FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)
   (Check if name is changed)
   Example: If typing, type over the lines.
   12FE4M5

Defend US PAC

ADDRESS (number and street)
   P.O. Box 17237
   Arlington
   VA
   22216

COMMITTEE’S E-MAIL ADDRESS
   info@defenduspac.us

COMMITTEE’S WEB PAGE ADDRESS (URL)
   www.defenduspac.us

2. DATE
   01/28/2020

3. FEC IDENTIFICATION NUMBER
   C00634261

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
   Norris, Tom,

Signature of Treasurer
   Norris, Tom,

[Electronically Filed]

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.
5. 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. (Complete the candidate information below.)

Name of Candidate

(c) □ This committee supports/opposes only one candidate, and is NOT an authorized committee.

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) □ 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 separate segregated fund or party committee. (i.e., nonconnected committee)

□ In addition, this committee is a Lobbyist/Registrant PAC.

□ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(g) □ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) □ 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. [Name] [FEC ID number: C]
2. [Name] [FEC ID number: C]
3. [Name] [FEC ID number: C]
4. [Name] [FEC ID number: C]
Write or Type Committee Name

Defend US PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

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.

Norris, Tom, , ,

PO Box 17237

Arlington VA 22216

Treasurer

Telephone number

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).

Norris, Tom, , ,

PO Box 17237

Arlington VA 22216

Treasurer

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.

**Chain Bridge Bank**

Mailing Address

1445A Laughlin Ave

McLean                      VA          22101

CITY                      STATE      ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY                      STATE      ZIP CODE