

2012 JUL 23 AM 10: 03

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Committee Name:	
Defend Our Homes	
f registered, FEC ID:	(Print July 1997), http://doi.org/10.1001
Today's Date:	
07/16/2012	
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,

Steven Rosenthal

Treasurer's Name:

Steven Rosenthal

Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVE

2012 JUL 20 PM 2: 45

				GIG USAPAN CENTER
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	**************************************
Defend Our Hom	nes			
<u> </u>				
<u> </u>	,888 16th Street NW			
ADDRESS (number and street)	St- 650		<u> </u>	
(Check if address is changed)	Ste 650 Washington		DC	20006
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	· · · · · · · · · · · · · · · · · · ·			
(Check if address	gruvergary@hotmail.	<u> </u>	1111	
(Check if address is changed)	jpapadopoulos@or	ganizinginc.com	· 	
COMMITTEE'S WEB PAGE ADD (Check if address is changed)	DRESS (URL)			
2. DATE 07 16	13 M 14			
3. FEC IDENTIFICATION NU	JMBER C	is tit ving in hear of a stagen and general ge		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
Type or Print Name of Treasurer Signature of Treasurer Steven A NOTE: Submission of false, errore	Steven Rosenthal Rosenthal	sentual	Date 07	16 2012
	ANY CHANGE IN INFORMATI	ON SHOULD BE REPORTED	WITHIN 10 DAYS.	
Office Use		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

5.

F!	EC FO	inii i (Hevised 02/2009)	Page Z
TYPE	OF C	COMMITTEE	
Cano		e 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 information below.)	e candidate
Name Candid		<u> </u>	
Candid Party	dat e Affiliati	ion Sought: House Senate President	ate strict
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	/ Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the Republic	cratic, ican, etc.) Party.
Politi	ical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:
	100000	Corporation Corporation w/o Capital Stock Labo	r Organization
		Membership Organization Trade Association Coop	erative
		In addition, this committee is a Lobbyist/Registrapt PAC.	
(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint	Func	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a fedoral eandidate.	ore political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	ore political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	1
	2.	FEC ID number C	Same promise and service and s
	3.	FEC ID number	Alemo Branch Strong Branch
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FEC Form 1 (Revised 0)	/2009)		Page 3
Write or Type Committee Name Defend Our Hor	000 1000		
	ganization, Affiliated Committee, Joint Fundraising I	Representative, or Lea	ndership PAC Sponsor
NONE			
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Jaj Joint Fundrai	ising Representative	Leadership PAC Sponsor
 Custodian of Records: Ident books and records. Gary Gruve 	ify by name, address (phone number optional) and p	position of the person i	n possession of committee
Full Name			
Mailing Address	888 16th Street NW Ste 650	<u> </u>	<u> </u>
	Washington	DC 200	006
Title or Position	CITY	STATE	ZIP CODE
Financial Director	Telephone	number 202	- 962 - 7250
8. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of sistant treasurer).	f the committee; and the	ne name and address of
Full Name Steven Ros	enthal		
Mailing Address	888 16th Street NW		
	Ste 650		
	Washington CITY	DC 200 STATE	ZIP CODE
Title or Position Treasurer		ı 202 ı	- 974 - 8295

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Full Name of Designated		,	1
Agent LILL			
Mailing Address			
•	CITY	STATE	ZIP CODE
Title or Position	•		
		Telephone number	J- <u>L</u> J- <u>L</u>
Banks or Other Depositoric safety deposit boxes or main Name of Bank, Depository, e		ch the committee deposits fund	s, holds accounts, rents
Amalga	amated Bank	<u> </u>	
Mailing Address	1825 K Street NW		
	1st Floor	11111111	1 1 1 1 1 1 1 1
	Washington	DC 2	0006
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
1			1
			<u> </u>
Mailing Address			<u> </u>
	CITY	STATE	ZIP CODE

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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™ or Signature Confirmation™ 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): DATE PREPARED PREPARER

(3/2005)