						\$ }	
FEC FORM 3X	AND	ORT OF RE DISBURSE or Than An Authorize	MENTS	S FE	RECEIVE MAILCE		Г
1. NAME OF COMMITTEE (in f			kample: If typin ver the lines.	ig, type	12FE4M	5	
HANSON PROFES					<u>I I</u>		
ADDRESS (number and Check if differ than previous reported. (AC	rent	Sputh Şixth Ştreet				62703	
2. FEC IDENTIFICA	TION NUMBER '			S		ZIP CO	DE 🔺
C 00406124		3. IS THIS REPOR		iew N) OR	AM (A)	ENDED	
 4. TYPE OF REP (Choose One) (a) Quarterly Repr April 15 Quarterly 		onthly eport Je On: Apr 20 (M Apr 20 (M 12-Day	3)	May 20 (M5) Iun 20 (M6) Iul 20 (M7) .	Sep :	20 (M8) 20 (M9) 20 (M9) 20 (M10) 12G)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
October Quarterly	Report (Q3)	PRE-Election Report for the:	Convention (Special (
July 31 M Report (N Year Only Terminati	Report (YE) /lid-Year (d) lon-election	Election on 30-Day POST-Election Report for the:	General (300		Runoff (3		f Special (30S)
U (TER)		Election on				in the State o	
5. Covering Period	03 ' 0	and to the best of my kr	through	03 Delief it is true	, correct and	2022 complete.	
Type or Print Name of		NDA K FOLKERTS				• • • • • •	
Signature of Treasurer	Rn	rclark fo	Olkert	7) Da	nte Öğ		<u> 7077</u>
	alse, erroneous, or in	ncomplete information may	subject the pers	son signing this	s Report to th	e penalties of 52	U.S.C. § 30109.
Office Use Only						FEC FOR Rev. 05/2	

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		SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	
10	FEC Form 3X (Rev. 05/2016) /rite or Type Committee Name	· · · · · · · · · · · · · · · · · · ·	Page 2
R	eport Covering the Period From:	b b c c c c c c c c c c	M M / D D / Y Y Y Y 31 2022
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2022		21,715.00
	(b) Cash on Hand at Beginning of Reporting Period	28,065.00	
	(c) Total Receipts (from Line 19)	3,000.00	14,600.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	31,065.00	36,31,5.00
7.	Total Disbursements (from Line 31)	1,000.00	6,250.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30,065.00	30,065.00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
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 1050 First Street, N.E. Washington, DC 20463

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

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DETAILED SUMMARY PAGE of Receipts

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FEC Form 3X (Rev. 05/2016)	of neceipts	Page 3
Write or Type Committee Name		
HANSON PROFESSIONAL SERVICES INC PAC		
Report Covering the Period: From:	M , D D , Y Y Y Y 01 2022	To: 03 03 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
I. 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	3,000.00	14,600.00
(i) Itemized (use Schedule A)		2
(ii) Uniternized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	3,000.00	14,600.00
(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)	3,000.00	14,600.00
12. Transfers From Affiliated/Other		
Party Committees	A. A. 475. A.	
13. All Loans Received		
14 Loss Descurrents Operational		<u> </u>
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))▶	3,000.00	14,600.00
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	3,000.00	14,600.00
	47h 47h	

DETAILED SUMMARY PAGE

of Disbursements

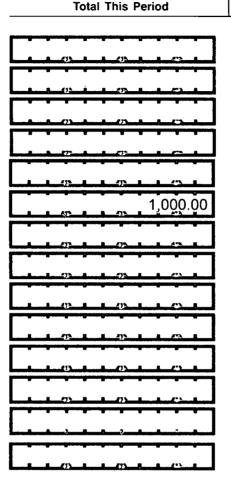
COLUMN A

FEC Form 3X (Rev. 05/2016)

II. Disbursements 21. Operating Expenditures:

- (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share
 - (ii) Non-Federal Share.....
 - (b) Other Federal Operating Expenditures
- Transfers to Affiliated/Other Party Committees.....
 Contributions to Federal Candidates/Committees
- 26. Loan Repayments Made.....
- Loans Made......
 Refunds of Contributions To:

 (a) Individuals/Persons Other Than Political Committees
 - (b) Political Party Committees
 - (c) Other Political Committees (such as PACs).....
- 29. Other Disbursements (Including Non-Federal Donations).....
- 30. Federal Election Activity (52 U.S.C. § 30101(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)).....▶
- Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..
- Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....



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	<i>7</i> 2		<u> </u>		-	

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1,000.00

6,250.00

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Page 4

6,250.00

COLUMN B

Calendar Year-to-Date

DETAILED SUMMARY PAGE

of Disbursements

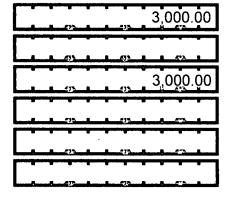
COLUMN A

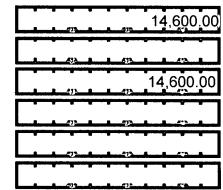
Total This Period

FEC Form 3X (Rev. 05/2016)

III. Net Contributions/ Operating Expenditures

- 33. Total Contributions (other than loans) (from Line 11(d), page 3)34. Total Contribution Refunds





COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 1 OF 2
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		erson for the purpose of soliciting contributions
HANSON PROFESSIONAL SERVIC	ES INC PAC	
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	
A. Ball, Jeffrey T.		Date of Receipt
Mailing Address 10142 WICS Road		03 1 02 2022
City	State Zip Code	
Dawson	IL 62520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	1,200.00
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC F	Occupation (for Individual) COO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1,200.00	
Full Name of Individual (Last, First, Middle In B. Rivera, Wilfredo Jr.	itial) or Full Organization Name	Date of Receipt
Mailing Address 610 Del Mar Blvd.		
City Corpus Christi	State Zip Code TX 78404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occupation (for Individual) VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name of Individual (Last, First, Middle In C. Thomson, David M.	L itial) or Full Organization Name	Date of Receipt
Mailing Address 3152 Island Beach Road		
^{City} Marquette	State Zip Code MI 49855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	600.00
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	2,100.00
TOTAL This Period (last page this line number	only)	

FEC Schedule A (Form 3X) Rev. 05/2016

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SCHEDULE A (FEC Form 3X)		1	······································	FO	FOR LINE NUMBER: PAGE 2 OF 2							
ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)							
			for each category of the Detailed Summary Page		✓ 11a 11b 11c 12							
			,		13		14	15		16	17 ·	
	y information copied from such Reports and State for commercial purposes, other than using the na											
$\left[\right]$	NAME OF COMMITTEE (In Full)											
Į4	ANSON PROFESSIONAL SERVICES	SINC P	AC									
Α.	Full Name of Individual (Last, First, Middle Initial) Thompson, Craig B.	or Full O	rganization Name		Date	of Br	ocoint					
А.	Mailing Address		. .			י הפ א ייו /		D /	Y B Y		V-1	
	3401-D Ocean Drive	Chata	l Zin Code		03		16		202	2		
	City Corpus Christi	State TX	Zip Code 78411		Amou	nt of	Each	Receipt	this F	Period		
	FEC ID number of contributing federal political committee.	С						<u>_</u>		300	0.00	
	Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC		upation (for Individual) st. VP			Memo	b Item					
			Year-to-Date ▼									
	Primary General Other (specify) ▼	· · · ·		1								
				.								
В.	Full Name of Individual (Last, First, Middle Initial) Bowen, Jeffery L.	or Full O	rganization Name		Date	of Re	eceipt					
	Mailing Address 13761 Chatsworth Lane City	State	Zip Code		03	117 /	21	° (2022 2022	2	Ì	
	Jacksonville	FL	32225		Amou	nt of	Each	Receipt	this F	Period		
	FEC ID number of contributing federal political committee.	С						<u> </u>		6 <u>0</u>	0.00	
	Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occi VP	upation (for Individual)			Memo	o Item					
		Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		\$ \$ 600.00]								
<u></u> с.	Full Name of Individual (Last, First, Middle Initial)	or Full O	rganization Name		Date	of Re	eceipt					
	Mailing Address				M	۲ ۲	D	۴ (Ŷ	• •	Ŷ	
	City	State	Zip Code		Amou	int of	Each	Receipt	t this F	Period		
	FEC ID number of contributing federal political committee.	С										
	Name of Employer (for Individual)	Осси	upation (for Individual)			Memo	o Item					
	Primary General	Aggregate	Year-to-Date ▼	1								
_	Other (specify)		<u> </u>									
4	UBTOTAL of Receipts This Page (optional)		••••••	<u> </u>			-9			90	0.00	
1	OTAL This Period (last page this line number only	y)	••••••				-59 <u>-</u>	<u>.</u> ;,		3,00	0.00	

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SCHEDULE B (FEC Form 3X)					FOR LINE NUMBER: PAGE 1 OF							1 OF 1
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			heck	only	ly one)					
			Summary Page			21b 28a	22 28b	\vdash	23 28c	26		27 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full)											
[A	ANSON PROFESSIONAL SERVIC	ES_INC	PAC									
	Full Name (Last, First, Middle Initial)						Data	(D:				
Α.	Friends of Raja for Congress							ינ יינ עריי	D	nient	202	· • • • • •]
	Mailing Address P.O. Box 681202		,				03		01		2022	<u> </u>
		State IL	Zip Code 60168				FEC lo	denti	ficatio	n Numb	er	
	Purpose of Disbursement	· _					\mathbf{C} 0	0	5	75	0 9	2
				0	1	1	<u> </u>	L	<u> </u>	<u> </u>		<u>i</u>
	^{Candidate Name} Krishnamoorthi, S Raja				egor ype	y/	Amour	nt of	Each	Disburs	semer	it this Period
		ment For:		•	196						1	,000.00
	Senate V	Primary	General									
	State: IL District. 08	Other (spec	;iiy) ▼				м	emo	item			
	Full Name (Last, First, Middle Initial)											
В.							Date of	of Di	sburse	ement		
	Mailing Address	. <u> </u>					M TA		Б	0 /	Ÿ Ŧ	ŶŶŶ
	City	State	Zip Code				FEC I	dent	ificatio	n Numt	ber	
	Purpose of Disbursement		.				C					
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	Candidate Name				egor ype	y/	Amour	nt of	Each	Disbur	semer	nt this Period
	Office Sought House Disburse	ment For:		1	ype							
	Senate	Primary	General		·			- -				1
	State District:	Other (spec	cify)				м	emo	ltem			
	Full Name (Last, First, Middle Initial)		····									
C.							Date of	of Di	sburse	ement		
	Mailing Address						M]′	Û	D /	Ÿ.	ŶŶŶŶ
	City	State	Zip Code				FEC I	dent	ificatio	n Numt	ber	
	Purpose of Disbursement		<u> </u>			-	С					
	Candidate Name			Cat	egor ype	y/	Amou	nt of	Each	Disbur	semer	nt this Period
	Office Sought: House Disburse	ment For:		-	160							
	Senate	Primary	General				terradian 					
	State: District.	Other (spec	сіту) 🔻				м	emo	ltem			
Г			· · ·						-			
s	UBTOTAL of Disbursements This Page (optional).				••••••	►			-72		<u>, 1</u>	,000.00
Т	OTAL This Period (last page this line number only)				•		-			1	,000.00

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FEC Schedule B (Form 3X) Rev 05/2016

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SCHEDULE C (FEC Form 3X)

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IAME OF COMMITTEE (In Full)			Detailed Summary Page	FOR LINE 13 OF FORM 3X
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)	🗌 Memo Item	Election: Primary General
Mailing Address				Other (specify) ▼
City		State ZIP	Code	
Original Amount of Loan		Cumulative Payment	To Date Bala	nce Outstanding at Close of This Perio
TERMS Date Incurred	tors (if any) t		ue Interest Rate	Secured.
1. Full Name (Last, First, Mide			Name of Employer	** 4 •
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Mide	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	- <u>- , - , - , - , - , - , - , - , - , -</u>
3. Full Name (Last, First, Mido	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Mido	de Initial)	_	Name of Employer	· · · · · · · · · · · · · · · · · · ·
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding	
SUBTOTALS This Period This Pariod This Pariod This Pariod (last page 1	- · ·		<u></u> _	
···				ard to appropriate line of Summary.

	OF CREDIT FRO	OM LENDING INSTITU	Supplementary for UTIONS Information found on Page of Schedule C
ederal Election Commission		3	
LENDING INSTITUTION (L	ENDER)	Amount of Loan	Interest Rate (APR)
Full Name			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Mailing Address			
City	State Zip Code	Date Incurred or E	stablished
		Date Due	
A. Has loan been restr	uctured?	es If yes, date origina	ally incurred
B. If line of credit, Amount of this Drav		Total Outs Bala	standing
C. Are other parties se	condarily liable for the de	bt incurred? antors must be reported on Sci	
property, goods, neg stocks, accounts red No Yes	otiable instruments, certifier eivable, cash on deposit, lf yes, specify.	for the loan: real estate, persident of deposit, chattel paper or other similar traditional coll of interest income, pledged a lf yes, specify:	Does the lender have a perfected security interest in it?
	it must be established pu)(2) and 100.142(e)(2).	Irsuant Location of accou	unt [.]
Date accour	t established:	Address.	
		City, State, Zip:	
F. If neither of the type the loan amount, sta	s of collateral described a te the basis upon which	bove was pledged for this loar this loan was made and the b	n, or if the amount pledged does not equal or exceed asis on which it assures repayment.
G. COMMITTEE TREA	SURER		DATE
Typed Name Signature			
H. Attach a signed co	by of the loan agreement		
I. TO BE SIGNED B I. To the best of are accurate a II. The loan was similar extensi III. This institution complied with	THE LENDING INSTITU this institution's knowledg s stated above. made on terms and conc ons of credit to other bor is aware of the requirem the requirements set forth	JTION: ge, the terms of the loan and c litions (including interest rate) r rowers of comparable credit wo	on a basis which assures repayment, and has
AUTHORIZED REPRESEN		·	DATE
Typed Name Signature		Title	

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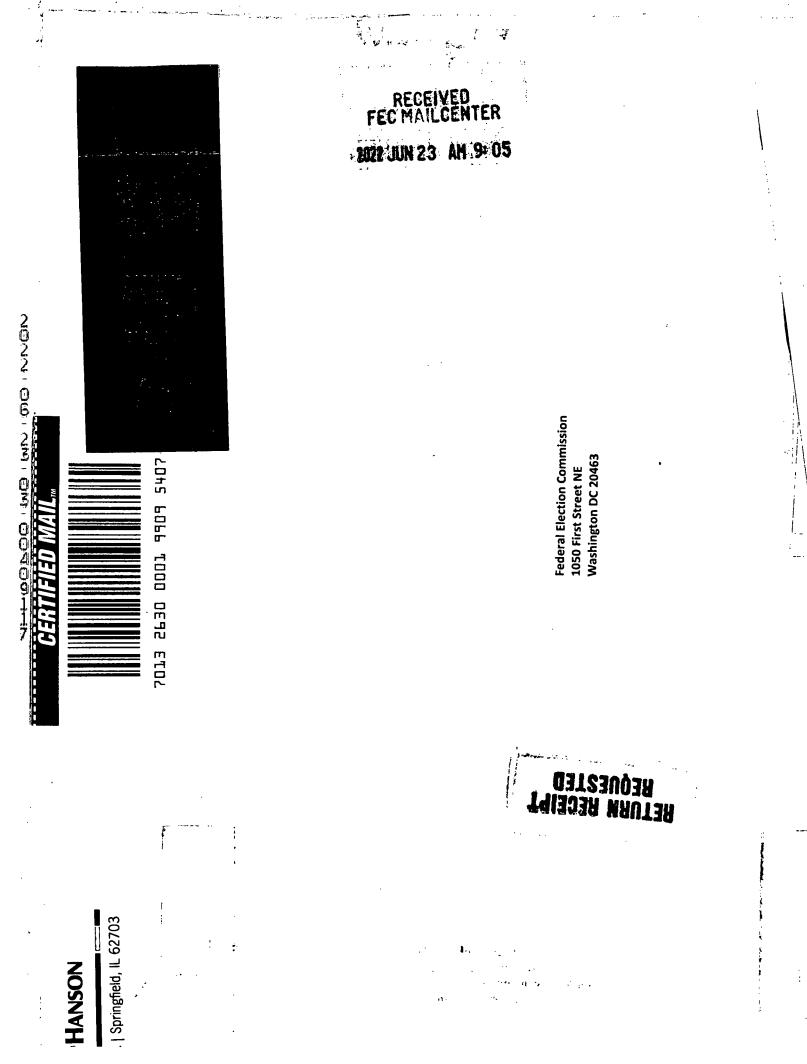
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CHEDULE D (FEC Form 3X)				PAGE OF
EBTS AND OBLIGATIONS	(Use separate schedule(s)			
				(check only one) 9
NAME OF COMMITTEE (In Full)			numbered line)	
		•		
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):
A. Tun Hame (Lust, Thist, Middle Minuty of Debio	·		Intaldie of E	eor (ruipose).
Mailing Address				
City	State	Zip Code		
Outstand on Relation Region This Design				
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Perio
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of C	ebt (Purpose):
B. Tui Marie (Last, Thist, Middle finitaly of Debtor			Nature of L	
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Perio
		* * * * *		
				<u> </u>
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	Debt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Outstanding balance beginning this period				
<u> </u>				
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Perio
1) SUBTOTALS This Period This Page (optional)				
				<u></u>
2) TOTALS This Period (last page this line number	only)		>	
2) TOTAL OUTCTANDING LOANS from Sobertule				
3) TOTAL OUTSTANDING LOANS from Schedule	∪ uasi daqe (2(1)()	💌 📘 💶 💶	

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Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR I The FEC added this page to the end of this filing	NCOMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C) $OG - OP - 2025$
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
N	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Ber S	06-23-2013
PREPARER	DATE PREPARED

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