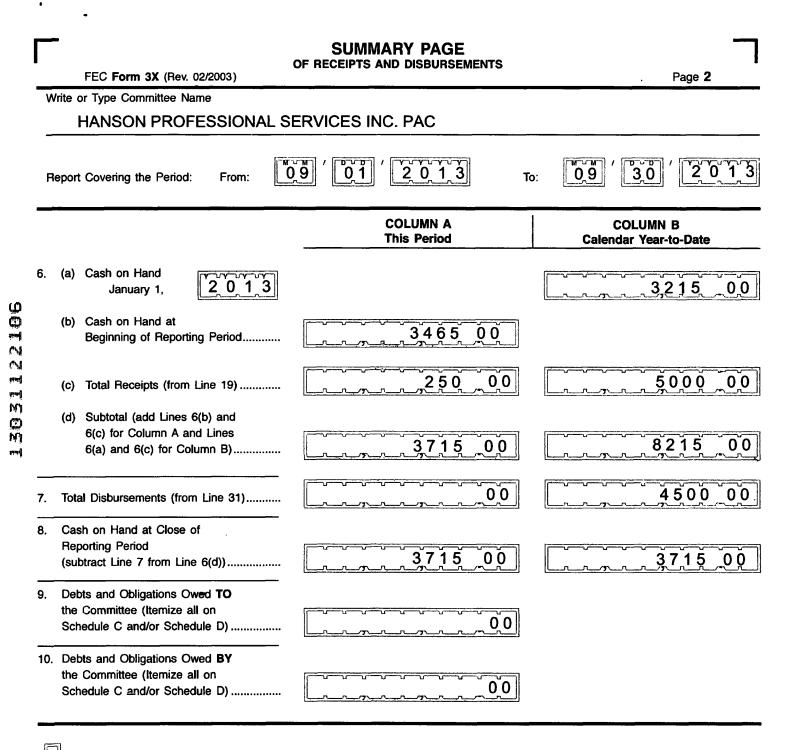
ſ	FEC AN	PORT OF RE(D DISBURSE Other Than An Authorized	MENTS	RECEI 2013 OCT 17	AH 7: 37
1	NAME OF TYP COMMITTEE (in full)		ample: If typing, type		CENTER
Ľ	HANSON PROFE	SSIQNAL SERV	VICES INC	PAC,	
Ĺ					
A	ADDRESS (number and street)	525 SOUTH SI	XTH STREE	T 	
1999 N	Check if different than previously reported. (ACC)	PRINGFIELD		LIL 627	<u>03</u>]-L
N 2	2. FEC IDENTIFICATION NUMB	ER▼ CITY▲	s		
M Ø M	C 00406124	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	
	I. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) Choose 15	b) Monthly Report Due On: (C) 12-Day Report for the: (C) 12-Day (C) 12-D)]] Jun 20 (M6)	Aug 20 (M8) Sep 20 (M9) X Oct 20 (M10) General (12G) Special (12S)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
	Quarterly Report (Q3) January 31 Year-End Report (YE)	Election on	ر ((المربية)	***·*·* <u>`</u>	in the State of
·	Report (Non-election Year Only) (MY) Termination Report (TER)	POST-Election	General (30G)	Runoff (30R)	in the State of
-5			through	' <u>30</u> ' <u>20</u>	13
	certify that I have examined this R	eport and to the best of my kno JO ELLEN KEIM	wledge and belief it is true	e, correct and comple	
·	Signature of Treasurer	Ellert	Da	ate $\begin{bmatrix} 1 \\ 1 \\ 0 \end{bmatrix}$ $' \begin{bmatrix} 0 \\ 1 \end{bmatrix}$	Ŏ ′ Ź Ŏ 1 3
٢	NOTE: Submission of false, erroneous	, or incomplete information may s	ubject the person signing th	is Report to the penalt	ies of 2 U.S.C. §437g.
I	Office Use Only				FORM 3X Rev. 12/2004

FE6AN026



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

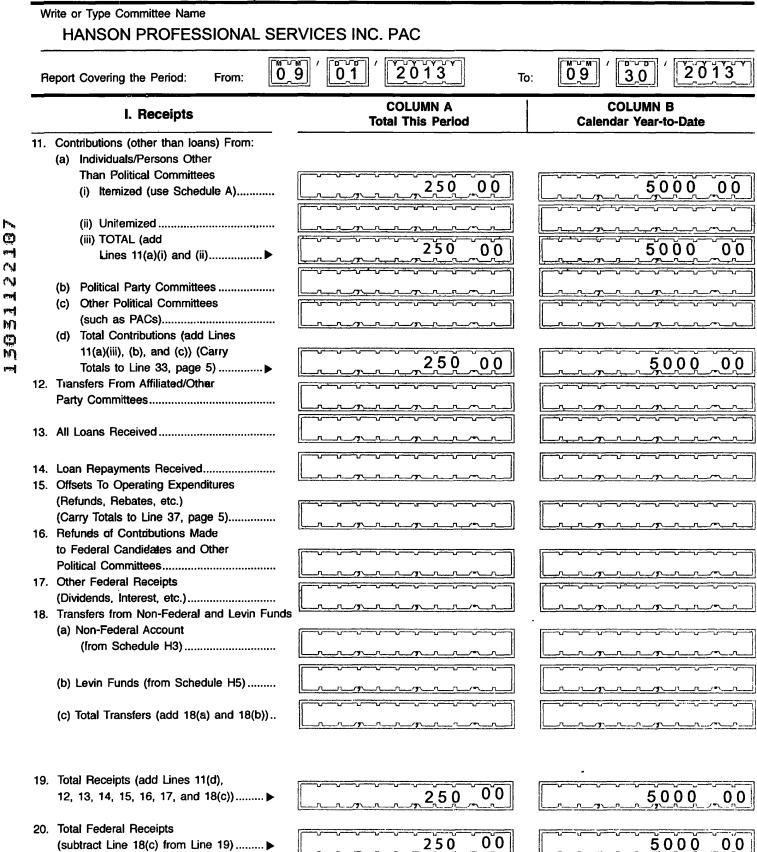
Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)



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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements

Allocated Federal/Non-Federal

Federal Share

(ii) Non-Federal Share.....

Expenditures

(add 21(a)(i), (a)(ii), and (b)) >

Activity (from Sohedule H4)

Operating Expenditures:

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Committees...... Contributions to

24. Independent Expenditures

(c) Total Operating Expenditures

Federal Candidates/Committees and Other Political Committees.....

21.

23.

27.

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(a)

(i)

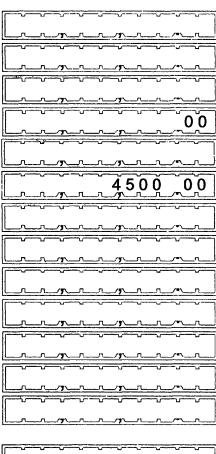
COLUMN A **Total This Period**

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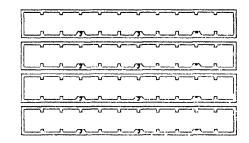
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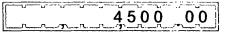
COLUMN B Calendar Year-to-Date

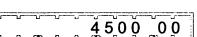
Page 4



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	n	-	(1)	-	-	-	-		~	- 1







25 <i>.</i>	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)
	Loan Repayments Made
27.	Loans Made

- LC 28. Refunds of Contributions To: Individuals/Persons Other Than Political Committees (a)
 - (b) Political Party Committees (c) Other Political Committees (such as PACs).....
 - (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶
- 29. Other Disbursements
- 30. Federal Election Activity (2 U.S.C. §431(20))
 - (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share
 - (ii) "Levin" Share.....
 - (b) Federal Election Activity Paid Entirely With Federal Funds
 - (c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).... >
- 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..
- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

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FEC Form 3X (Rev. 02/2003)	DETAILED SUMMARY PAGE of Disbursements	Page 5
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	250 00	<u>5000</u> 00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	250 00	5000 00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		
37. Offsets to Operating Expenditures (frem Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 1 OF 1			
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
		Detailed Summary Page	X 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						
NAME OF COMMITTEE (In Full)						
HANSON PROFESSION	IAL SERV	ICES INC. PAC				
Full Name (Last, First; Middle Initial) A. POTTS, GARY, J			Date of Receipt			
Mailing Address 12215 CHEROKEE ST						
City	State KS	Zip Code				
LEAWOOD	<u> </u>	66209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	- <u></u>	250 00			
Name of Employer	Occupation		-			
HANSON PROFESSIONAL SERVICES INC.	SENIOR	VP				
Receipt For:	Aggregaie	Year-to-Date V				
Primary General Other (specify) ▼		250 00				
Full Name (Last, First, Middle Initial) B.	<u>ــــــ</u>		Date of Receipt			
Mailing Address		<u> </u>				
City	State	Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing						
federal political committee.	C		L.r.r.p.n.n.r.			
Name of Employer	Occupation					
Receipt For:	Aggregate	Year-to-Date ▼				
Primary General		<u> </u>				
Other (specify)		Ann Ann				
Full Name (Last, First, Middle Initial) C.			Date of Receipt			
Mailing Address	······································					
City	State	Zip Code				
			Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.		<u></u>				
Name of Employer	Occupation)	1			
Receipt For:		Year-to-Date ▼				
Primary General	, .99. 59ale					
Other (specify) V		<u></u>				
SUBTOTAL of Receipts This Page (optional)		••••••				
TOTAL This Period (last page this line number	r only)		250 00			

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SCHEDULE B (FEC Form	3X)			PAGE 1 OF 1	
•	Use separate schedule(s	s) (check only	FOR LINE NUMBER: PAGE 1 (check only one)		
ITEMIZED DISBURSEMENT	for each category of the				
	Detailed Summary Page	27			
Any information copied from such Reports	and Statements may not be cold or				
or for commercial purposes, other than us	ng the name and address of any pol	tinal committee to	on ion the purpose o solicit contribution	is from such committee.	
NAME OF COMMITTEE (In Full)	<u> </u>				
	ONAL SERVICES INC. P	۸ ۲			
	ONAL SERVICES INC: FA				
Full Name (Last, First, Middle Initial)					
A.					
·					
Mailing Address	Mailing Address				
City	State Zip Code				
Burness of Diskurses					
Purpose of Disbursement		011	Amount of Fool	h Disbursement this Period	
Candidate Name		011		T Dispursement this Period	
		Category/			
Office Sought: House	Disbursement For:	Туре	<u>L</u>	₰ <u>ੑੑੑ</u> <u>₹</u> <u>/</u>]` <u>ſ</u> ſ _₩ /«`\ñ	
Senate	Primary General				
President	Other (specify)	i			
State: District:			· ·		
Full Name (Last, First, Middle Initial)			· · · · · · · · · · · · · · · · · · ·		
B.			Date of Disburs	sement	
Mailing Address					
City	State Zip Code				
Burnong of Dishrengenert			4		
Purpose of Disbursement				h Disbursement this Period	
Candidate Name		0,1,1	1		
		Category/ Type			
Office Sought: House	Disbursement For:			<u></u>	
Senate	Primary General				
President	Other (specify)				
State: District:			1		
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City	State Zip Code				
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Senate	Primary General				
President	Other (specify)				
State: District:					
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SUBTOTAL of Disbursements This Page	(optional)	🕨			
SUBTOTAL of Disbursements This Page	(optional)	•••••		UU 	

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SCHEDULE C (FEC Form 3X) LOANS

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

GE 1 OF 1 FOR LINE 13 OF FORM 3X

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Election:				
Primary				
General Other (specify)				
Code				
To Date Balance Outstanding at Close of This Pe				
with a stand with the stand of				
e Interest Rate Secured:				
% (apr) Yes				
Name of Employer				
Name of Employer				
Occupation				
Coupaiion				
Amount				
Guaranteed				
Outstanding:				
Name of Employer				
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Name of Employer				
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Guaranteed				
Outstanding:				
Name of Employer				
Occupation				
Amount Guaranteed				
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If no Schedule D, carry forward to appropriate line of Summa				

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FEC Schedule C (Form 3X) Rev. 02/2003

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	HEDULE D (FEC Form 3X) BTS AND OBLIGATIONS	(Use separate schedule(s) for each	PAGE 1 OF 1 FOR LINE NUMBER: (check only one) X9			
Exc	Excluding Loans numb					
NAM	ME OF COMMITTEE (In Full) HANSON PROFESSIONAL S	SERVICES INC. PAC				
Τ	A. Full Name (Last, First, Middle Initial) of De	btor or Creditor	Nature of D	ebt (Purpose):		
	Mailing Address					
ſ	City State	Zip Code				
	Outstanding Balance Beginning This Period					
		Payment This Period	Outstandi	ng Balance at Close of This Period		
		$\ _{\mu_{1},\dots,\mu_{n-1}} = \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1$		┓╱ ╠╌╷ ╀ _{╍┙} ┦ _{╼┙} ┦ _{╍┙} ┦ _{╍┙} ┦ _{╍┙} ┦ _{╍┥} ┦		
ľ	B. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor	Nature of D	ebt (Purpose):		
ł	Mailing Address	········				
	City State	Zip Code				
	Outstanding Balance Beginning This Period					
	Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period		
ŀ	C. Full Name (Last, First, Middle Initial) of De	btor or Creditor	Nature of D	ebt (Purpose):		
Ì	Mailing Address					
Ī	City	State Zip Code				
	Outstanding Balance Beginning This Period		_			
	Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
1)	SUBTOTALS This Period This Page (optional	· 				
2) 3)	TOTALS This Period (last page this line numl TOTAL OUTSTANDING LOANS from Schedu					
4)	ADD 2) and 3) and carry forward to appropria	ate line of Summary Page (last page o	nly) ▶	<u> </u>		

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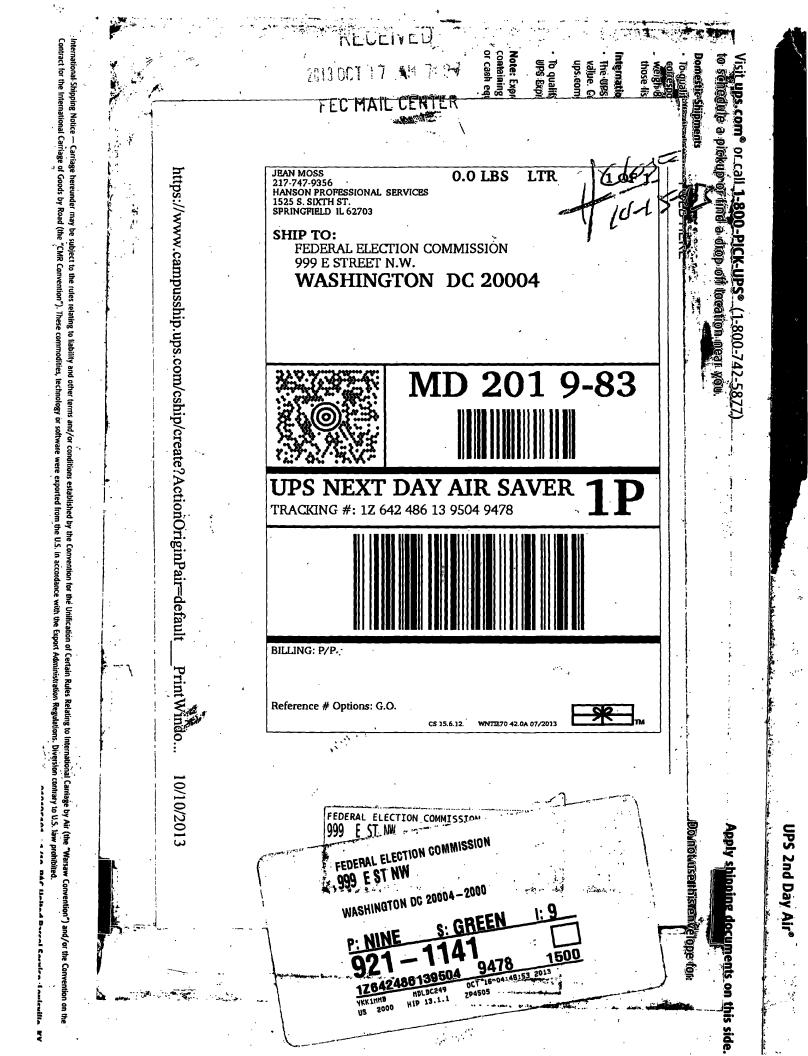
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SC	HEDULE D (FEC Form 3X)		Use separate	PAGE 1 OF 1
DE	BTS AND OBLIGATIONS	schedule(s)		
Exc	luding Loans		for each numbered line)	(check only one) 9 X 10
NA	ME OF COMMITTEE (In Full)			
	HANSON PROFESSIONAL S	ERVICES INC. PAC		
	A. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor	Nature of D	Debt (Purpose):
	Mailing Address			
	City State	Zip Code		
	,, _,, _			
	Outstanding Balance Beginning This Period			
	Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
	B. Full Name (Last, First, Middle Initial) of Debte			Debt (Purpose):
	S. C. C. Marine (Luci, 1 not, minute minut) of Debit			son (ruipuse).
	Mailing Address			
	City State	Zip Code		
	Outstanding Balance Beginning This Period			······································
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	Amount Incurred This Period	Payment This Period		ing Balance at Close of This Period
	and and and and and and and the form	l 		The second s
	C. Full Name (Last, First, Middle Initial) of Deb	tor or Creditor	Nature of 0	Debt (Purpose):
	Mailing Address	<u></u>		
	City	State Zip Code		
	Outstanding Balance Beginning This Period			
	Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close of This Period
	<u> </u>	<u>^^``</u>		······································
1)	SUBTOTALS This Period This Page (optional).			00
H″				·····
2)	TOTALS This Period (last page this line number	er only)		
3)	TOTAL OUTSTANDING LOANS from Scheduk	e C (last page only)	► [[00
		a line of Cummony Data flast as a		
4)	ADD 2) and 3) and carry forward to appropriat	a line of Summary Page (last page of	wy) ► <u>[[</u>	

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	Federal Election Commissio ENVELOPE REPLACEMENT PAGE FOR INCO The FEC added this page to the end of this filing to inc	MING DOCUMENTS
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	USPS.Registered/Certified	Postmarked (R/C)
	USPS Priority Mail	Postmarked
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	Received from House Records & Registration Office	Date of Receipt
	Received from Senate Public Records Office	Date of Receipt ·
	Received from Electronic Filing Office	Date of Receipt
	Dat Other (Specify):	e of Receipt or Postmarked
	Am p	10/18/13
L	PREPARER (8/2013)	DATE PREPARED