEDULE B (FEC Form 3X)			I OIT LINE NOMBEIT.					GE 10 OF	= 13
Detailed Summary Page 28 28 28 28 28 28 28 2	ITEMIZED DISBURSEMENTS									
Any information copied from such Reports and Statements may not be sold or used by any perion for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Defending Main Street SuperPAC Inc. Full Name (Last, First, Middle Initial) A. TD Bank VIsa Mailing Address PO Box 23072 City Columbus Purpose of Disbursement See Mema Entry Candidate Name Category/ Type District Full Name (Last, First, Middle Initial) B. The Ritz Cariton - Amelia Island Mailing Address 4750 Amelia Island Purpose of Disbursement Full Name (Last, First, Middle Initial) B. The Ritz Cariton - Amelia Island Purpose of Disbursement Full Name (Last, First, Middle Initial) City Clay Clay Clay Clay Clay Clay Clay Cla	Detailed Summary Page				L					
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Defending Main Street SuperPAC Inc. Full Name (Last, First, Middle Initial) A. TD Bank VIsa Mailing Address PO Box 23072 City Columbus Other (specify) Office Sought: Full Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address City State Disbursement For: Sendance Primary Candidate Name Category/ Type Office Sought: Full Name (Last, First, Middle Initial) C. Mailing Address City State Disbursement For: Sendance Disbursement Full Name (Last, First, Middle Initial) C. Mailing Address City State Disbursement Disbursement For: Category/ Type C	Any information popular from such Departs and Chate		mat ha aald ay yaa							
Defending Main Street SuperPAC Inc. Full Name (Last, First, Middle Initial) A. TD Bank VIsa Mailing Address PO Box 23072 City Seater President Primary General Purpose of Disbursement Ins Period Mailing Address 4750 Amelia Island Parkway Category Office Sought: House President Primary General Purpose of Disbursement President Pr										
Full Name (Last, First, Middle Initial) A. TD Bank VIsa Mailing Address PO Box 23072 City Columbus Office Sought: House President Primary General Purpose of Disbursement Island Mailing Address 4750 Ameila Island Parkway City Ameila Island Purpose of Disbursement Foci Senate Purpose of Disbursement Foci Senate Purpose of Disbursement Island Mailing Address 4750 Ameila Island Parkway City Ameila Island Purpose of Disbursement Foci Senate Purpose of Disbursement State: District: Full Name (Last, First, Middle Initial) Mailing Address (Tast) Full Name (Last, First, Middle Initial) Full Name (Last,	NAME OF COMMITTEE (In Full)									
A. TD Bank VIsa Mailing Address PO Box 23072 City	Defending Main Street SuperPAC	Inc.								
Mailing Address PO Box 23072 City	,									
City Columbus Columbus Columbus Columbus Columbus Condidate Name Condidate Name Office Sought: House Disbursement For: Senate President Disbursement For: Senate President Disbursement	A. TD Bank VIsa				Da	ite of I			- Y - Y - Y	7
Columbus Purpose of Disbursement See Memo Entry Candidate Name Category/ Type Office Sought: House President Presi	Mailing Address PO Box 23072					08	0	1	2022	
Purpose of Disbursement See Memo Entry Candidate Name Condidate Name Disbursement For: Senate Primary Other (specify) Full Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address 4750 Amelia Island Parkway City Amelia Island Purpose of Disbursement Facilities Catering Candidate Name Disbursement Frimary Other (specify) Full Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address 4750 Amelia Island Parkway City Condidate Name Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement Facilities Catering Candidate Name Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement First, Middle Initial) C. Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement First, Middle Initial) C. Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement First, Middle Initial) C. Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement First, Middle Initial) C. Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement this Period FEC Identification Number Category/ Type Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amount of Each Disbursement this Period Transaction D : S8218-6264 Amo	,				FE	C Ider	ntification	Number		
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Candidate Name Office Sought: House Senate Prisident State: District: House Disbursement For: Senate President State: District: House Disbursement For: Senate President State: District: District				г.		_				
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Memo Item	Candidate Name			Catagon	υ Δn			_		ariod
State: District: Full Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address 4750 Ameila Island Parkway City Amelia Island Fell Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address 4750 Ameila Island Parkway City Amelia Island Fell Name (Last, First, Middle Initial) Candidate Name City Category' Type Office Sought: House Disbursement For: Senate President Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Category' Type Office Sought: House Disbursement For: Sanate President Candidate Name Category' Office Sought: House Disbursement For: Sanate President Candidate Name Category' Office Sought: House Disbursement For: Sanate President Candidate Name Category' Office Sought: House Disbursement For: Sanate President Candidate Name Category' Office Sought: House Disbursement For: Sanate President State: District: Subtotal of Disbursement This Page (optional) Memo Item					" "	iount (JI Lacii	Disburser	nont this i c	, nou
President Other (specify)	Office Sought: House Disburse	ment For:					95	1 45	1272.09	
State: District: Full Name (Last, First, Middle Initial) B. The Ritz Carlton - Amelia Island Mailing Address 4750 Amelia Island Parkway City Amelia Island Purpose of Disbursement Facilities/Catering Candidate Name Office Sought: House President Primary General Purpose of Disbursement This Page (optional)		•					,	,		
B. The Ritz Carlton - Amelia Island Mailing Address 4750 Amelia Island Parkway City Amelia Island Purpose of Disbursement Facilities/Catering Candidate Name Office Sought: District: Full Name (Last, First, Middle Initial) Candidate Name City Amelia Island President Facilities/Catering Category/Type Disbursement For: Senate Primary Other (specify) State City State City State City State Disbursement State: District: Full Name (Last, First, Middle Initial) Category/Type Office Sought: House Primary Other (specify) State City State Disbursement Category/Type Office Sought: House Purpose of Disbursement Candidate Name Category/Type Office Sought: House President Category/Type Office Sought: Disbursement Mailing Address City State Disbursement Category/Type Office Sought: Primary General Other (specify) Memo Item Subtrotal of Disbursement this Period Memo Item Subtrotal of Disbursement This Page (optional)		Other (spe	ecify) $lacktriangleright$			Mem	o Item			
B. The Ritz Carlton - Amelia Island Mailing Address 4750 Amelia Island Parkway City										
Mailing Address 4750 Ameila Island Parkway City State Zip Code FL 32034 Purpose of Disbursement Facilities/Catering Candidate Name Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Category/ Type Memo Item FEC Identification Number Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement For: Category/ Type Office Sought: House Senate Primary General President City State Zip Code FEC Identification Number Category/ Type Memo Item Senate Primary General Other (specify) Memo Item Subtroctal Amount of Each Disbursement this Period Memo Item Subtroctal Disbursement Type Memo Item					Da	ite of I	Disburse	ment		
Mailing Address 4750 Ameila Island Parkway City	The Miz Canton - Amena Island				N	M M / D D / Y Y Y Y				
Amelia Island Purpose of Disbursement Facilities/Catering Candidate Name Candidate Name Office Sought: House Senate Primary General City State Zip Code Purpose of Disbursement Candidate Name Category/ Type District: Full Name (Last, First, Middle Initial) Candidate Name Candidate Name Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Memo Item Subtrotal of Disbursement this Period Memo Item Subtrotal of Disbursement this Period Subtrotal of Disbursements This Page (optional)	Mailing Address 4750 Ameila Island Parkway					08 01 2022				_
Amelia Island Purpose of Disbursement Facilities/Catering Candidate Name Caltegory/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Tell Name (Last, First, Middle Initial) C. State Zip Code FEC Identification Number Category/ Type Office Sought: House Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Subtotal of Disbursements This Page (optional)	,				FE	Transaction ID : SB21B.6264.0 Amount of Each Disbursement this Period				
Transaction ID: SB21B.6264.C Amount of Each Disbursement this Period Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Senate Primary General Other (specify) ▼ Substrate: District: Memo Item Substrate: District: Memo Item 1272.09		FL	32034							
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Office Sought: House Disbursement For: Senate Primary General State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Memo Item Substortal of Disbursement This Page (optional)	Candidate Name			Cotogon	./ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					oriod
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City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Substortal of Disbursements This Page (optional)	C.				Da	ite of I	Disburse	ment		
City Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary President State: District: Substract Substract Substract State					N	M	/ D	D / Y	YYY	7
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substate: District: Memo Item 1272.09	Mailing Address						_	_		_
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substruct Substruct Memo Item	City	State	Zip Code		FE	C Ider	ntification	n Number		
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substruct: Memo Item 1272.09	Purpose of Disbursement									
Office Sought: House Disbursement For: Senate Primary General President State: District: SUBTOTAL of Disbursements This Page (optional)	·			l						
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State: District: Memo Item SUBTOTAL of Disbursements This Page (optional)	Senate	Primary	General				-		4	
State: District: SUBTOTAL of Disbursements This Page (optional)		Other (spe	ecify) 🔻			Mem	o Item			
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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	TEMIZED INDEPENDENT EXPENDITURES				PAGE 11 OF 13 FOR LINE 24 OF FORM 3X
Defending Main Street SuperPAC Inc. C C00540203	NAME OF COMMITTEE (In Full)				
Check if24-hour report48-hour report810	Defending Main Street SuperPAC Inc				
Check if					C 000340203
Big Dog Strategies, LLC Meiling Address 23150 Fashion Dr Suite 231 City State Zip Code FL 33828 Transaction ID : SE.6248 Purpose of Expanditure Direct Mail Name of Federal Candidate: Support Office Sought Sought S13850.46 Calendar Year-To-Date Purpose of Expanditure On Message Inc Mailing Address 705 Me/nn Avenue #105 Amount Amount State NH Date of Public Distriction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disbursement or Oxiligation Transaction ID : SE.6243 Date of Disburseme	Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Mailing Address 23150 Fashion Dr Suite 231 City State FL 33928 Purpose of Expenditure Driect Meli State	Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Amount Suite 231 City Estero FL Size Estero FL Size FL Size Code Transaction ID: SE.6248 Transaction ID: SE.6					
Estero State Zip Code 33928 Transaction ID : SE.6248 Date of Disbursement or Obligation	Mailing Address 23150 Fashion Dr			Ar	mount
Estero FL 33928 Transaction ID: SE.6248 Date of Disbursement of Obligation Purpose of Expenditure Direct Mail Name of Federal Candidate: Leavitt, Karoline, ,		1 0	1 0 .	— г	
Purpose of Expenditure Direct Mail Name of Federal Candidate: Leavitt, Karoline,					
Name of Federal Candidate: Leavitt, Karoline, ,		FL.	33928		
Leavitt, Karoline,					
Leavitt, Karoline, ,	Name of Federal Candidate:		Support	Office So	pught: X House District: 01
Per Election for Office Sought Full Name of Payee OnMessage Inc Mailing Address 705 Melvin Avenue #105 City Annapolis Purpose of Expenditure TV Ad/Production Name of Federal Candidate: Leavitt, Karoline, , ,	Leavitt, Karoline, , ,				- NIII
Full Name of Payee OnMessage Inc Mailing Address 705 Melvin Avenue #105 City Annapolis Purpose of Expenditure TV Ad/Production Name of Federal Candidate: Leavitt, Karoline, Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Sought Shape of Expenditures (c) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Memo Item Date of Public Distribution/Dissemination Mog			513350.46	1	7
OnMessage Inc Mailing Address 705 Melvin Avenue #105 Amount City Annapolis Purpose of Expenditure TV Ad/Production Name of Federal Candidate: Leavitt, Karoline, ,	5 H.M. (15	, , , , , , , , , , , , , , , , , , , ,		. D	
Mailing Address 705 Melvin Avenue #105 Amount			∐ Memo	Item Da	
Amount City					
City Annapolis Purpose of Expenditure TV Ad/Production Category/ Type Category/ Type Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Category/ Type Calendar Year-To-Date Per Election for Office Sought Chamberlain for Category/ Type	Mailing Address 705 Melvin Avenue #105			Δ,	mount
Annapolis MD 21401 Transaction ID: SE.6243 Date of Disbursement or Obligation MB Category/ Type Name of Federal Candidate: Leavitt, Karoline, , ,					
Purpose of Expenditure TV Ad/Production Category/ Type Date of Disbursement or Obligation Market of Federal Candidate: Leavitt, Karoline, , ,		State	Zip Code		
Purpose of Expenditure TV Ad/Production Category/ Type Support Office Sought: House District: 01 Leavitt, Karoline, ,	· ·	MD	21401	I	
Name of Federal Candidate: Leavitt, Karoline, , ,					M M / D D / Y Y Y Y
Leavitt, Karoline, , ,			Type		
Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures				Office So	Jugitt. I louse District.
Per Election for Office Sought 448537.00 Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures	Leavitt, Karoline, , ,		x Oppose	Pro	esident Senate State: NH
(a) SUBTOTAL of Itemized Independent Expenditures			449527.00		ment For: 🗶 Primary General
(c) TOTAL Independent Expenditures	Per Election for Office Sought	7 7	440337.00	2022	Other (specify) ▶
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. **Chamberlain, Sarah, , , ** [Electronically Filed]** Date **09** **Operation, consultation, or concert with reporting entity is not a political party committee) and political party committee or its agent.					513350.46
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. **Chamberlain, Sarah, , , ** [Electronically Filed]** Date **09** **Operation, consultation, or concert with reporting entity is not a political party committee) and political party committee or its agent.	,			, _	
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. **Chamberlain, Sarah, , ,	(c) TOTAL Independent Expenditures			•	
[Electronically Filed] Date 09 07 2022	with, or at the request or suggestion of, any candida	ate or authorized			
Date 09 07 2022	Chamberlain, Sarah,	[Elastrania -II-: F"	lad1	M = M	
		пыесігонісану Ен	Date Date	e 09	07 2022

Signature

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	į			PAGE 12 OF 13
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Defending Main Street SuperPAC Inc	·.			FEC IDENTIFICATION NUMBER ▼ C C00540203
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on	"M / D D / Y Y Y Y
Full Name of Payee Strategic Media Placement		☐ Memo I		of Public Distribution/Dissemination
Mailing Address 7669 Stagers Loop			Amou	08 04 2022 nt
City	State	Zip Code		10000.00
Delaware	ОН	43015		saction ID : SE.6207 of Disbursement or Obligation
Purpose of Expenditure Digital Ads		Category/ Type		08 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate: Finstad, Brad, , ,		Support Oppose	Office Sough	MNI
Calendar Year-To-Date Per Election for Office Sought			Disbursement 2022	en Sende State.
Full Name of Payee Strategic Media Placement Mailing Address 7669 Stagers Loop		☐ Memo I	Item Date of Amount	of Public Distribution/Dissemination 08 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	— ┌·	14791.53
Delaware	OH	43015		saction ID : SE.6234 of Disbursement or Obligation
Purpose of Expenditure Direct Mail		Category/ Type		08 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	
Garbarino, Andrew, , ,		Oppose	Preside	ent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		14791.53	Disbursement 2022 O	nt For: x Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditu				24791.53
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Chamberlain, Sarah, , ,	[Electronically Fil	led] Date	M = M /	07 / 2022

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 13
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Defending Main Street SuperPAC Inc				FEC IDENTIFICATION NUMBER ▼
3				C C00540203
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
Strategic Media Placement				08 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7669 Stagers Loop			Amo	ount
City	State	Zip Code		60208.47
Delaware	ОН	43015		nsaction ID : SE.6238 e of Disbursement or Obligation
Purpose of Expenditure TV Ad / Production		Category/ Type		08 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: K House District: 02
Garbarino, Andrew, , ,		Oppose		ident Senate State: NY
Calendar Year-To-Date			Disbursem	
Per Election for Office Sought	77	75000.00	2022	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
				M M / D D / Y TY TY
Mailing Address			Δ	
			Amo	ount
City	State	Zip Code		
			Date	e of Disbursement or Obligation
Purpose of Expenditure		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:
		Oppose	Pres	ident Senate State:
Calendar Year-To-Date			Disbursem	ent For: Primary General
Per Election for Office Sought	7 7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• •	60208.47
(b) SUBTOTAL of Unitemized Independent Expenditu	res		>	
(c) TOTAL Independent Expenditures			•	598350.46
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Chamberlain, Sarah, , ,	Electronically Fil	ed1 -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	9 09	07 2022