



SEEC FORM 8

Independent Expenditure Only Political Committee
STATE ELECTIONS ENFORCEMENT COMMISSION
Revised 2024

Received by SEEC
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REGISTRATION TYPE	
<input type="radio"/> Original	
<input checked="" type="radio"/> Amendment/ Biennial with Changes	

1. NAME OF COMMITTEE				2. ACRONYM	
The Property Owner Defense League				POODLE	
<input type="checkbox"/> Previously Registered as Different Committee <i>Name of previous committee (if different from above)</i>					
3. COMMITTEE ADDRESS			4. COMMITTEE E-MAIL / 5. COMMITTEE WEBSITE		
Address PO Box 4795			Email r.decosmo@sbcglobal.net		
City Waterbury	State CT	Zip Code 06704	Website		
6. CHAIRPERSON NAME					
First Name Robert		MI J	Last Name De Cosmo		Suffix Sr
7. CHAIRPERSON RESIDENCE ADDRESS			8. CHAIRPERSON MAILING ADDRESS (If different)		
Street Address 141 Greenmount Ter			Address		
City Waterbury	State CT	Zip Code 06708	City	State	Zip Code
9. CHAIRPERSON TELEPHONE		10. CHAIRPERSON EMAIL ADDRESS			
<i>(Include Area Code)</i> 800 369 6153		r.decosmo@sbcglobal.net			
11. TREASURER NAME					
First Name Robert		MI J	Last Name De Cosmo		Suffix Sr
12. TREASURER RESIDENCE ADDRESS			13. TREASURER MAILING ADDRESS (If different)		
Street Address 141 Greenmount Ter			Address		
City Waterbury	State CT	Zip Code 06708	City	State	Zip Code
14. TREASURER TELEPHONE		15. TREASURER EMAIL ADDRESS			
<i>(Include Area Code)</i> 800 369 6153		r.decosmo@sbcglobal.net			
16. DEPUTY TREASURER NAME					
First Name		MI	Last Name		Suffix
17. DEPUTY TREASURER RESIDENCE ADDRESS			18. DEPUTY TREASURER MAILING ADDRESS (If different)		
Street Address			Address		
City	State	Zip Code	City	State	Zip Code
19. DEPUTY TREASURER TELEPHONE		20. DEPUTY TREASURER EMAIL ADDRESS			
<i>(Include Area Code)</i>					
21. DEPOSITORY INSTITUTION NAME					
Thomaston Savings Bank					
22. DEPOSITORY INSTITUTION ADDRESS					
Address 824 Highland Avenue, Waterbury, CT 06708			City		State Zip Code

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NAME OF COMMITTEE		REGISTRATION TYPE	
The Property Owner Defense League		<input type="radio"/> Original <input checked="" type="radio"/> Amendment/ Biennial with Changes	
23. OFFICER NAME		TITLE OR POSITION	
Peter D'Amato		Officer	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
30 Elephant Rock Rd	Woodbury	CT	06798
23A. OFFICER NAME		TITLE OR POSITION	
Ross Gulino		Officer	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
69 Collindale Dr	Meriden	CT	06450
23B. OFFICER NAME		TITLE OR POSITION	
Adam Bonoff		Officer	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
19 Gregory Farm Rd	Easton	CT	06612
23C. OFFICER NAME		TITLE OR POSITION	
Lin Yang		Officer	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
17 Woodside Dr	Woodbridge	CT	06525
23D. OFFICER NAME		TITLE OR POSITION	
David Haberfeld		Officer	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
110 Divinity St	Bristol	CT	06010
23E. OFFICER NAME		TITLE OR POSITION	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
23F. OFFICER NAME		TITLE OR POSITION	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code
23G. OFFICER NAME		TITLE OR POSITION	
OFFICER RESIDENCE ADDRESS			
Address	City	State	Zip Code

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24. COMMITTEE SUBTYPE					
<input type="radio"/> Two or More Individuals <input type="radio"/> Labor Union <input type="radio"/> Business Entity <input type="radio"/> Other Organization					
25. PURPOSE OF COMMITTEE (Select a single committee purpose under A or B and applicable subtype)					
A. <input checked="" type="radio"/> Ongoing (Select subtype) <input type="radio"/> State Elections Only <input type="radio"/> Municipal Elections Only <input checked="" type="radio"/> Both		B. <input type="radio"/> Durational (Select subtype) <input type="radio"/> Single Election Date _____ <input type="radio"/> Single Referendum Date _____ <input type="radio"/> Single Primary Date _____ <input type="radio"/> Constitutional Amendment Date _____			
26. REFERENDUM QUESTION or CONSTITUTIONAL AMENDMENT ONLY <i>Brief description of subject matter of Referendum Question or Constitutional Amendment</i>		27. GROUP'S POSITION ON THE REFERENDUM QUESTION or CONSTITUTIONAL AMENDMENT <input type="radio"/> Support <input type="radio"/> Oppose			
28. COMMITTEES ESTABLISHED BY BUSINESS ENTITY, LABOR UNION OR OTHER ORGANIZATION OR ASSOCIATION ONLY					
Entity Name		Address	City	State	Zip Code
29. IF THE COMMITTEE IS ESTABLISHED BY A PERSON OTHER THAN A HUMAN BEING, IS THAT PERSON MAKING THE EXPENDITURE A FOREIGN NATIONAL AS DEFINED IN PUBLIC ACT 24-28?					
<input checked="" type="radio"/> No <input type="radio"/> Yes					
30 SECTION RESERVED					
31. IS COMMITTEE ESTABLISHED OR CONTROLLED BY A REGISTERED LOBBYIST? <input type="checkbox"/> See Addendum					
<input type="radio"/> No <input type="radio"/> Yes <i>If Yes, Name of Registered Lobbyist</i> _____ <input type="radio"/> Client Lobbyist <input type="radio"/> Communicator Lobbyist <input type="radio"/> Both					
32. IS COMMITTEE ESTABLISHED OR CONTROLLED BY AN ELECTED STATEWIDE OFFICIAL, GENERAL ASSEMBLY MEMBER OR AGENT THEREOF?					
<input type="radio"/> No <input type="radio"/> Yes <i>If Yes, Name of Official, Member or Agent</i> _____ <input type="checkbox"/> See Addendum					
33. DOES COMMITTEE FILE REPORTS WITH FEDERAL ELECTION COMMISSION OR ANY OUT-OF-STATE ELECTIONS AGENCY?					
<input checked="" type="radio"/> No <input type="radio"/> Yes <i>If Yes, Name of Agency</i> _____					
34. HAS A CONTRIBUTION OR DISBURSEMENT BEEN RECEIVED PRIOR TO THIS REGISTRATION STATEMENT?					
<input type="radio"/> No <input type="radio"/> Yes <i>See instructions for additional filing requirements.</i>					
35. IS COMMITTEE ESTABLISHED OR CONTROLLED BY A STATE CONTRACTOR OR PRINCIPAL OF A STATE CONTRACTOR?					
<input checked="" type="radio"/> No <input type="radio"/> Yes <i>If Yes, Name of Contractor or Principal</i> _____ <input type="checkbox"/> See Addendum					
36. PURPOSE OF COMMITTEE AS TO STATEWIDE & GENERAL ASSEMBLY CANDIDATES					
A. Is this Political Committee authorized to make expenditures for the benefit of candidates for Statewide Office? <input type="radio"/> No <input checked="" type="radio"/> Yes			B. Is this Political Committee authorized to make expenditures for the benefit of candidates for General Assembly? <input type="radio"/> No <input checked="" type="radio"/> Yes		
37. IS COMMITTEE ESTABLISHED OR CONTROLLED BY A PRINCIPAL OF AN INVESTMENT SERVICES FIRM?					
<input checked="" type="radio"/> No <input type="radio"/> Yes <i>If Yes, Name of Principal</i> _____ <input type="checkbox"/> See Addendum					

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38. CERTIFICATION

Chairperson

I hereby certify and state, under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief, that this committee intends solely to make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee, and further, that this statement includes my certification to the fact that any individual designated herein to serve as the treasurer or deputy treasurer have indicated to me their acceptance of my appointment of them to those positions. independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee.

Robert J De Cosmo Sr
04/05/2019

CHAIRPERSON SIGNATURE
DATE (mm/dd/yyyy)

Treasurer

Initial Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my ap-
pointment by the chairperson to serve as the designated treasurer of this political committee, and that I am *either*
submitting this registration statement *together with* a SEEC FORM 40 complete as to the committee’s first day of receiving
contributions or disbursements benefiting the committee or that I understand that I shall become obligated to file the
committee’s first SEEC FORM 40 within 48 hours after receiving the committee’s first contribution or disbursement. I
intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes,
and to abide by any pro-hibitions, limitations or restrictions concerning campaign contributions and expenditures. I further
hereby certify and state under penalties of false statement, that this committee intends solely to make expenditures that are
independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee.
Neither I, nor any person (including any human being, business, other legal entity or association) that established or controls
this committee, is a foreign national.

Amended Committee Registration: I hereby certify and state, under penalties of false statement, that I have
accepted my appointment by the chairperson to serve as the designated treasurer of this political committee. I intend to
comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to
abide by any prohibitions, limitations or restrictions concerning campaign contributions and expendi-tures. I further hereby
certify and state under penalties of false statement, that all of the designations set forth in this political committee registration
statement are true, accurate and complete to the best of my knowledge and belief and that this committee intends solely to
make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or
political committee. Neither I, nor any person (including any human being, business, other legal entity or association) that
established or controls this committee, is a foreign national.

Biennial Committee Re-Registration: I hereby certify and state, under penalties of false statement, that I have
accepted my appointment by the chairperson to serve as the designated treasurer of this political committee. I intend to
comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to
abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby
certify and state under penalties of false statement, that all of the designations set forth in this political committee registration
statement are true, accurate and complete to the best of my knowledge and belief and that this committee intends solely to
make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or
political committee. Neither I, nor any person (including any human being, business, other legal entity or association) that
established or controls this committee, is a foreign national.

Robert J De Cosmo Sr
11/08/2024

TREASURER SIGNATURE
DATE (mm/dd/yyyy)

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38. CERTIFICATION *continued*

Deputy Treasurer

Initial Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby certify and state under penalties of false statement, this committee intends solely to make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee.

Amended Committee Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby certify and state under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief and that this committee intends solely to make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee.

Biennial Committee Re-Registration: I hereby certify and state, under penalties of false statement, that I have accepted my appointment by the chairperson to serve as the designated deputy treasurer of this political committee. I intend to comply with all the campaign finance disclosure requirements as contained in Chapter 155 of the General Statutes, and to abide by any prohibitions, limitations or restrictions concerning campaign contributions and expenditures. I further hereby certify and state under penalties of false statement, that all of the designations set forth in this political committee registration statement are true, accurate and complete to the best of my knowledge and belief and that this committee intends solely to make expenditures that are independent of, and not coordinated with, any candidate, candidate committee, party committee or political committee.

DEPUTY TREASURER SIGNATURE

DATE (mm/dd/yyyy)

ADDITIONAL PAGES FOR SEEC FORM 8

If additional pages are needed to complete all information required in Sections 23, 31, 32, 35 or 37 of the form, please reproduce the "Additional Page" for the appropriate section, and attach the page(s) to the SEEC Form 8.