

**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

Defending Main Street SuperPAC Inc.

ADDRESS (number and street)

325 7th Street, NW

☐ (Check if address is changed)

Suite 610

Washington

CITY ▲

DC

STATE ▲

20004

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

amy@gilbertwolfand.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY  
01 / 18 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00540203

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 Chamberlain, Sarah, , ,

Signature of Treasurer Chamberlain, Sarah, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
01 / 18 / 2021

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  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## C

Write or Type Committee Name

**Defending Main Street SuperPAC Inc.****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

Chamberlain, Sarah, , ,

Mailing Address

430 Ferdinand Day Drive

Alexandria

VA

22304

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

202

661

4153

**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

Chamberlain, Sarah, , ,

Mailing Address

430 Ferdinand Day Drive

Alexandria

VA

22304

Title or Position  
Treasurer

CITY

STATE

ZIP CODE

Telephone number

202

661

4153

Full Name of  
Designated  
Agent

Mailing Address

Title or Position

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.

Alliance Bernstein

Mailing Address

800 Connecticut Ave NW

Washington

DC

20006

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Capital Bank

Mailing Address

2275 Research Blvd.

Suite 600

Rockville

MD

20850

CITY

STATE

ZIP CODE