To Whom It May Concern:

Enclosed is the year-end report for the Think Finance, Inc. PAC. As of now, the Think PAC has yet to distribute, borrow, or accept any funds. I recognize the tardiness of this filing, however up to this point the PAC has been completely inactive. Any activity by the PAC this quarter is promised to be reported in a timely manner.

Sincerely,

Haley Vondemkamp

Custodian of Records, Think PAC



4031201420

FEC FORM 3X

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

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Office Use Only

1. NAME COMMI	OF ITTEE (in full)	TYPE OR	PHINI W		nple: If type the lines.	oing, type	12FÉ	4M5	* 1 * 1	
Think Fi	nance, Inc. PA	Ç L			للللل	111			11. 1	
		1			<u> </u>		<u> </u>	<u> </u>		
ADDRESS (number and street)	4150	International	Plaza	<u> </u>					لىسى
tha	eck if different in previously ported. (ACC)	Suite	400				LT _i X]	<u> 7610</u>	9 <u> </u>	
2. FEC ID	DENTIFICATION NU	JMBER ▼	CIT	Υ▲			STATE A	\	ZIP COI	DE 🛦
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4. TYPE (Choose	OF REPORT		oort िंी ∍On: ছ⊴	20 (M2) 20 (M3)		May 20 (M5 Jun 20 (M6)	, · · ,	Aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Qu	arterly Reparts:		.5 "	, ,			فادفا	Oct 20 (M10)	X	(Non-Election Year Only) Jan 31 (YE)
•	April 15 Quarterly Report (Q	11) -	. 15 1	20 (M4) 字字	<u> </u>	Jul 20 (M7)			1 , 21-1	
	July 15 Quarterly Report (Q	(c)	12-Day PRE-Election	<u>.</u>	Primary (12		ta:'	neral (12G)		Runoff (12R)
	October 15 Quarterly Report (C	(3)	Report for the:		Convention		'i .	ecial (12S)		
YE	_ January 31 - Year-End Report (Y	E)	Electio	n on	Parameter State	י מיבימי. אוריים מיבימי	i vi vat Barran	V of V	in the State of	A hand
	July 31 Mid-Year Report (Non-election Year Only) (MY)	n (d)	30-Day POST-Election		General (3	0G) [Fi Ru	noff (30R)		Special (30S)
ι :	Termination Report (TER)		Report for the:	n on	M - M	/ (10 '0') /	11	ville ville - dayal	in the State of	r Kalanda Kalanda
5. Coverin	g Period 11	M / 101	2013	. weighting	through	12	′ '3	1 201	3	
I certify that	I have examined th	is Report a	and to the best of	my knov	vledge and	belief it is to	rue, corre	ct and comple	te.	
Type or Prin	nt Name of Treasure	Briar	Yates	1						
Signature of	Treasurer	3/1/	NO C				– Date	3 ′ 2		2014
	nission of false, errone	eous, or inc	complete information	n may sul	bject the pe	erson signing	this Repo	t to the penalti	es of 2 L	J.S.C. §437g.
	ffice Jse			1					FOR Rev. 12/20	

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Think Finance, Inc. PAC

Report Covering the Period:

From:

11 13

′2013

To:

12 "

'31' '

2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,	·	g stander til han skriver i heldere i Sæblige økkelske økkelse stander
	(b) Cash on Hand at Beginning of Reporting Period	000 :	
	(c) Total Receipts (from Line 19)	000	The A-1 September of the County of the Count
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	0.00 b	
	Total Disbursements (from Line 31)	0.00	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	000	peurscenant e betaelant teite en , Le la lezente telt parte e de sta
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on 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 809-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

Page 3

Write or Type Committee Name Think Finance, Inc. PAC

FEC Form 3X (Rev. 06/2004)

Report Covering the Period:	From:	11 13 Y2013	То:	12 31 2013
-----------------------------	-------	-------------	-----	------------

1. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	THE COURT OF TWENTY AND CONTRACTOR	Property of the second second
(i) Itemized (use Schedule A)	0,00	3
	000	
(ii) Uniternized	and the first the telephone of the first the second	
(iii) TOTAL (add	000	
Lines 11(a)(i) and (ii)▶	romana e e e e e e e e e e e e e e e e e e	
(b) Political Party Committees	0 00	The second secon
(c) Other Political Committees		
(such as PACs)	0_00	
(d) Total Contributions (add Lines	A real of the PM Leaf person 28 to the Court of Table	Carp by the notice before the con-
11(a)(iii), (b), and (c)) (Carry	A CHAIR DONG HEART PROTECTS AND SHADERS	gradia i secalada democración de la composición del composición de la composición de
Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other	000	
		in the state of th
Party Committees	0_00_	
13. All Loans Received	<u> </u>	The first of the f
	the many the property of the content	Emiliah serita di serita in di serita serita di se
14. Loan Repayments Received	ົດດິດດ	
15. Offsets To Operating Expenditures	్ స్టార్ జన్నాన్ సర్వజమీలు మరియాలో అంటే మార్చికోంటాలో	<u>Contractions to the Charles to the Contraction of </u>
(Refunds, Rebates, etc.)		
· · · · · · · · · · · · · · · · · · ·		- 「「「中の「AAMSERTTTON」」は、AUTOGOTON ()。 - B
(Carry Totals to Line 37, page 5)	0.00	ر المنظمين والمنظم المنظمين والمنظمين والمنظمين والمنظمين والمنظمين والمنظمين والمنظمين والمنظمين والمنظم والم
16. Refunds of Contributions Made	•	
to Federal Candidates and Other	o provincia de la compania de la co	o yerle Abelia e di
Political Committees		The management of the state of
17. Other Federal Receipts		Consider the latest flags of the Consider of t
(Dividends, Interest, etc.)	0.00	and the second of the second o
18. Transfers from Non-Federal and Levin Fund	ds in the control of	
(a) Non-Federal Account	present of a PANETHAMPTARED COROLEGE	Contemporary of the contem
(from Schedule H3)	0.00	
	් දෙව්වා ප්රවේත ප්රතිර වෙව්වා සංඛ්ය දිනිවාව මත කරම ප්රවේත ප්රවේඛ දෙවර සහ දෙව්වා දෙව්වා ප්රවේඛ වෙම්වා වෙව්වා සම්බන්ධ වෙම්වා සම්බන්ධ වෙම්වා සම්බන්ධ	 Vicense i Dusconer (1) e Desconer (1) i i i i i i i i i i i i i i i i i i i
(b) Lovin Fundo (from Sahadula HE)	nnn	
(b) Levin Funds (from Schedule H5)	000	- Palada Baranan di Araban da Maria da Araban da A
(c) Total Transfers (add 18(a) and 18(b))	000	Control of the Contro
10. Total Passints (add Lines 11/d)		
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	000	
20. Total Federal Receipts		Copyright Harris Copyright Copyright
(subtract Line 18(c) from Line 19)▶		
	i disenti delle ete i falle di disenti di TELE	

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:	Total Tills Fellou	Calendar Year-10-Date
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)	to segment of the property processors and the contract of the	na katalog maja sagaran na jarah sagaran n
	(i) Federal Share	0.00	
	(ii) Non-Federal Share	000	ing the second section of the s
	(b) Other Federal Operating		
	Expenditures		The Company of the Co
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	_	in filipina ngali dan kamban amban in makansa be Ma
22.	Trænsfers to Affiliated/Other Party		<u> </u>
	Committees	0.00	
23.	Contributions to Federal Candidates/Committees and Other Political Committees		
24.	Independent Expenditures		
25.	(use Schedule E) Ceordinated Party Expenditures (2 U.S.C. §441a(d))	, , , , , , , , , , , , , , , , , , , ,	
	(use Schedule F)	, <u>, , , , , , , , , , , , , , , , , , </u>	। । বিভাগ নিজ্ঞান কৰিছে ক্ৰেছিল বিভাগ কৰিছেল বিভাগ কৰিছেল কৰিছে বিভাগ কৰিছেল বিভাগ কৰিছেল কৰিছেল কৰিছেল বিভাগ কৰিছেল বি
26.	Loan Repayments Mede	<u> </u>	
27. 28.	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other	0. 00	
	Than Political Committees	0.00	
	(b) Political Party Committees	000	en (j. 1915) - Araban Maria, Mari 1918) - Maria, Mari
	(c) Other Political Committees	000	o mira esambir miran bende o o cilo. O li
	(such as PACs)	1 31 12 1	The second of th
	(d) Total Contribution Refunds	em nem nyul enga krasilek kalendari na krisilingi.	ga nears income o nomber actions of the second
	(add Lines 28(a), (b), and (c))▶	1	i de designamente de America, el cita de la composita de la co
29.	Other Disbursements	000	to the common of the common to the common of
30	Federal Election Activity (2 U.S.C. §431(20)	4	
•••	(a) Allocated Federal Election Activity	,	
	(from Schedule H6)		Grant the committee of the second
	(i) Federal Share	0. 00.	
	(ii) "Levin" Share	0.00	and the company of th
	(b) Federal Election Activity Paid Entirely	0.00	- 불명 설계(1) 시설 (1) 시설 (
	With Federal Funds	0. 00	
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
	Enies octaffi), octaffi) and octo))	000 de la compansión de	i del tradición de la percentación de la composición del composición del composición de la composición
31.	Total Disbursements (add Lines 21(c), 22,	्राच्या अञ्चलकृति कृति कृति <mark>भूति सम्</mark> वर्गना स्थानिक	en egen geleg magyar gelektrasagus kernelye elemente e
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0 00	
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	्रा अन्यक्षा अवस्थानम् । या वर्षे अन्य	्राह्म स्थापना ५ व स्थापना स्थापना ।
	from Line 31)	0 00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 5
III. Net Contributions/Operating Expenditures	COLUMN A Total This Petiod	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0 00	The second of th
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0, 00	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	000	
37. Offsets to Operating Expenditures	0- 00	
(from Line 15, page 3)	000	and the second s
(subtract Line 37 from Line 36)		The state of the s

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and a	y not be sold or used by any peddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Think Finance, Inc. PAC		(NO COM	TRIBUTIONS MADE TO DATE)
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M / D D / Y Y Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	[C	e i i na proporti sum Proporti i e i i suma di sensa	1
Name of Employer	Occupation		
Receipt For: Primary	्राह्म जिल्लामा स्था स्थ	Year-te-Date ▼ Shelds a serve indich winder over g * outber to set to set to serve outber to serve g	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			FIMINAL A POLO PARTO A ARCHITECTURE
City	State	Zip Code	Amount of Each Page 14 Map David
FEC ID number of contributing federal political committee.		gr eg nyergala g i ye i De damenia Dario	Amount of Each Receipt this Period
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	10.74	Year-to-Date ▼ and a row to the control of the co	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M M Y O O O Y Y Y Y Y Y
City	State	Zip Code	Amount of Each Receipt this Period
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Name of Employer	Occupation		
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SUBTOTAL of Receipts This Page (optional)			0 00
TOTAL This Peripd (last page this line number	only)		. 0. 00

SCHEDULE B (FEC Form 3X)

ITEMIZED DISPUISSEMENTS	Use separate schedule(s)		R LINE eck only	NUMBER (one)	:		ட	AGE		<u> </u>	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	F	23 28b	24 28		25 29		26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used	by a	ny pers	on for the	puŋ ntrih	oose o	of solicit	ing co	ntributi	ons e.	
NAME OF COMMITTEE (In Full)	- Indiana or any promise						- 3, 0				
Think Finance, Inc. PAC		(NC	o coi	NTRIB	UTI	ION:	S MA	DE	TO D	AT	E)
Full Name (Last, First, Middle Initial)				Det	. ~.						
A. N/A				Date o			ment			· ··	
Mailing Address	Aug.,			W M						••	
City	tate Zip Code										
Purpose of Disbursement			2.11.11.18 27.11.18 13.11.18	Amoun	t of	Each	Disburs	ement	this P	eriod	
Candidate Name		Cate Typ									
	ent For: Primary General Other (specify)			-					·		
Full Name (Last, First, Middle Initial)											-
B.				Date o			ment	Yi ≙iY	γ·	y ']	
Mailing Address							erij i				
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Purpose of Disbursement	Ę.		7.77.1			<u>.</u> .	~ !!				
Candidate Name Category				Amount of Each Disbursement this Period							
	ent For: Primary General Other (specify)		- *	6 KT 12 TL	·4—	. ∉ ∏'	.***5.7	<u> </u>			•
Full Name (Last, First, Middle Initial)				_	,						
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Candidate Name			gory/		·	···.·····	Disburs				
	ent For: Primary General Other (specify)		,	1 7-Ni - 21		₹ 7000	. (a. 7	:		, ,	-
SUBTOTAL of Disbursements This Page (optional)			▶	.1					0	00	
TOTAL This Period (last page this line number only).			····· •	1.			- 13 - 1. - 13 - 13				· !

DANS		Use separate schedule(s)	PAGE OF
		for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3
ME OF COMMITTEE (In Full) Think Finance, Inc. PAC			
LOAN SOURCE Full Name (La	ast, First, Middle Initial)	Ele	ection: Primary
Mailing Address			General Other (specify) ▼
City	State ZIF	² Code	
		nt To Date Balance	
Date Incurred	Date	Due Interest Rate	Secured:
List All Endorsers or Guaranto			
1. Full Name (Last, First, Midd	le Initial)	Name of Employer	
Mailing Address		Occupation	
		Amount production a same of	CONTROL OF THE STORY OF THE STORY
City	State ZIP Code	Guaranteed Outstanding:	en colouration to take at the S
		Guaranteed	
City 2. Full Name (Last, First, Middle Mailing Address		Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Mailing Address	e Initial)	Guaranteed Outstanding: Name of Employer Occupation Amount	
2. Full Name (Last, First, Middle Mailing Address City	e Initial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	en valige to leve of
2. Full Name (Last, First, Middle Mailing Address	e Initial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
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2. Full Name (Last, First, Middle Mailing Address City 3. Full Name (Last, First, Middle M	e Initial) State ZIP Code	Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	
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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SUBTOTALS This Period This Page (optional).....

TOTALS This Period (last page in this line only).....

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

Supplemen	tary for
Information	found on
Page	of Schedule

С Federal Election Commission, Washington, D.C. 20463 NAME OF COMMITTEE (In Full) **FEC IDENTIFICATION NUMBER** Think Finance, Inc. PAC C 00551655 **LENDING INSTITUTION (LENDER)** Amount of Loan Interest Rate (APR) នៃសមាណមាល់មាន មានអាចស្រាស់មាន ប្រកាស់ កម្មវិ Full Name N/A Elelle De O Colletter of Mailing Address Date Incurred or Established City State Zip Code Date Due A. Has loan been restructured? No If yes, date originally incurred B. If line of credit. Total Outstanding Amount of this Draw: Balance: h other the Maritan Co. The Harring with and C. Are other parties secondarily liable for the debt incurred? (Endorsers and guarantors must be reported on Schedule C.) What is the value of this collateral? D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, Bright B. Cart. True Comp. Lett. Co. 18 stocks, accounts receivable, cash on deposit, or other similar traditional collateral? Very large to the transfer of the state of t Yes If yes, specify: Does the lender have a perfected security interest in it? No Yes E. Are any future contributions or future receipts of interest income, pledged as What is the estimated value? collateral for the loan? No Yes If yes, specify: group along a saportura porazianco il sa Location of account: A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Address: Date account established: 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. G. COMMITTEE TREASURER Typed Name Brian Yates 03 ′ 21° ′ ′2014′ Signature Attach a signed copy of the loan agreement TO BE SIGNED BY THE LENDING INSTITUTION: To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan. **AUTHORIZED REPRESENTATIVE** DATE Haley Vondemkamp Typed Name Title

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE OF FOR LINE NUMBER: П9 (check only one)

xcluding Loans			1	bered line)				
NAME OF COMMIT Think Fina	TEE (In Full) ance, Inc. PAC							
A. Full Name (I	ast, First, Middle Initial) of Debtor	r or Creditor		Nature of D	ebt (Purpose):			
N/A								
Mailing Address								
City Sta	ate	Zip Code						
Outstanding E	lalance Beginning This Period							
	nt Incurred This Period	Payment This Period	11. 17/7 37 1. 1	Outstandi	ng Balance at Close of This Period			
	1.	ాతు కారం చిర్వాణికి అయిగా కారణ కారణ మాట్లా సంగామం చిర్వాణికి అయ్యా అహ్హాయి మాట్లు చేసి	1.		raParku (10. Parkuntur)			
	ast, First, Middle Initial) of Debtor				ebt (Purpose):			
Mailing Address								
City Sta	ate	Zip Code						
Amoun		Payment This Period						
	ast, First, Middle Initial) of Debto				ebt (Purpose):			
Mailing Address		. 4						
City		State Zip Code						
	dalance Beginning This Period							
Amoun	t Incurred This Period	Payment This Period	ou grand		ng Balance at Close of This Perio			
3.	Section 18 Section 19	ar ellar ell <mark>es Des de selle d'Erréssa ell</mark> a dil.	[: - <i>[</i>] <u>-</u>		ar v in the State in the state			
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4) ADD 2) and 3)	and carry forward to appropriate	line of Summary Page (last page or	nly) ▶		0 00			

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ 00551555 Think Finance, Inc. PAC X New report Amends report filed on Check if 24-hour report 48-hour report Full Name of Payee Date of Public Distribution/Dissemination / D D / N/A Mailing Address Amount City Zip Code State المرابعة المراوي والمنطوع الأواجها أراب والمراوط الأرواء والمواط والمطابعين Date of Disbursement or Obligation Purpose of Expenditure M - W - V - V - V Category/ Type Car San Com Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: **Primary** General Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ Tradization of Domination Full Name of Payee Date of Public Distribution/Dissemination MINM I / [D' C D] / [Y VY TY TY Mailing Address Amount Zip Code City State Date of Disbursement or Obligation Purpose of Expenditure D - D / Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: vil anilamikanilansikansikanilanila Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other_(specify) وير مارا هاي در سيري مسير والأسهان ويواري الأهم ما ميزان ميسيان الساط (۱۰ ما ما ما (a) SUBTOTAL of Itemized Independent Expenditures..... (b) SUBTOTAL of Uniternized 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. nature

PAGE

SCHEDULE F (FEC Form 3X) ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OF DESIGNATED AGENTS

POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

I BEMALF OF CANDIDATES	FUK FEDI	EHAL OFFIC	E		PAGE	OF
U.S.C. §441a(d))	be used only	by Political Con	nmittees in the (General Election)	FOR LINE 25	OF FORM 3X
ME OF COMMITTEE (In Full) N/A						
s your committee been designated to ma	1	Full Name of Su	bordinate Commi	ittee		
rdinated expenditures by a political party	committee?					
YES NO E6, name the designating committee:	}	Meiling Address				
		J				
	 - -	City		Sta	te ZIP	Code
Full Name (Last, First, Middle Initial) of	Each Payee			Purpose of Expe	enditure	3
Mailing Address						Category/ Type
				Date		
City	State	Zip Code	•) b . / Y .	
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SCHEDULE H1 (FEC Form 3X)

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 Ohly)
- 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)						
Think Finance, Inc. PAC (NO EXPENDITURES, COSTS TO DATE)						
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 or						
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 Public Communications Referencing Party Only						

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

PAGE OF	
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NAME	OF	COM	MITTEE	(In	Full)
_			_	_	

Think Finance, Inc. PAC

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- 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. Fer PACs Gnly: 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 N/A ACTIVITY IS:	FEDERAL %	NONFEDERAL %
Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	n =	%
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %
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ACTIVITY OR EVENT IDENTIFIER ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	FEDERAL %	NONFEDERAL %

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

	PAGE	C	F		
ı	FOR LINE	18a	OF	FORM	зх

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NAM	E OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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iii)	Exempt Activities		in the state of th
	Direct Fundraising (List Activity or Event Ider		
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l	c) Total Amount Transferred For Direct Fundra	ising	Employed in Mark to the Market of the Market
v)	Direct Candidate Support (List Activity or Eve	ent Identifier)	
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TOTAL	This Period (Total Amount Transferred)		Residence of the contract of t

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	OF		
FOR LINE	21a OF	FORM	зх

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Ā.	Full Name (Last, First, Middle Initial)		(140 0	Allocated Astivity or Event:
Α.	ruii Name (Last, First, Middle Imital)			Administrative Fundraising Exempt
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	City State Zip	Code		Public Comm (ref to party only) by PAC
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В.	Full Name (Last, First, Middle Initial)			Allocated Activity or Event:
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	Mailing Address			Voter Drive Direct Candidate Support
	City State Zip	Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		property.	Allocated Activity or Event Year-To-Date
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			Category/ Type	Date
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				Administrative Fundraising Exempt
	Mailing Address			Voter Drive Direct Candidate Support
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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 OF FOR LINE 18b OF FORM 3X

IAME OF A	ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
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ii)	Voter ID	ID	OTER ID
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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)

	PAG	E		OF		
I	FOR	LINE	30a	OF	FORM	ЗХ

ME OF COMMITTEE (In Full) N/A			
A. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity Voter Registration Voter ID	or Event: GOTV Generic Campaign
Mailing Address		Allocated Activity or E	
City State Zip Code	夏州公司的 海	+k 200 k ₹ 0 + 1	Estrollo Maria
Purpose of Disbursement	Category/ Type	Date	DT / TY TY TY WY
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B. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity Voter Registration Voter ID	or Event: GOTV Generic Campaign
Mailing Address		Allocated Activity or E	
City State Zip Code	(Table of the second of the s	<u> </u>	
Purpose of Disbursement	Category/ Type	Date M M / D	DY / Y Y Y Y
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C. Full Name (Last, First, Middle Initial) / Full Organization Name		Type of Allocated Activity Voter Registration Voter ID	or Event: GOTV Generic Campaign
Mailing Address		Allocated Activity or E	vent Year-To-Date
City State Zip Code	perces w	varen Dirakel Scheffer († 1944 – 1944) vari	
Purpose of Disbursement	Category/ Type	Data	
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SCHEDULE L (FEC Form 3X)

AGGREGATION PAGE: LEVIN FUNDS

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SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

	PAGE	OF
FOR LINE NUMBER: (check only one)	1a	2

TEMIZED RECEIPTS OF LEVIN FUNDS	for each category of the Aggregation Page	FOR LINE NUMBER: 1a 2			
Any information copied from such Reports and Statements may n or for commercial purposes, other than using the name and address.	ot be sold or used by any personals of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) N/A					
Full Name (Last, First, Middle Initial) / Full Organization Name 4.		Date of Receipt			
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Name of Employer or Principal Place of Business	Aggregate Year-to-Date				
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TOTAL This Period (last page this line number only).....

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

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

FOR LINE NUMBER: (check only one)		PAG	PAGE		OF	
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) N/A		
Full Name (Last, First, Middle Initial) / Full Organization Name	e	Date of Disbursement
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Mailing Address		With the transfer of the trans
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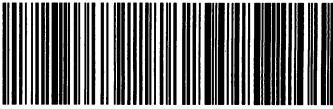
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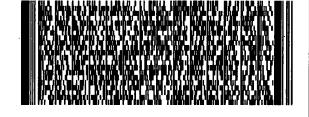
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