## Robinson+Cole

## Via FedEx

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Re: FEC Form 3X for the Reporting Period Ended: June 30, 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.


Enclosures


I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer GLENN A.-._SANTORO

Signature of Treasurer


NOTE; Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. $\S 437 \mathrm{~g}$.
Office
Use
Only.

Write or Type Committee Name
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

| Report Covering the Period: From: |  | To: <br> 4 300 4 <br> $\left[\begin{array}{l}201 \\ 20 \\ 0\end{array}\right.$ |
| :---: | :---: | :---: |
|  | COLUMN A This Period | COLUMN B <br> Calendar Year-to-Date |
| 6. (a) Cash on Hand January 1 , |  |  |
| (b) Cash on Hand at Beginning of Reporting Period. | . | . |
| (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) $\qquad$ |  |  |
| 7. Total Disbursements (from Line 31)........ | 4 | $1$ |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) $\qquad$ | 2 | 1 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) $\qquad$ |  | - ${ }^{\text {c }}$ |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) $\qquad$ |  | . |

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

FEC Form 3X (Rev. 06/2004)
Write or Type Committee Name
ROBINSON_\& COLE FEDERAL_POLITICAL_ACTION_COMMITTEE

11. Contributions (other than loans) From:
(a) Individuals/Persons Other Than Political Committees
(i) Itemized (use Schedule A)
(ii) Unitemized
(iii) TOTAL (add

Lines $11(\mathrm{a})(\mathrm{i})$ and (ii). $\qquad$
(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)) $\ldots \ldots$.

20. Total Federal Receipts (subtract Line 18(c) from Line 19).........

FEC Form 3X (Rev. 02/2003)

## of Disbursements

Page 4


Page 5

FEC Form 3X (Rev. 02/2003)

## III. Net Contributions/Operating Expenditures

33. Total Contributions (other than loans) (from Line 11(d), page 3)
34. Total Contribution Refunds (from Line 28(d))
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)
36. Total Federal Operating Expenditures (add Line 21 (a)(i) and Line 21(b))
37. Offsets to Operating Expenditures (from Line 15, page 3 ).
38. Net Operating Expenditures (subtract Line 37 from Line 36 )

| COLUMN A |
| :---: |
| Total This Period |

## COLUMN B Calendar Year-to-Date



SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 21 (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




Date of Receipt


## Amount of Each Receipt this Period



## SCHEDULE B (FEC Form 3X)

 ITEMIZED DISBURSEMENTS

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)
A.

DSCC - Federal
Mailing Address


Date of Disbursement

$$
05,129,12010
$$

Full Name (Last, First, Middle Initial)
B.

DSCC - Federal
Mailing Address
Connecticut Democrats, 30 Arbor Street, Suite 404


Full Name (Last, First, Middle Initial)
C.


SCHEDULE C (FEC Form 3X) LOANS

| Use separate schedule(s) <br> for each category of the <br> Detailed Summary Page | PAGE $8 \quad$ OF 21 |
| :--- | :---: | :---: |
|  | FOR LINE 13 OF FORM $3 X$ |



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

NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

| LENDING INSTITUTION (LENDER) Full Name | Amount of Loan | Interest Rate (APR) |
| :---: | :---: | :---: |
| Mailing Address | Date Incurred or Established |  |
| City State Zip Code | Date Due | - frackixmex |
| A. Has loan been restructured? $\square$ No $\square$ Yes | If yes, date originally incurred |  |
| B. If line of credit, Amount of this Draw: | Total Outstanding Balance: |  |

C. Are other parties secondarily liable for the debt incurred?
$\lceil$ No $\quad \square$ Yes (Endorsers and guarantors must be reported on Schedule C.)
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
$\square$ No $\square$ Yes

If yes, specify: $\qquad$
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? $\square$ No $\square$ Yes If yes, specity:

What is the value of this collateral?


Does the lender have a perfected security interest in it? $\square$ No $\square$ Yes
What is the estimated value?


A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).


## Location of account:

## Address:

City, State, Zip:
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.


SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

| PAGE 10 |  |  | OF 21 |
| :--- | :--- | :---: | :---: |
| FOR LINE NUMBER: <br> (check only one) | $\square$ |  |  |
|  |  |  |  |
|  |  |  |  | Excluding Loans



NAME OF COMMITTEE (In Full)

ROBINSON \& COLE FEDFRAL POLITICAL ACTION COMMITTEE

| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |
| :---: | :---: |
| Mailing Address |  |
| City State $\quad$ Zip Code |  |
| Outstanding Balance Beginning This Period <br> Amount Incurred This Period <br> Payment This Period | Outstanding Balance at Close of This Period ( |


| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor |  |
| :--- | :--- |
| Mailing Address |  |
| City $\quad$ State |  |

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period N.
 Amount Incurred This Period


Outstanding Balance at Close of This Period w-

| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor | Nature of Debt (Purpose): |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Mailing Address |  |  |
| City | State |  |

## Outstanding Balance Beginning This Period

- = axymyer

Amount Incurred This Period
Tx

Outstanding Balance at Close of This Period W2,



## 1) SUBTOTALS This Period This Page (optional)

2) TOTALS This Period (last page this line number only) $\qquad$
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)


SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES


FEC Schedule E (Form 3X) Rev. 09/2013

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
(2 U.S.C. $\S 441 \mathrm{a}(\mathrm{d})$ )
NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

| Has your committee been designated to make coordinated expenditures by a political party committee? $\square$ YES $\square$ NO <br> If YES, name the designating committee: |  | Fuil Name of Subordinate Committee |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | City | State |  |  |
| Full Name (Last, First, Middle Initial) of Each Payee |  |  | Purpose of Expenditure |  |  |
| City | State Zip Code |  |  |  |  |
| Name of Federal Candidate Supported | Oftice Sought: | t: $\quad$ - $\begin{aligned} & \text { House } \\ & \text { Senate } \\ & \text { Presidential }\end{aligned}$ | Amount$\square$ |  |  |
|  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) of Each Payee |  |  | Purpose of Expenditure |  |  |
|  | State Zip Code |  | Date |  |  |
| Name of Federal Candidate Supported | Office Sought: |  | Amount |  |  |
| Aggregate General Election Expenditure for this Candidate |  |  |  |  |  |
| Full Name (Last, First, Middle Initial) of Each Payee |  |  | Purpose of Expenditure |  |  |
| Mailing Address |  |  | Date为 |  |  |
|  | State $\quad$ Zip Code |  |  |  |  |
| Name of Federal Candidate Supported | Office Sought: | - $\quad$ - $\begin{aligned} & \text { House } \\ & \text { Senate } \\ & \text { Presidential }\end{aligned}$ | Amount$\square$ - |  |  |
| Aggregate General ElectionExpenditure for this Candidate |  |  |  |  |  |
| SUBTOTAL of Expenditures This Page (optional)........................................................... |  |  | $\begin{array}{r} 1+20 \\ 0-200 \end{array}$ |  |  |
| TOTAL This Period (last page this line nu | ber 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) <br> 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\% Federal)
__ 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 percentage of $50 \%$ federal funds, check 0 or

If the committee is spending more than $50 \%$ federal funds, indicate ratio below


This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

## SCHEDULE H2 (FEC Form 3X) allocation ratios

| PAGE | OF $_{21}$ |
| :--- | :--- |

NAME OF COMMITTEE (In Fuli)
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, regardiess of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

| ACTIVITY OR EVENT IDENTIFIER |  |  |
| :---: | :---: | :---: |
| ACTIVITY IS: $\square$ Fundraising $\square$ Direct Candidate Support <br> CHECK IF THE RATIO IS: $\square$ New $\square$ Revised Same as Previously Reported |  |  |
| ACTIVITY OR EVENT IDENTIFIER |  |  |
| ACTIVITY IS: $\square$ Fundraising $\square$ Direct Candidate Support <br> CHECK IF THE RATIO IS: $\square$ New $\square$ Revised Same as Previously Reported |  |  |
| ACTIVITY OR EVENT IDENTIFIER |  |  |
| ACTIVITY IS: $\square$ Fundraising $\square$ Direct Candidate Support CHECK IF THE RATIO IS: $\square$ New $\square$ Revised Same as Previously Reported |  |  |
| ACTIVITY OR EVENT IDENTIFIER |  |  |
| ACTIVITY IS: $\square$ Fundraising $\square$ Direct Candidate Support CHECK IF THE RATIO IS: $\square$ New $\square$ Revised $\square$ Same as Previously Reported |  |  |
| ACTIVITY OR EVENT IDENTIFIER |  |  |
| ACTIVITY IS:$\square$ Fundraising IS $\square$ Direct Candidate Support$\square$ IFECK THE RATIO <br> $\square$ <br> $\square$ New $\quad \square$ Revised $\quad \square$ Same as Previously Reported |  |  |
| ACTIVITY OR EVENT IDENTIFIER |  |  |
| ACTIVITY IS: $\square$ Fundraising $\quad \square$ Direct Candidate Support CHECK IF THE RATIO IS: $\square$ New $\quad \square$ Revised $\quad \square$ Same as Previously Reported |  |  |

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

| PAGE <br> 15 OF $_{21}$ |
| :---: | :---: |
| FOR LINE 18a OF FORM 3 X |

NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

a)

b) $\qquad$
c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)
b) $\qquad$ 1
c) Total Amount Transterred For Direct Candidate Support $\qquad$

vi) Public Communications Referring Only to Party (Made by PAC)



SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

| PAGE | OF |
| :--- | :--- |
| 16 | 21 |
| FOR LINE | $21 a$ |

NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE
A. Full Name (Last, First, Middle Initial)

| Mailing Address |  |
| :--- | :---: | :---: |
| City | State Zip Code |
| Purpose of Disbursement: | Categoryl <br> Type |


B. Full Name (Last, First, Middle Initial)

Allocated Activity or Event:
$\square$ Administrative $\square$ Fundraising $\square$ Exempt
$\square$ Voter Drive $\square$ Direct Candidate Support
Public Comm (ref to party only) by PAC
Allocated Activity or Event Year-To-Date
Date


SUBTOTAL of Allocated Federal and NonFederal Activity This Page


TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21 (a)(ii))

## FEDERAL SHARE

NONFEDERAL SHARE
TOTAL AMOUNT
T:
番

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)

NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

totals for breakdown of transfer received (Last Page Only)

| TOTAL This Period (Voter Registration) $\qquad$ |  |
| :---: | :---: |
| TOTAL This Period (Voter ID) .................................... |  |
| TOTAL This Period (GOTV) | 保 |
| TOTAL This Period (Generic Campaign Activity).... | ..................... |
| TOTAL This Period (Total Amount of Transfers Received) |  |



NAME OF COMMITTEE (In Full)
ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE

| A. Full Name (Last, First, Middle Initial) / Full Organization Name |  |  |
| :---: | :---: | :---: |
| Mailing Address |  | Allocated Activity or Event Year-To-Date ( |
| City State Lip Code | ancent <br> Category! <br> Type |  |
| Purpose of Disbursement |  | Date $\mathrm{P}^{\text {a }}$ |
|  |  |  |


| B. Full Name (Last, First, Middle Initial) / Full Organization Name |  | Type of Allocated Activity or Event: $\square$ Voter Registration GOTV Voter ID Generic Campaign |
| :---: | :---: | :---: |
| Mailing Address |  | Allocated Activity or Event Year-To-Date |
| City State Zip Code | \%marax |  |
| Purpose of Disbursement |  Categoryl Type |  |

FEDERAL SHARE $+\quad$ LEVIN SHARE $\quad+\quad$ TOTAL AMOUNT

| C. Full Name (Last, First, Middle Initial) / Full Organization Name |  | Type of Allocated Activity or Event: Voter Registration GOTV <br> Voter ID Generic Campaign <br> Allocated Activity or Event Year-To-Date $\square$ |
| :---: | :---: | :---: |
| Mailing Address |  |  |
| City State Lip Code |  |  |
| Purpose of Disbursement | Category/ Type | Date |
|  |  |  |

sUBTOTAL of Shared Federal and Levin Activity This Page
FEDERAL SHARE
LEVIN SHARE
$=$ TOTAL AMOUNT
 TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30 (a)(ii))

FEDERAL SHARE
TOTAL AMOUNT
耳又
LEVIN SHARE
000

TOTAL This Period for the Levin Share

4. TRANSFERS TO FEDERAL OR

## ALLOCATION ACCOUNT

(Use Schedule L-8)
(a) Voter Registration .......................

(b) Voter ID $\qquad$
$\qquad$
(d) Generic Campaign......................
(e) Tota

5. OTHER DISBURSEMENTS...................
6. TOTAL DISBURSEMENTS
(Add Lines 40 and 5)
(9ctaz
(1)




.

| Name OF COMMITTEE (In Full) ROBINSON \& COLE FEDERAL POLITICAL ACTION COMMITTEE |  |  |  |
| :---: | :---: | :---: | :---: |
| NAME OF ACCOUNT |  |  |  |
|  |  | COLUMN A TOTAL THIS PERIOD | $\begin{aligned} & \text { COLUMN B } \\ & \text { YEAR-TO-DATE } \end{aligned}$ |
| 1. | RECEIPTS FROM PERSONS <br> (a) Itemized <br> (Use Scheodula $L$ LA) | Lecremen | 㑑 |
|  | (b) Unitemized. | - |  |
|  | (c) Total ................................... |  |  |
|  | OTHER RECEIPTS |  |  |
|  | TOTAL RECEIPTS <br> (Add Lines 10 and 2) |  | $\square$ |

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

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 $\quad$ Date of Receipt
A.
Mailing Address

Name of Employer or Principal Place of Business

| Occupation |
| :--- |
| Full Name (Last, First, Middle Initial) / Full Organization Name |
| Mailing Address |
| City |
| Name of Employer or Principal Place or Business |

Occupation

Aggregate Year-to-Date
A
Full Name (Last, First, Middle Initial) / Full Organization Name
c.

| Mailing Address |  |  |
| :--- | :--- | :--- |
| City | State | Zip Code |

Name of Employer or Principal Place of Business
Occupation $\quad$ Full Name (Last, First, Middle Initial) / Full Organization Name

| Mailing Address |  |  |
| :--- | :--- | :--- | :--- |
| City | State | Zip Code |

Name of Employer or Principal Place of Business
Occupation

|  |  |
| :---: | :---: |
| SUBTOTAL of Receipts This Page (optional)................................................................ |  |
| TOTAL This Period (last page this line number only)................................................... |  |

## SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS OF LEVIN FUNDS

Use separate schedules for each category of the Aggregation Page

FOR LINE NUMBER: PAGE 21 OF 21 (check only one)
 4a $4 \mathrm{~b} \quad \square 4 \mathrm{c}$

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


FEC Schedule L-B (Form 3X) Rev. 02/2003


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.


$\square$
USPS Registered/Certified
Postmarked (R/C)

