Image# 15951363966 PAGE 1 / 16

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

PROTECTING AMERICA'S RETIREES State Stat	TORIW 3X	For Other Than An A	uthorized Committee	Office Use Only
ADDRESS (number and street) Check if different than previously reported. (ACC) CO0483883 S. IS THIS NEW REPORT (N) OR AMENDED		TYPE OR PRINT ▼		12FE4M5
C C00483883 3. IS THIS REPORT (Choose One) (a) Cuarterly Report (C11) (b) Monthly Report (C11) (a) Cuarterly Report (C11) (b) Uy 15 (c) Cuarterly Report (C2) (c) Cicober 15 (c) Cuarterly Report (C2) (d) 30-Day PRE-Election Report New Temination Report (TER) Report New Temination Report (TER) (d) 30-Day POST-Election Report (TER) (e) 12-Day POST-Election Report (TER) (f) 2014 (h) Corrier Hat I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FECTIVA STATE A ZIP CODE A AMENDED AMENDED	PROTECTING AN	MERICA'S RETIREES		
C C00483883 3. IS THIS REPORT (Choose One) (a) Cuarterly Report (C11) (b) Monthly Report (C11) (a) Cuarterly Report (C11) (b) Uy 15 (c) Cuarterly Report (C2) (c) Cicober 15 (c) Cuarterly Report (C2) (d) 30-Day PRE-Election Report New Temination Report (TER) Report New Temination Report (TER) (d) 30-Day POST-Election Report (TER) (e) 12-Day POST-Election Report (TER) (f) 2014 (h) Corrier Hat I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FECTIVA STATE A ZIP CODE A AMENDED AMENDED				
Check if different than previously reported. (ACC) WASHINGTON CITY A STATE A ZIP CODE A AMENDED (A) APT 20 (M2) May 20 (M5) Aug 20 (M8) Nov. 20 (M1) Nov. 20 (M1) Aug 20 (M8) Nov. 20		815 16TH STREET NW 4	4TH FLOOR NORTH	
than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER V C C C00483883 3. IS THIS NEW (A) REPORT (N) OR (A) AMENDED (A) TYPE OF REPORT (Choose One) (B) (C) (C) (D) (D) (D) (D) (D) (D	ADDRESS (number and stre	eet)		
PEC IDENTIFICATION NUMBER V CITY A STATE A ZIP CODE A 3. IS THIS REPORT (N) OR X (A) 4. TYPE OF REPORT (Choose One) (a) Quarterly Report (CI) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) Termination Report (YE) July 31 Md/-Year Report (N) Termination Report (TER) Termination Report (Non-election Year Only) (MY) Ter				DC coope
A. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) Termination Report (Q1) Termination Report (TER) Termination Report Termin		WASHINGTON		20006
4. TYPE OF REPORT (Choose One) (b) Monthly Report (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) Termination Report (TER) Termination Repo	2. FEC IDENTIFICATIO	ON NUMBER ▼	CITY A	STATE ▲ ZIP CODE ▲
(Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Quarterly Report (Q2) Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Election on Year Only) (MY) Termination Report (TER) Termination Report (TER) Report Non-election X Report Non-election	C C00483883	3.		
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) General (12G) Report (Non-election Report (YE) Report (Non-election Year Only) (MY) Report (Non-elect		Report Due On:		(Non-Election Year Only)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) To vering Period To v	(a) Quarterly Reports:			Year Only)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Covering Period M M M / D D / Y Y Y Y Y M In the Election on Report for the: General (30G) Runoff (30R) Special (30S) Report (70F) Report (port (Q1)		
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Double Feloction on Termination Report (TER) Double Feloction on The State of Special (12S) Feloction on General (30G) Runoff (30R) Special (30S) Report (Non-election Year Only) (MY) Report for the: Election on The State of Th	July 15	port (Q2) (C) 12-Day PRE-Election		
January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) Special (30G) Report for the: Election on In the State of Report (Non-election Year Only) (MY) POST-Election Report for the: Election on In the State of Runoff (30R) Special (30S) Report for the: Election on In the State of DC Covering Period In the State of DC Termination Report In the State of D	October 15	Report for the	: Convention (12C)	Special (12S)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) The post of the: The post of the period in the post of the period (TER) Termination Report (TER) The post of the post of the period (TER) The post of the	January 31	FI		III tile
Termination Report (TER) Election on 11 04 2014 in the State of DC 5. Covering Period 10 16 2014 through 11 24 2014 Election on 11 04 2014 Through 11 24 2014 Election on 11 04 7 2014 Election on 11 10 04 7 20	July 31 Mid-\ Report (Non-	Year (d) 30-Day election (AY) POST-Election		Runoff (30R) Special (30S)
Covering Period 10 16 2014 through 11 24 2014 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 Mr Edward F Coyle Signature of Treasurer Mr Edward F Coyle [Electronically Filed] Date Office Use FEC FORM 3X Rev. 12/2004		Report	M = M / D = D	in the
Type or Print Name of Treasurer Mr Edward F Coyle [Electronically Filed] Date FEC FORM 3X Rev. 12/2004	5. Covering Period			
Signature of Treasurer Mr Edward F Coyle [Electronically Filed] Date	I certify that I have exami	ned this Report and to the best	of my knowledge and belief it	is true, correct and complete.
Signature of Treasurer Mr Edward F Coyle [Electronically Filed] Date 05 06 2015 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office Use FEC FORM 3X Rev. 12/2004	Type or Print Name of Tre	easurer Mr Edward F Coyle		
Office Use FEC FORM 3X Rev. 12/2004	Signature of Treasurer	Mr Edward F Coyle	[Electronically Filed]	
Use Use Rev. 12/2004	NOTE: Submission of false,	erroneous, or incomplete informa	ation may subject the person sign	ing this Report to the penalties of 2 U.S.C. §437g.
t table to the terminal termin	Use			

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PROTECTING AMERICA'S RETIREES 10 16 2014 24 2014 Report Covering the Period: 11 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 11065.16 January 1, 2014 (b) Cash on Hand at 5705.30 Beginning of Reporting Period..... 89000.00 14000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 19705.30 100065.16 6(a) and 6(c) for Column B)..... 13600.00 93959.86 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 6105.30 6105.30 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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)

Write or Type Committee Name

PROTECTING AMERICA'S RETIREES

I. Receipts		COLUMN B		
	I. Receipts COLUMN A Total This Period			
tributions (other than loans) From:				
Individuals/Persons Other				
	14000.00	89000.00		
(i) Itemized (use Schedule A)	14000.00	30000.00		
(ii) Unitemized	, 0.00	0.00		
Lines 11(a)(i) and (ii)	, 14000.00	89000.00		
Political Party Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
Totals to Line 33, page 5)▶	14000.00	89000.00		
y Committees	0.00	0.00		
oans Received	0.00	0.00		
n Repayments Received	0.00	0.00		
ets To Operating Expenditures				
unds, Rebates, etc.)				
ry Totals to Line 37, page 5)	0.00	0.00		
inds of Contributions Made				
ederal Candidates and Other				
	0.00	0.00		
·				
dends, Interest, etc.)sfers from Non-Federal and Levin Funds	0.00	0.00		
Non-Federal Account				
(from Schedule H3)	0.00	0.00		
Levin Funds (from Schedule H5)	0.00	0.00		
Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	Than Political Committees (i) Itemized (use Schedule A)	Than Political Committees (i) Itemized (use Schedule A)		

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		
Operating Expenditures: (a) Allocated Federal/Non-Federal		Juichau Tear-to-Date		
Activity (from Schedule H4)		0.00		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	-78170.73	2189.13		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	-78170.73	2189.13		
Transfers to Affiliated/Other Party				
CommitteesContributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	65456.58	65456.58		
(use Schedule E) Coordinated Party Expenditures	00400.00	00400.56		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made Refunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(0201 00 1 100)				
(d) Total Contribution Refunds	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements	26314.15	26314.15		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)	0.00	0.00		
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely	2.22	0.00		
With Federal Funds(c) Total Federal Election Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	13600.00	93959.86		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	13600.00	93959.86		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	14000.00	89000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14000.00	89000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	-78170.73	2189.13
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-78170.73	2189.13

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

					PAGE	:	6	OF	16		
	(check only one)										
		X	11a		11b		11c		12		
			13		14		15		16	;	17

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.

ΟI	tor commercial purposes, other than using the	name and address of any political committee to	SOIIGH COMMUNIS HOM SUCH COMMUNICE.
\rangle	NAME OF COMMITTEE (In Full) PROTECTING AMERICA'S RET	TIREES	
۸.	Full Name (Last, First, Middle Initial) Adam R Bronfman Mailing Address 2300 Lucky John Dr City Park City FEC ID number of contributing federal political committee. Name of Employer Mighty Bum LLC Receipt For: Primary General Other (specify)	State Zip Code UT 84060 C Occupation Consultant Aggregate Year-to-Date ▼	Date of Receipt 10 20 2014 Transaction ID: SA11AI.4312 Amount of Each Receipt this Period 14000.00 Contribution
3.	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D.	Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
s	UBTOTAL of Receipts This Page (optional)	>	14000.00
T	OTAL This Period (last page this line number o	nly)	14000.00

SC	CHEDULE B (FEC Form 3X)	F05 !!	INIT A	NE NUMBER: PAGE 7 OF 16								
	EMIZED DISBURSEMENTS	Use separate schedule(s)	(check						LIAC	⊿ ∟	. (J1 10
	LIVIIZED DISBURSEIVIEN IS	for each category of the		-	' — — —				25	<u>26</u>		
		Detailed Summary Page		27	28a		28b	H	28c	H	29	30
An	y information copied from such Reports and Stater	nents may not be sold or use	ed by any r	person	for the	pur	pose (of so	liciting	ı con	tribu	tions
	for commercial purposes, other than using the nan											
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	PROTECTING AMERICA'S RETIR	REES										
$oldsymbol{oldsymbol{oldsymbol{\angle}}}$												
	Full Name (Last, First, Middle Initial)				D-4-	. D.						
A.	The Campaign Workshop				Date of	יי טופ						
	Mailing Address 1660 L St NW			-	M = M	/		4	/ Y	20°		Y
	#506				111			. T		20		
		State Zip Code			T		ion In		245	1224		
	Washington	DC 20036			Trans	acti	ion ID	: SE	521B.4	+324		
	Purpose of Disbursement Design, Production, On-Line Media Buys			\neg								
	Candidate Name				Amount	t of	∟ach	Disb	ursen	nent 1	tnis I	eriod
	Candidate Name		Category/	/						-7	8170	.73
	Office Sought: House Disburser	ment For:	Type	_		-	7		7			
	Senate	Primary General										
	President	Other (specify) ▼										
_	State: District:											
	Full Name (Last, First, Middle Initial)											
B.					Date of	f Dis	sburse	emen	t			
					M = M	1	D	D	/ Y	Y	Υ	Υ
	Mailing Address				ı,			L	_	_		
	City	State Zip Code										
	Only Otale Zip Gode											
	Purpose of Disbursement			\neg	_							
				Amount of Each Disbursement			nent 1	this I	Period			
	Candidate Name		Category/									
	Office Sought: House Disburser	mont For:	Туре		7							
	Senate Dispurser	Primary General										
	President	Other (specify)										
	State: District:	V 1 - 37 - ₩										
_	Full Name (Last, First, Middle Initial)											
C.					Date of	f Dis	sburse	emen	t			
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	Mailing Address								L		_	
	City	State Zip Code										
	Ony .	State Zip Code										
	Purpose of Disbursement			\exists								
					Amount	t of	Each	Disb	ursen	nent 1	this I	Period
	Candidate Name		Category/	/		-	-	_	_			-
	000	Type				7		7				
	Office Sought: House Disburser											
	Senate President	Primary General Other (specify) ▼										
	State: District:	Calci (apooliy)										
							_	_	_			_
s	UBTOTAL of Disbursements This Page (optional)		1					_	_	-78	8170	.73
Ě				_	=	÷	,	-	7			-
Lτ	OTAL This Period (last page this line number only)									-78	8170	.73

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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 8 OF 16					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	e(s) (check only one)					
	Detailed Summary Page	21b 27	22 23 24 25 28a 28b 28c X 29	26 30k			
Any information copied from such Reports and Statem	anta may not be sald as						
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
PROTECTING AMERICA'S RETIR	EES						
/ Full Name (Last, First, Middle Initial)		ı					
A. The Campaign Workshop			Date of Disbursement				
			M M / D D / Y Y Y	Y			
Mailing Address 1660 L St NW			11 24 2014				
#506 City S	tate Zip Code						
	DC 20036		Transaction ID : SB29.4335				
Purpose of Disbursement							
On-Line Media Buy, design and production			Amount of Each Disbursement this	Period			
Candidate Name	"	Category/	2631	4.15			
Office Sought: House Disbursem	ent For:	Туре					
	Primary General						
President	Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)			5 . (5)				
В.			Date of Disbursement				
Mailing Address			M M / D D / Y Y Y	Y			
				_			
City S	tate Zip Code						
Purpose of Disbursement							
. a.pood of Diobaloumont			Amount of Each Disbursement this	Period			
Candidate Name		Category/					
		Type					
Office Sought: House Disbursem							
	Primary ☐ General Other (specify) ▼						
State: District:	□						
Full Name (Last, First, Middle Initial)							
C.			Date of Disbursement				
			M M / D D / Y Y Y	Y			
Mailing Address							
City S	tate Zip Code						
Purpose of Disbursement	Ti						
Candidate Name			Amount of Each Disbursement this	Period			
		Category/ Type					
Office Sought: House Disbursem	ent For:		7				
	Primary General						
	Other (specify)						
State: District:							
SUBTOTAL of Disbursements This Page (optional)			2631	4.15			
The or Disbursements This Fage (optional)		·····					
TOTAL This Period (last page this line number only).			2631	4.15			

1 = 1	MIZED INDEPENDENT EXPENDITURES			FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full) ROTECTING AMERICA'S RETIREES			FEC IDENTIFICATION NUMBER ▼ C C00483883
Chec	ck if 24-hour report 48-hour report New report	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
	Full Name of Payee Jennie Blackton Philhower Mailing Address		Da	ate of Public Distribution/Dissemination
].	2118C North Glenoaks Blvd		Am	mount
- 1	City State Burbank CA	Zip Code 91504		2000.00 nsaction ID : SE.4315 ate of Disbursement or Obligation
	Purpose of Expenditure Digital Media Buy	Category/ Type 004		10 / 24 / 2014
	Name of Federal Candidate ROBERT BISHOP	Support Oppose	Office Sou	ought: House District: 01 esident Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought	2000.00	Disbursen 2014	ment For: Primary
	Full Name of Payee Jennie Blackton Philhower Mailing Address 2118C North Glenoaks Blvd			ate of Public Distribution/Dissemination M M M / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Burbank CA	Zip Code 91504		11600.00 Insaction ID : SE.4320 ate of Disbursement or Obligation
	Purpose of Expenditure Media Buy	Category/ Type 004	$\exists \mid_{_}$	10 / 27 / 2014
	Name of Federal Candidate ROBERT BISHOP	Support Oppose		esident Senate State: UT
	Calendar Year-To-Date Per Election for Office Sought	13600.00	Disburser 2014	ment For: Primary
·	a) SUBTOTAL of Itemized Independent Expenditures b) SUBTOTAL of Unitemized Independent Expenditures			13600.00
·	c) TOTAL Independent Expenditures			
Wİ	Inder penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.	•		· · · · · · · · · · · · · · · · · · ·
		ically Filed] Date	e 05	06 2015
	Signature			

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PROTECTING AMERICA'S RETIREES

		PAGE FOR LIN		OF OF FO	
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			7		
			7		

			C C00483883
	New report An	nends repoi	rt filed on Man / Dab / Yayayay
Full Name of Payee The Campaign Workshop			Date of Public Distribution/Dissemination
, , ,			10 19 7 2014
Mailing Address 1660 L St NW			Amount
#506			
City State	Zip Code		1143.61
Washington DC	20036		Transaction ID : SE.4286 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Ad Buys	Category/ Type		10 19 / 2014
Name of Federal Candidate		Support	Office Sought: X House District: 02
MARTHA E MS. MCSALLY	X	Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	1143.6	1	Disbursement For: Primary General 2014 Other (ansaits)
	7		Other (specify)
Full Name of Payee The Campaign Workshop			Date of Public Distribution/Dissemination 10 19 2014
Mailing Address 1660 L St NW			Amount
#506			7.110011
City State	Zip Code		2643.19
Washington DC	20036		Transaction ID : SE.4288 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Ad Buys	Category/ Type		10 19 7 2014
Name of Federal Candidate	X	Support	Office Sought: X House District: 02
RONALD BARBER		Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	3786.8	30	Disbursement For: Primary
	,		Curier (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures			3786.80
(b) SUBTOTAL of Unitemized Independent Expenditures			>
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent expe with, or at the request or suggestion of, any candidate or at party committee) any political party committee or its agent.			
Mr Edward F Coyle	[Electronically Filed]	Date	05 06 2015
Signature		Dale	

PAGE	11	OF	16 DRM 3X
FOR L	INE 24	OF FO	DRM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) PROTECTING AMERICA'S RETIREES	FEC IDENTIFICATION NUMBER ▼
I NOTECTING AWIENIONS RETIREES	C C00483883
Check if 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee The Campaign Workshop	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 / 2014
Mailing Address 1660 L St NW	Amount
#506 City State Zip Code	2566.98
	Transaction ID : SE.4289 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Ad Buys Category/ Type 004	10 19 / 2014
Name of Federal Candidate Support Office	Sought: X House District: 01
ANN KIRKPATRICK	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	rsement For: Primary X General Other (specify) ▶
Full Name of Payee	
The Campaign Workshop	Date of Public Distribution/Dissemination 10 19 2014
Mailing Address 1660 L St NW	Amount
#506 City State Zip Code	1131.84
Washington DC 20036	Transaction ID : SE.4290 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Ad Buys Category/ Type 004	10 19 2014
Name of Federal Candidate Support Office	Sought: X House District: 01
ANDY HON. TOBIN Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	orsement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3698.82
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Mr Edward F Coyle [Electronically Filed] Date	5 06 2015
Signature	

PAGE	12	OF	16
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) PROTECTING AMERICA'S RETIREES	FEC IDENTIFICATION NUMBER ▼
FROTECTING AMERICAS RETIREES	C C00483883
Check if 24-hour report 48-hour report New report Amends report filed on	n M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1660 L St NW	Amount
#506	2000 04
City State Zip Code Washington DC 20036 Tr	2650.61
	ransaction ID : SE.4295 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Ad Buys Category/ Type 004	10 19 / 2014
Name of Federal Candidate Support Office S	Sought: X House District: 09
KYRSTEN SINEMA Oppose P	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburs 2650.61 2014	ement For: Primary General
	Other (specify) ▶
Full Name of Payee The Campaign Workshop	Date of Public Distribution/Dissemination 10 19 2014
	Amount
#506 City State Zip Code	1125.19
Washington DC 20036 Ti	ransaction ID : SE.4297
Purpose of Expenditure	Date of Disbursement or Obligation
On-Line Ad Buys On-Line Ad Buys Odd Type O04	10 19 2014
Name of Federal Candidate Support Office S	Sought: X House District:09
WENDY ROGERS Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburs 2014	sement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3775.80
(-,	
(c) TOTAL Independent Expenditures	7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Mr Edward F Coyle [Electronically Filed] Date	06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PROTECTING AMERICA'S RETIREES

PAGE 13 OF 16 FOR LINE 24 OF FORM 3X		
FEC IDENTIFICATION NUMBER ▼		
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ction ID : SE.4299 of Disbursement or Obligation		
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t: House District:		
ent X Senate State: MI		
t For: Primary X General		
other (specify) ▶		
of Public Distribution/Dissemination		
int		
7796.44		
of Disbursement or Obligation		
10 / 19 / 2014		
nt: House District:		
ent Senate State: MI		
nt For: Primary X General		
t For: Primary General		
Other (specify)		
Other (specify)		
Other (specify)		

Check if 48-hour report Amends report filed on 24-hour report New report Full Name of Payee Date The Campaign Workshop Mailing Address 1660 L St NW Amou #506 City State Zip Code DC Washington 20036 Transa Date Purpose of Expenditure Category/ On-Line Ad Buys 004 Type Name of Federal Candidate Office Sough X Support **GARY PETERS** Oppose Preside Disbursemen Calendar Year-To-Date 2014 18183.55 Per Election for Office Sought 0 Full Name of Payee Date The Campaign Workshop Mailing Address 1660 L St NW Amou #506 City State Zip Code Washington DC 20036 Transa Date Purpose of Expenditure Category/ 004 On-Line Ad Buys Type Name of Federal Candidate Support Office Sough TERRI LYNN LAND Oppose Presid Disbursemen Calendar Year-To-Date 25979.99 2014 Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Mr Edward F Coyle [Electronically Filed] 05 06 2015 Date Signature

PAGE	14	OF	16 ORM 3X
FOR L	INE 24	OF F	ORM 3X

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) PROTECTING AMERICA'S RETIREES	FEC IDENTIFICATION NUMBER ▼
I NOTEOTING AWILINIONS RETINEES	C C00483883
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	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 2014
Mailing Address 1660 L St NW	Amount
#506 City State Zip Code	3480.11
Washington DC 20036 Tr	ransaction ID : SE.4325 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Media Buy, design and production Category/ Type 004	11 24 / 2014
Name of Federal Candidate Support Office S	Sought: X House District: 01
ANN KIRKPATRICK	resident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburse 2014	ement For: Primary X General Other (specify) ▶
Full Name of Payee	
The Campaign Workshop	Date of Public Distribution/Dissemination 10 19 2014
	Amount
#506 City State Zip Code	1456.06
11 doi: 11 glott	ransaction ID : SE.4327 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Media Buy, design and production Category/ Type 004	11 24 2014
Name of Federal Candidate Support Office S	Sought: X House District: 01
ANDY HON. TOBIN Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburse 2014	ement For:
(a) SUBTOTAL of Itemized Independent Expenditures	4936.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 1 7 1 1 7 1 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Mr Edward F Coyle [Electronically Filed] Date	/ 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

PAGE 15 OF 16 FOR LINE 24 OF FORM 3X		
FEC IDENTIFICATION NUMBER ▼		
C C00483883		
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f Public Distribution/Dissemination		
10 19 2014		
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tion ID : SE.4328 f Disbursement or Obligation		
11 24 7 2014		
: X House District: 02		
nt Senate State: AZ		
For: Primary X General		
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f Public Distribution/Dissemination 10 19 2014 11 1442.32 Section ID: SE.4329		
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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
PROTECTING AMERICA'S RETIREES	C C00483883
Check if 24-hour report 48-hour report New report Amends report filed or	M M / D D / Y Y Y Y Y
	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1660 L St NW	
#506	Amount
City State Zip Code	3363.25
	ansaction ID : SE.4328 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Media Buy, design and production Category/ Type 004	11 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	lought: X House District: 02
RONALD BARBER	resident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disburse 2014	ement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 2014
Mailing Address 1660 L St NW	Amount
#506	
City State Zip Code	1442.32
Tradinington = 5 = 2000	ransaction ID: SE.4329 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Media Buy, design and production Category/ Type 004	11 24 2014
Name of Federal Candidate Support Office S	Sought: X House District: 02
MARTHA E MS MCSALLY	resident Senate State: AZ
0500.07	ement For: Primary X General
Per Election for Office Sought 8592.37	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	4805.57
(a) SOBTOTAL OF HOMEZON Macportation Experimental Experim	400.57
(b) SUBTOTAL of Unitemized Independent Expenditures	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(c) TOTAL Independent Expenditures	1 7 1 7 1 7
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Mr Edward F Coyle [Electronically Filed] Date 05	/ 06 / Y Y Y Y Y Y Y
Signature	

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SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 16 OF 16 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	<u> </u>
PROTECTING AMERICA'S RETIREES	FEC IDENTIFICATION NUMBER ▼
	C C00483883
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee The Campaign Workshop	Date of Public Distribution/Dissemination
Mailing Address 1660 L St NW	Amount
#506	
City State Zip Code	3408.45
Washington DC 20036	Transaction ID : SE.4330 Date of Disbursement or Obligation
Purpose of Expenditure On-Line Media Buy, design and production Category/ Type 004	11 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: X House District: 09
KYRSTEN SINEMA Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disk 201-	bursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
The Campaign Workshop	10 19 2014
Mailing Address 1660 L St NW	Amount
#506	10100
City State Zip Code Washington DC 20036	1464.98 Transaction ID : SE.4331
Purpose of Expenditure	Date of Disbursement or Obligation
On-Line Media Buy, design and production Category/ Type 004	11 / 24 / 2014
Name of Federal Candidate Support Office	ce Sought: X House District: 09
WENDY ROGERS Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disl 201	bursement For: Primary X General Other (specify) ▶
	Unier (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	4873.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	65456.58
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •

Mr Edward F Coyle [Electronically Filed] 05 06 2015 Date Signature