

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

DEFEND OUR HOMES

ADDRESS (number and street) 888 16TH STREET NW STE 650

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00525204

3. IS THIS REPORT NEW (N) OR AMENDED (A) AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [07] / [01] / [2012] through [09] / [30] / [2012]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Steve Rosenthal

Signature of Treasurer Steve Rosenthal [Electronically Filed] Date 03 / 13 / 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

DEFEND OUR HOMES

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15000.00"/>	<input type="text" value="15000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="15000.00"/>	<input type="text" value="15000.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8582.00"/>	<input type="text" value="8582.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6418.00"/>	<input type="text" value="6418.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="43532.42"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For 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

Write or Type Committee Name

DEFEND OUR HOMES

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	15000.00	15000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(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))..... ▶	15000.00	15000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15000.00	15000.00

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	8582.00	8582.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8582.00	8582.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8582.00	8582.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8582.00	8582.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	15000.00	15000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15000.00	15000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8582.00	8582.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8582.00	8582.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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

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)
DEFEND OUR HOMES

A. AFSCME
 Full Name (Last, First, Middle Initial)
 Mailing Address 1625 L Street, NW
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2012
Transaction ID : SA11C.4156
 Amount of Each Receipt this Period
 10000.00
 Contribution

B. MoveOn.org
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 9218
 City Berkeley State CA Zip Code 94709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 07 / 2012
Transaction ID : SA11C.4154
 Amount of Each Receipt this Period
 5000.00
 Contribution

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	15000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
DEFEND OUR HOMES

Full Name (Last, First, Middle Initial)

A. Switchboard Communications LLC

Mailing Address 888 16th Street, NW
Suite 650

City Washington State DC Zip Code 20006

Purpose of Disbursement Telephone Survey Calls

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4134

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEFEND OUR HOMES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gary Gruver	Nature of Debt (Purpose): Filing fee reimbursement
Mailing Address 1314 R Street, NW	
City State Zip Code Washington DC 20009	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4146	
Amount Incurred This Period 180.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 180.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gary Gruver	Nature of Debt (Purpose): Management services
Mailing Address 1314 R Street, NW	
City State Zip Code Washington DC 20009	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4148	
Amount Incurred This Period 640.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 640.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/14/2012 opposing Coffman/CO6
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4140	
Amount Incurred This Period 5395.11	Payment This Period 0.00	Outstanding Balance at Close of This Period 5395.11

1) SUBTOTALS This Period This Page (optional)..... ▶	6215.11
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEFEND OUR HOMES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/14/2012 opposing Biggert/IL11
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4141	
Amount Incurred This Period 5388.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 5388.49

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/14/2012 opposing Fitzpatrick/PA08
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4142	
Amount Incurred This Period 5413.66	Payment This Period 0.00	Outstanding Balance at Close of This Period 5413.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/20/2012 opposing Coffman/CO06
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4143	
Amount Incurred This Period 5395.11	Payment This Period 0.00	Outstanding Balance at Close of This Period 5395.11

1) SUBTOTALS This Period This Page (optional)..... ▶	16197.26
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEFEND OUR HOMES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/20/2012 opposing Biggert/IL11
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4144	
Amount Incurred This Period 5388.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 5388.49

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mack Crouse Group	Nature of Debt (Purpose): Independent Expenditure Mail - 08/20/2012 opposing Fitzpatrick/PA8
Mailing Address 2001 N. Beauregard Street Suite 420	
City State Zip Code Alexandria VA 22311	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4145	
Amount Incurred This Period 5413.66	Payment This Period 0.00	Outstanding Balance at Close of This Period 5413.66

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nesbitt Research	Nature of Debt (Purpose): Research Services
Mailing Address 2120 L Street, NW Suite 305	
City State Zip Code Washington DC 20037	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4150	
Amount Incurred This Period 600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

1) SUBTOTALS This Period This Page (optional)..... ▶	11402.15
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 17
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEFEND OUR HOMES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor New Media Campaigns	Nature of Debt (Purpose): Website Services
Mailing Address 118-A East Main Street	
City State Zip Code Carrboro NC 27510	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4158	
Amount Incurred This Period 600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Switchboard Communications LLC	Nature of Debt (Purpose): Independent Expenditure Calls - 08/13/2012 opposing Coffman/CO6
Mailing Address 888 16th Street, NW Suite 650	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4136	
Amount Incurred This Period 183.30	Payment This Period 0.00	Outstanding Balance at Close of This Period 183.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Switchboard Communications LLC	Nature of Debt (Purpose): Independent Expenditure Calls - 08/13/2012 opposing Biggert/IL11
Mailing Address 888 16th Street, NW Suite 650	
City State Zip Code Washington DC 20006	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4138	
Amount Incurred This Period 155.20	Payment This Period 0.00	Outstanding Balance at Close of This Period 155.20

1) SUBTOTALS This Period This Page (optional)..... ▶	938.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
DEFEND OUR HOMES

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Switchboard Communications LLC		Nature of Debt (Purpose): Independent Expenditure Calls - 08/13/2012 opposing Fitzpatrick/PA08
Mailing Address 888 16th Street, NW Suite 650		
City State	Zip Code	
Washington DC	20006	

Outstanding Balance Beginning This Period	Transaction ID : SD10.4139	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="196.25"/>	<input type="text" value="0.00"/>	<input type="text" value="196.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Switchboard Communications LLC		Nature of Debt (Purpose): Research Calls
Mailing Address 888 16th Street, NW Suite 650		
City State	Zip Code	
Washington DC	20006	

Outstanding Balance Beginning This Period	Transaction ID : SD10.4135	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="8583.15"/>	<input type="text" value="0.00"/>	<input type="text" value="8583.15"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="8779.40"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="43532.42"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="43532.42"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFEND OUR HOMES	FEC IDENTIFICATION NUMBER ▼ C C00525204
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 08 / 13 / 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 183.30
City Alexandria State VA Zip Code 22311	Transaction ID : SE.4281	
Purpose of Expenditure Independent Expenditure Calls - 08/13/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 08 / 14 / 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 5395.11
City Alexandria State VA Zip Code 22311	Transaction ID : SE.4263	
Purpose of Expenditure Independent Expenditure Mail - 08/14/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent 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.

Signature Steve Rosenthal [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
03 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFEND OUR HOMES	FEC IDENTIFICATION NUMBER ▼ C C00525204
--	---

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date <input type="text"/> 08 / <input type="text"/> 14 / <input type="text"/> 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount <input type="text"/> 5388.49
City Alexandria	State VA	
Purpose of Expenditure Independent Expenditure Mail - 08/14/2012	Category/ Type <input type="text"/> 004	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JUDY BIGGERT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4266

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date <input type="text"/> 08 / <input type="text"/> 14 / <input type="text"/> 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount <input type="text"/> 5413.66
City Alexandria	State VA	
Purpose of Expenditure Independent Expenditure Mail - 08/14/2012	Category/ Type <input type="text"/> 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4267

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

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.

Steve Rosenthal
Signature

[Electronically Filed]

Date 03 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFEND OUR HOMES	FEC IDENTIFICATION NUMBER ▼ C C00525204
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date MM / DD / YYYY 08 / 20 / 2012	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 5395.11	
City Alexandria	State VA	Zip Code 22311	
Purpose of Expenditure Independent Expenditure Mail - 08/20/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SE.4270

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date MM / DD / YYYY 08 / 20 / 2012	
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 5388.49	
City Alexandria	State VA	Zip Code 22311	
Purpose of Expenditure Independent Expenditure Mail - 08/20/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JUDY BIGGERT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SE.4275

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent 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.

Signature Steve Rosenthal [Electronically Filed] Date MM / DD / YYYY
03 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFEND OUR HOMES	FEC IDENTIFICATION NUMBER ▼ C C00525204
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Mack Crouse Group [MEMO ITEM]		Date MM / DD / YYYY 08 / 20 / 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 5413.66
City Alexandria	State VA	
Zip Code 22311	Transaction ID : SE.4280	
Purpose of Expenditure Independent Expenditure Mail - 08/20/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Switchboard Communications LLC [MEMO ITEM]		Date MM / DD / YYYY 08 / 13 / 2012
Mailing Address 888 16th Street, NW Suite 650		Amount 196.25
City Washington	State DC	
Zip Code 20006	Transaction ID : SE.4264	
Purpose of Expenditure Independent Expenditure Calls - 08/13/2012	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent 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.

Steve Rosenthal
Signature

[Electronically Filed] Date MM / DD / YYYY
03 / 13 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFEND OUR HOMES	FEC IDENTIFICATION NUMBER ▼ C C00525204
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Switchboard Communications LLC		Date MM / DD / YYYY 08 / 13 / 2012
[MEMO ITEM]		Amount 155.20
Mailing Address 888 16th Street, NW Suite 650		
City Washington	State DC	Zip Code 20006
Purpose of Expenditure Independent Expenditure Calls - 08/13/2012		Transaction ID : SE.4282
Category/Type 004		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JUDY BIGGERT		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City		State
Zip Code		Amount
Purpose of Expenditure		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Category/Type		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	0.00

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.

Signature Steve Rosenthal [Electronically Filed] Date MM / DD / YYYY
03 / 13 / 2013