

12 JUL 18 AM 9:35

Office Use Only

FEC
FORM 1

STATEMENT OF
ORGANIZATION

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Hinck for Maine

ADDRESS (number and street)

Po Box 4627

(Check if address is changed)

Portland

CITY ▲

ME

STATE ▲

04112

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

jon@jonhinck.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

http://www.jonhinck

2. DATE 07 / 01 / 2012

3. FEC IDENTIFICATION NUMBER ▶

C00506386

4. IS THIS STATEMENT () NEW (N) OR (X) AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jon Hinck

Signature of Treasurer

Date

07 / 01 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

12020553032

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Jon Hinck

Candidate Party Affiliation: DEM Office Sought: House Senate President State: ME District: 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

(d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number: <u>C</u>
2.	_____	FEC ID number: <u>C</u>
3.	_____	FEC ID number: <u>C</u>
4.	_____	FEC ID number: <u>C</u>

12020553053

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

- 9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bangor Savings Bank

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1: 180 Middle Street]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3: Portland ME 04101]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

12020553035

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1N

Transaction ID :

All reimbursements were memoed in the campaign software, but only those that reached the reporting threshold were itemized by the software.

Form/Schedule:

Transaction ID:

12020553036

EXTREMELY URGENT

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Scheduled Date of Delivery	Return Receipt Fee	
Month Day Year		
Scheduled Time of Delivery	COD Fee	
Month Day Year		
Noon <input type="checkbox"/> 2 PM <input type="checkbox"/> 3 PM <input type="checkbox"/> 4 PM <input type="checkbox"/> 5 PM	Total Postage & Fees	
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2nd Day <input type="checkbox"/> 3rd Day <input type="checkbox"/>	Acceptance Emp. Initials	
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Holder Addressee Employee

Delivery Date: 07/12/02

Time: 9:40 AM

Employee Signature: [Signature]

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FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW



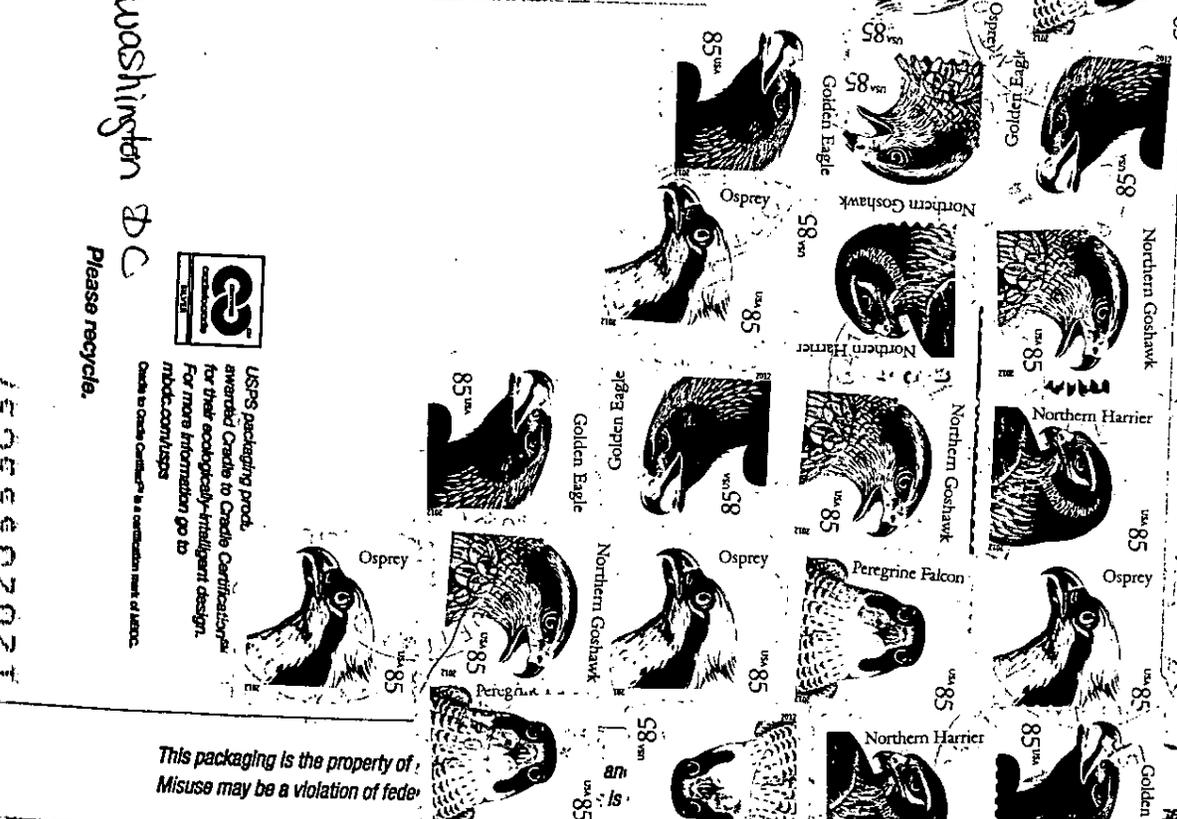
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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt

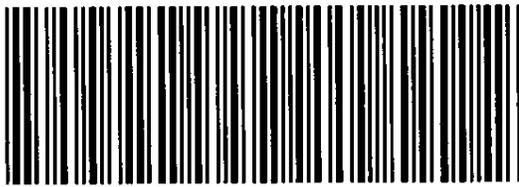
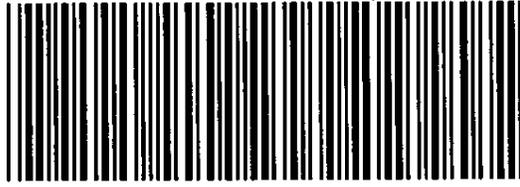
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PREPARER RD DATE PREPARED 07-18-12

12020553036



12020553039