Robinson+Cole

RECEIVED FEC MAIL CENTER 2015 APR 10 PM 12: 55 GLENN A. SANTORO

280 Trumbull Street Hartford, CT 06103-3597 Main (860) 275-8200 Fax (860) 275-8299 gsantoro@rc.com Direct (860) 275-8322

April 9, 2015

Via FedEx

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re: FEC Form 3X for the Reporting Period Ended: March 31, 2015

Ladies and Gentlemen:

Enclosed please find FEC Form 3X for the above referenced reporting period.

If you have any questions, please call me at (860) 275-8322.

Very truly yours,

glenn A. Santoro

Enclosures

1505-141-1462

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 APR 10 PM 12: 55

Office	Use	Only

1.	NAME OF		
	COMMITTEE	(in	full

TYPE OR PRINT ▼

Example: If typing, type

12FE4M5

COMMITTEE (in full)		ove	r the lines.		
ROBIINS ON L	C OL E I	FE DE RAL	POLITI	CALIAC	TIONIII
COMMMITTTEE			111111		
ADDRESS (number and street)	2,8,0 T,R,T	имвит _{, г.,} s	TREET		
Check if different					
than previously reported. (ACC)	HARTF	D _I R _I D _I I i		CT	016103 - 85 79
2. FEC IDENTIFICATION NU	MBER ♥	CITY		STATE A	ZIP CODE ▲
C 0 0 3 4 1 3	2 1	3. IS THIS REPORT	NEW (N) C	PR AM	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	May 20 (M5) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	. Mar 20 (M3)	Jun 20 (I	M6) Sep	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	Jul 20 (N	17) Oct	20 (M10) Jan 31 (YE)
Quarterly Report (Q July 15	(C) 12-Da	y Election	Primary (12P)	General	(12G) Runoff (12R)
Quarterly Report (Q October 15	2) !	t for the:	Convention (12C)	Special (12S)
Quarterly Report (Q		Election on	TM (M) / TO TO	$(V_{ij} + \hat{A}_{ij} \hat{A}_{ij}, \hat{A}_{ij}, \hat{A}_{ij}) = A$	in the
Year-End Report (Y July 31 Mid-Year Report (Non-election	(d) 30-Da		General (30G)	Runoff (3	<u> </u>
Year Only) (MY) Termination Report	1	t for the:	General (300)	, nulluli (s	OR) Special (30S)
(TER)		Election on	M M / D'D'	A CALL SALL COLOR	in the State of
5. Covering Period 0 ³ , 1	, ' Ö Î '	2 0 1 5	through 0	3 3 1	2 0 1 5
I certify that I have examined this	s Report and to	the best of my kno	wledge and belief it	is true, correct an	d complete.
Type or Print Name of Treasurer		-			
Signature of Treasurer	Conn A)	Jan forr		Date 0 2	1 '0° 9° ' 2 0 1 5
NOTE: Submission of false, errone	cous, or incomplete	e information may su	ubject the person sign	ing this Report to t	he penalties of 2 U.S.C. §437g.
Office Use					FEC FORM 3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
	rite or Type Committee Name	MY ON COMMY MAINT	
	PRINSON & COLE FEDERAL POLITICAL AC eport Covering the Period: From: 0	# 1 / 1 b b / 1 A + A 1 A 1 A 1	D: 0 3 1 2 0 1 5
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2 0 1 5		4,818,61
	(b) Cash on Hand at Beginning of Reporting Period	, 4,8 1 8 6 1	
	(c) Total Receipts (from Line 19)	· · · · · · · · · · · · · · · · · · ·	
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4,818.61	4,818.61
7.	Total Disbursements (from Line 31)	, 0 0 0	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4 8 1 8 6 1	4 8 1 8 6 1
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	, , 0.00	

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name ROBINSON & COLE FEDERAL POLITICAL 3 1 2 0 1 5 0 1: 2 0 1 5 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)...... (ii) Unitemized (iii) TOTAL (add (b) Political Party Committees (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 0.0 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶ 0 - 0 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	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	1 5	the second secon
	(ii) Non-Federal Share	, ,	The state of the s
	(b) Other Federal Operating Expenditures		en de la composition de la composition La composition de la
	(c) Total Operating Expenditures	• • • • • • • • • • • • • • • • • • •	
_	(add 21(a)(i), (a)(ii), and (b))▶	7 . 7	,
2.	Transfers to Affiliated/Other Party Committees	•	and the second s
3.	Contributions to Federal Candidates/Committees	, ,	
	and Other Political Committees	, 000	or the second of
	Independent Expenditures (use Schedule E)		
5.	Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
	(355 55.055.5 / / / / / / / / / / / / / / / / / /	7	
6.	Loan Repayments Made		The state of the s
	Loans Made	• • • • • • • • • • • • • • • • • • • •	* . T
	man rondea Committees	, ,	
	(b) Political Party Committees	7	
	(such as PACs))	grand r oom and the second second second
	(d) Total Contribution Refunds	. **	
	(add Lines 28(a), (b), and (c))▶	,	, , , , , , , , , , , , , , , , , , ,
_	Other Distance and		
9.	Other Disbursements	, , , , ,	y
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	·	
	(i) i edelar Griare	3	, , , , , , , , , , , , , , , , , , , ,
	(ii) "Levin" Share	, 3 ,	. 1
	(b) Federal Election Activity Paid Entirely With Federal Funds	•	
	(c) Total Federal Election Activity (add	, , , -	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	3 1	. ,
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0 0 0	, 000
2.	Total Federal Disbursements		
•	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0 0 0	0 0 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	. Or Diabaracinoma	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)	, , , , , , , , , , , , , , , , , ,	
(from Line 28(d))		0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		The state of the s
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

SCHEDULE A (FEC Form 3X)	1	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 21 (check only one) 11a 11b 11c 12 13 14 15 16 17			
or for commercial purposes, other than using t			erson for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
ROBINSON & COLE FEDERAL POL	ITICAL ACTI	ON COMMITTEE				
Full Name (Last, First, Middle Initial) A.			Date of Receipt			
Mailing Address	,		THE MITTER OF DELIVERY YEAR			
City	State	Zip Code				
		·	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C : ,,,					
Name of Employer	Occupation	i				
Receipt For: Primary General		Year-to-Date ▼				
Other (specify) ▼		3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
Full Name (Last, First, Middle Initial)		······································	Date of Pagaint			
Mailing Address			Date of Receipt			
City	State	Zip Code				
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period			
Name of Employer	Occupation	n				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼				
Full Name (Last, First, Middle Initial)						
c			Date of Receipt			
Mailing Address			AL MIT O D V V V V V			
City	State	Zip Code				
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer Occupation		n				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			►			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE (check only	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used	d by any person	on for the purpose of soliciting contributions solicit contributions from such committee
NAME OF COMMITTEE (In Full)			The state of the s
ROBINSON & COLE FEDERAL POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)		- 	
4.			Date of Disbursement
Mailing Address			Maria Angleria di Santa Angleria di Walionia di Santa Angleria di
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For:	Туре	The second of the second of the second
Senate President	Primary General Other (specify) ▼		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) 3.			Date of Disbursement
Mailing Address		M m / D D / V Y Y Y	
City	State Zip Code		
Purpose of Disbursement			
Candidate Name Category/			Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: Primary General	Туре	e de fre e e e partir de la la deservación de la defenda d
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Data of Diabour
•.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name Category/			
Office Sought: House Senate President State: District:	ment For: Primary ☐ General Other (specify) ▼		and the second s
			
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only))	·····•	, , 0.0.0

SCHEDULE C (FEC Form 3X) **LOANS**

PAGE 8 OF 21 Use separate schedule(s) for each category of the FOR LINE 13 OF FORM 3X Detailed Summary Page NAME OF COMMITTEE (In Full) ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Primary General Mailing Address Other (specify) State ZIP Code Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date The Control of the Co 4 - 1 , s a 1 - s TERMS Date Incurred Date Due Interest Rate Secured: 0 / / ¥ *** 6 6 / Y Y Y % (apr) Yes List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code City State Guaranteed King the green \$1 and the second \$10 pm Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount and the contract the con-State ZIP Code City Guaranteed $\mathcal{F}_{\mathrm{op}}(\pmb{f}, \mathbf{h}, \mathbf{h$ Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed But A to Carlo State of the transfer. Outstanding: SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page ____ of Schedule C

Federal Election Commission, Washington, D.C. 20463		Tage or schedule o		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER		
ROBINSON & COLE FEDERAL POLITICAL ACTION	COMMITTEE	C 0 0 3 4 1 3 2 1		
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)		
Full Name		The second of the second of the second		
	19 (19 a) (19 a) (19 a) (19 a)			
Mailing Address		ZM T M T / TD F O T / "VT F V V T V		
	Date Incurred or Established	d organism (b b v v v v v v v v v		
City State Zip Code	Date Due			
A. Has loan been restructured? No Yes	If yes, date originally incurre	ed M M / VD D V Y Y Y Y		
B. If line of credit,	Total			
	Outstanding	y in figure of the second of t		
Amount of this Draw:	Balance:	ter eri e 👣 prawije after been e 🗫 oppek		
C. Are other parties secondarily liable for the debt in	ncurred? rs must be reported on Schedule C.	.)		
D. Are any of the following pledged as collateral for		What is the value of this collateral?		
property, goods, negotiable instruments, certificat stocks, accounts receivable, cash on deposit, or	es of deposit, chattel papers,	garanta da katalan kalendari yang		
No Yes If yes, specify:		and the second section of the second section is a second section of the second section of the second section of		
Control of the contro		Does the lender have a perfected security		
	interest in it? No Yes			
E. Are any future contributions or future receipts of collateral for the loan? No Yes If	yes, specify:	What is the estimated value?		
A depository account must be established pursua to 11 CFR 100.82(e)(2) and 100.142(e)(2).	ant Location of account:	Let the second second second		
Date account established:	Address:			
M M / D D / Y Y Y Y				
	City, State, Zip:			
F. If neither of the types of collateral described above the loan amount, state the basis upon which this				
G. COMMITTEE TREASURER		DATE		
Typed Name		M to 1/ 10 to 1/ Y Y Y Y Y Y		
Signature				
H. Attach a signed copy of the loan agreement.				
I. TO BE SIGNED BY THE LENDING INSTITUTION	ON:			
are accurate as stated above.		ermation regarding the extension of the loan		
 The loan was made on terms and condition similar extensions of credit to other borrown 	ns (including interest rate) no more ers of comparable credit worthiness.	lavorable at the time than those imposed for .		
III. This institution is aware of the requirement complied with the requirements set forth at	that a loan must be made on a ba	sis which assures repayment, and has		
AUTHORIZED REPRESENTATIVE		DATE		
Typed Name		: M : M . / D : 0 ' / Y : Y . Y : Y		
Signature	Title			

SCHEDULE D (FEC Form 3X)

(Use separate schedule(s)

PAGE 10 OF 21 FOR LINE NUMBER:

	9
	10

and the state of t		or each (check only one)			9 10
NAME OF COMMITTEE (In Full)			·		1
ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):		
·					
Mailing Address					
City State Zip Code					
Outstanding Balance Beginning This Period	J				
Salarang Salaras Bogining (116 1 5162					
Amount Incurred This Period Payment This Period	. ·	Outstandi	ng Balance at C	lose of Ti	his Period
9, 10 mm					,
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):		
Mailing Address	1				
City State Zip Code					
Outstanding Balance Beginning This Period		-			
Amount Incurred This Period Payment This Period		Outstandi	ng Balance at C	lose of T	his Period
					tyri∓ta Ni. }
1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	• •			2 - 2	* : * *
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):		
Mailing Address		i			
City State Zip Code					
Outstanding Balance Beginning This Period					
Amount Incurred This Period Payment This Period		Outstand	ing Balance at C	Close of T	
1	.				
<u> </u>			<u> </u>		
1) SUBTOTALS This Period This Page (optional)	>		, , ,		
2) TOTALS This Period (last page this line number only)	▶		, ,		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			, 1		
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page	only) ▶	٠.	j j	. 0	0 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES		PAGE 11 OF 21 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE		(C 0 0 3 4 1 3 2 1
Check if 24-hour report 48-hour report New repor	t Amends report	filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City State Z	Zip Code	Section 2 and the section of the sec
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
Name of Federal Candidate		Office Sought: House District: President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City State :	Zip Code	La Cara Familia Sant Francisco Sant Statement
Purpose of Expenditure	Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate	Support Oppose	Office Sought: House District: President Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		•
(b) SUBTOTAL of Unitemized Independent Expenditures		The second of th
(c) TOTAL Independent Expenditures		والمنافي والمستعلق والمنافية
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
	Date	+ M = M
Signature		and the state of t

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

OF 21 PAGE 12 (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE Full Name of Subordinate Committee Has your committee been designated to make coordinated expenditures by a political party committee? YES NO Mailing Address If YES, name the designating committee: City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate > Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount District: Senate Presidential Aggregate General Election Expenditure for this Candidate > Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Code 55 M Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: **Presidential** Aggregate General Election Expenditure for this Candidate > SUBTOTAL of Expenditures This Page (optional)..... 0 0 TOTAL This Period (last page this line number only).....

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)				
USE ONLY ONE SECTION, A or B				
A. State and Local Party Committees				
Fixed Percentage (select one)				
Presidential-Only Election Year (28% Federal)				
Presidential and Senate Election Year (36% Feder	al)			
Senate-Only Election Year (21% Federal)	•			
Non-Presidential and Non-Senate Election Year (15% Federal)				
B. Separate Segregated Funds and Nonconnected Committees				
Flat Minimum Federal Percentage				
If the committee will allocate using the flat minimum perce	ntage of 50% federal funds, check			
If the committee is spending more than 50% federal funds	, indicate ratio below			
Federal	**********************************			
Nonfederal				
This ratio applies to (check all that apply):				
Administrative Generic Voter Drive Publi	c Communications Referencing Party Only			

SCHEDULE H2 (FEC Form 3X)

PAGE	OF
14	21

ALLOCATION RATIOS NAME OF COMMITTEE (In Full) ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT **ACTIVITIES APPEARING ON THIS REPORT.** Methods of allocation: I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised. II. Shared DIRECT CANDIDATE SUPPORT activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. For PACs Only: Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method. ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Fundraising Direct Candidate Support % CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Direct Candidate Support Fundraising CHECK IF THE RATIO IS: New Revised Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: Revised New Same as Previously Reported ACTIVITY OR EVENT IDENTIFIER FEDERAL % NONFEDERAL % ACTIVITY IS: Direct Candidate Support Fundraising CHECK IF THE RATIO IS:

Same as Previously Reported

New

Revised

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE OF 15 21 FOR LINE 18a OF FORM 3X

IAME C	OF COMMITTEE (In Full)		
T NI A E E	ROBINSON & COLE FEDERAL POLITICAL		TOTAL AMOUNT TO STORY
NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
		M M 7 D 7 T T T	The control of the second of t
BRE	AKDOWN OF TRANSFER RECEIVED		and the second s
i)	Total Administrative		The second state of the se
ii)	Generic Voter Drive		The second for the second seco
iii)	Exempt Activities		ing the second of the second o
iv)	Direct Fundraising (List Activity or Event Ide	ntifier)	
	2)		
	a)		
	b)		
		31 × 12 × 12	under der State
1	c) Total Amount Transferred For Direct Fundra	aising	a de la Face de la Securita de la Carte de la composición del composición de la comp
v)	Direct Candidate Support (List Activity or Ev	vent Identifier)	
	al		i
		$(\mathbf{y}_{i}, \mathbf{y}_{i}, y$	
	0)	Same and the second of the Same and Second	en. Orași por la laterat grandul de la companie.
		date Support	Burgara Barangan Bara
vi)	Public Communications Referring Only to	Party (Made by PAC)	The second secon
- 		OR BREAKDOWN OF TRANSFER RECEIV	
TOTAL	This Period (Administrative)		 In the property of the second s
TOTAL	This Period (Generic Voter Drive)		•
TOTAL	This David (France Assisting)		
IUIAL	This Period (Exempt Activities)	······································	• • • • • • • • • • • • • • • • • • •
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TOTAL	This Period (Direct Candidate Support)		1
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TOTAL	This Period (Total Amount Transferred)		0.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	OF
16	21
FOR LINE	21a OF FORM 3X

	ROBINSON & COLE FEDERAL POLIT	CICAL ACTI	ON COMMITTEE		
•	Full Name (Last, First, Middle Initial)			Allocated Activity or Event:	
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	Mailing Address				Voter Drive Direct Candidate Suppo
	City	State	Zip Code		Public Comm (ref to party only) by PAC
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SCHEDULE H5 (FEC Form 3X)

TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE 17 OF 21

			FOR LII	NE 18b OF FORM 3X
NAME OF COMMITTEE (In Full)			
ROBINSON & COLE	FEDERAL POLITICAL	ACTION COMMITTEE		
NAME OF ACCOUNT		DATE OF RECEIPT	TOTAL AMOUNT TRA	
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SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

PAGE OF 21
FOR LINE 30a OF FORM 3X

AME OF COMMITTEE (In Full)		
ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE		
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address	Allocated Activity or Event Year-To-Date	
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Mailing Address		Allocated Activity or Event Year-To-Date
City State Zip Code	T	
Purpose of Disbursement	Category/ Type	Date
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Mailing Address		Allocated Activity or Event Year-To-Date
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SCHEDULE L (FEC Form 3X) AGGREGATION PAGE: LEVIN FUNDS

Page 19 of 21

NAME OF COMMITTEE (In Full)

ROBINSON & CODE FEDERAL FORTITCAL AC

ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

NAME OF ACCOUNT

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3.	TOTAL RECEIPTS(Add Lines 1c and 2)	ing. Ngangang ang pagganan ang paggan Ngangang pagganan ang pagganan	The second of the second secon
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)	·	
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7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)	$(x,y) = (1-y)^{-1} \cdot (x+y)^{-1} \cdot (x+y)^{-1} \cdot (x+y)^{-1}$	The second secon
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10.	DISBURSEMENTS(From Line 6)		$(-1, 1, 2, \dots, 2, 2, 2, 2, \dots, 2, 2, 2, \dots, 2, 2, 2, \dots, 2, 2, \dots, 2, 2, \dots, 2, \dots,$
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11.	(Subtract Line 10 From Line 9)	$\mathcal{A}_{i} = \mathcal{A}_{i}$	And the state of t

SCHEDULE L-A (FEC Form 3X) ITEMIZED RECEIPTS OF LEVIN FUNDS

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

PAGE 20 OF 21

FOR LINE NUMBER: 2 (check only one) 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) ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt Mr. 1 Mr. 7 1 0 2 0 1 2 Mailing Address Amount of Each Receipt this Period City State Zip Code and the second of the second of the second Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt В. Mailing Address Amount of Each Receipt this Period City Zip Code State シキット・チェブ リカニチャリング Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt C. M M; / D D; / Y Y Mailing Address Amount of Each Receipt this Period City State Zip Code Frank to the transfer of the Frank Name of Employer or Principal Place of Business Aggregate Year-to-Date Occupation ... 2 ... Full Name (Last, First, Middle Initial) / Full Organization Name Date of Receipt D. M M / D' D' / Y Mailing Address Amount of Each Receipt this Period City State Zip Code Name of Employer or Principal Place of Business . . . 9... Aggregate Year-to-Date Occupation 3.3 S. W. C. S. J. ... SUBTOTAL of Receipts This Page (optional).....

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

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SCHEDULE L-B (FEC Form 3X)

Use separate schedule(s)

OR LINE NUMBER	: PAG	E_ 21	OF 21
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OF LEVIN FUNDS	for each category of the Aggregation Page	4a 4c 5
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add		
NAME OF COMMITTEE (In Full)		
ROBINSON & COLE FEDERAL POLITICAL ACTION CO		
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Page 1 of 2

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Hartford, CT 06103

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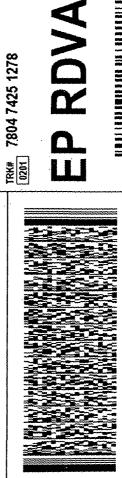
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WASHINGTON, DC 20463



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DATE PREPARED

(3/2015)

PREPARER