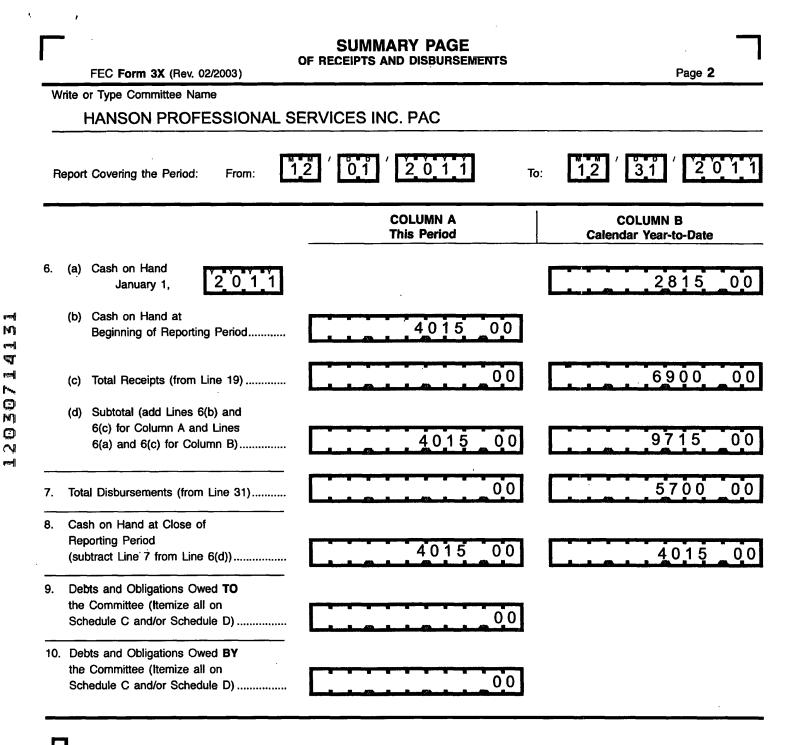
FEC AND DISB	OF RECEIPTS URSEMENTS Authorized Committee	RECEIVED 2012 JAN 25. AM 11: 58
1. NAME OF TYPE OR PRINT ▼ COMMITTEE (in full)	Example: If typing, type over the lines.	12FE4MS MAIL GENTER
HANSON PROFESSIONAL	SERVICES INC	PAC
ADDRESS (number and street)	JTH SIXTH STREE	
Check if different than previously reported. (ACC)	I E L D	LIL 62703 - L.
2. FEC IDENTIFICATION NUMBER ▼		
C 00406124	3. IS THIS NEW REPORT N (N) OR	AMENDED (A)
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reparts: 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) (b) Monthly Report (c) 12-Day PRE-Electin Report for (d) 30-Day POST-Electin Report for 	the: Convention (12C) Election on General (30G)	Year Only
(TER)	Election on	in the State of
5. Covering Period	0 1 1 through 1 2	2 3 1 2 0 1 1
I certify that I have examined this Report and to the b Type or Print Name of Treasurer		rue, correct and complete.
Signature of Treasurer	Tym-	Date 0 1 19 2012
NOTE: Submission of false, erroneous, or incomplete info	rmation may subject the person signing	this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Rev. 12/2004

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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

	FEC Form 3X (Rev. 06/2004)	ETAILED SUMMARY PAGE of Receipts	Page 3
	والمتشاهدة الذي الدار فوالكامي فيباعد بمتقاوي والمحمد والمعادي والم		
VV	rite or Type Committee Name HANSON PROFESSIONAL SER	VICES INC. PAC	
	eport Covering the Period: From: 12		
	I. Receipts		COLUMN B
		Total This Pariod	Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees	. [
	(i) Itemized (use Schedule A)		6900 00
	(ii) Unitemized		
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)	<u> </u>	
	(d) Total Contributions (add Lines		r
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	00	6900 00
12	Transfers From Affiliated/Other		
16.	Party Committees		
13.	All Loans Received		
14	Loan Repayments Received		
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)	لاستعار تحتار المتاركين وتقار المتاركين وتعار	
	(Carry Totals to Line 37, page 5)		
16.	Refunds of Contributions Made		
	to Federal Candidates and Other		
	Political Committees		
17.	Othar Federal Receipts		
	(Dividends, Interest, etc.)		
18.	Transfers from Non-Federal and Levin Funds		L <u></u>
	(a) Non-Federal Account		
	(from Schedule H3)	L	
	(b) Levin Funds (from Schedule H5)	L.r.n.n.n.n.n.n.n.n.	L <u></u>
	(c) Total Transfers (add 18(a) and 18(b))	L <u>r_r</u>	L_r_r_r_r_r_r_r_r_
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶		
20.	Total Federal Receipts	السحيد ومحمد بعسك بعسك بالمحم والمحم والمحم	
	(subtract Line 18(c) from Line 19)		6900 00

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DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

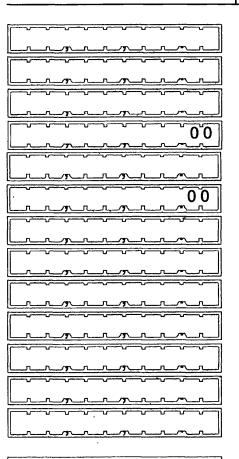
FEC Form 3X (Rev. 02/2003)

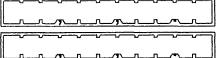
II. Disbursements

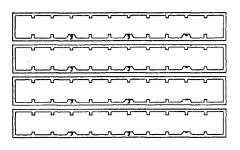
21. Operating Expenditures:

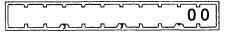
- (a) Allocated Federal/Non-Federal Activity (from Schedule H4)
 (i) Federal Share
 (ii) Non-Federal Share
 (b) Other Federal Operating
 - Expenditures
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))
- 22. Transfers to Affiliated/Other Party
- 26. Loan Repayments Made.....
- - (b) 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
 - (I) rederal Share
 - (ii) "Levin" Share......(b) Federal Election Activity Paid Entirely

 - 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).....

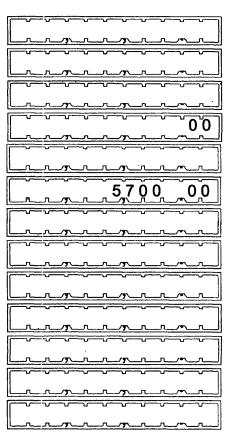




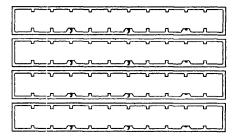


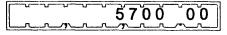


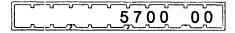




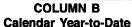
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Page 4



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#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

# III. Net Contributions/Operating Expenditures

COLUMN A Total This Period

### Page 5

COLUMN B Calendar Year-to-Date

- 38. Net Operating Expenditures (subtract Line 37 from Line 36) ......

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SCHEDULE A	(FEC Form	3X)
ITEMIZED REC	EIPTS	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE	
ITEMIZED RECEIPTS			for each category of the	(check only X 11a	one)
			Detailed Summary Page		
Ar	y information copied from such Reports and Stateme	ents ma	ay not be sold or used by any pe	rson for the p	ourpose of soliciting contributions
or	for commercial purposes, other than using the name	e and a	ddress of any political committee	to solioit aon	tributions from such committee.
	NAME OF COMMITTEE (In Full)				
V	HANSON PROFESSIONAL S	SERV	ICES INC. PAC		·
	Full Name (Last, First, Middle Initial)				
A.				┥	Receipt
	Mailing Address				
	City Sta	tate	Zip Code		
					of Each Receipt this Period
	FEC ID number of contributing		· · · · · · · · · · · · · · · · · · ·		
		<u></u>			<u></u>
	Name of Employer Occu	cupation			
	Receipt For:	Transte	Year-to-Date ▼	-	
	Other (specify)	<u> </u>	<u></u>		
_	Full Name (Last, First, Middle Initial)				
В.			· · ·	Date of	Receipt
	Mailing Address				لممممينا القميما ، العميما ،
	City	tate	Zip Code		
	City St.	laic		Amount	of Each Receipt this Period
	FEC ID number of contributing	<u> </u>			
	federal political committee.				<u></u>
	Name of Employer Occ	cupation		-	
			·		
			Year-to-Date ▼		
	Other (specify)	- <u>0</u> 0	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
_		<u>~_~</u>	<u>Arrahar</u>		
~	Full Name (Last, First, Middle Initial)			Deter	Dessint
C.	Mailing Address				
	g , too ooo				
	City St	tate	Zip Code		
				Amount	of Each Receipt this Period
	FEC ID number of contributing federal political committee.				
	Name of Employer     Occupation       Receipt For:     Aggregate       Primary     General			_	
			Year-to-Date ▼	-	
	Other (specify) V	<u></u>	<u></u>		
Г		في الراحدان			
	UBTOTAL of Receipts This Page (optional)		••••••	L	<u>00</u>
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SCHEDULE B (FEC Form 3X)	[	FOR	FOR LINE NUMBER: PAGE 1 OF 1							
TEMIZED DISBURSEMENTS	Use separate schedule(s)			NUMBER: FAGE OF 1						
	for each category of the Detailed Summary Page		21b	22	X	23	24		25	26
	<u>·</u>		27	28a	L	28b	28		29	301
Any information copied from such Reports and Sta or for commercial purposes, other than using the										
	and and address at any publica									
	SERVICES INC. PAC	2								
									_	
Full Name (Last, First, Middle Initial)				Data at						
Α.				Date of	_					
Mailing Address				MUM	1'	D U	י [ פ	ዋህን	የህዋ	ע אין
							u			<u>~</u>
City	State Zip Code									
Purpose of Disbursement										
				Amount	t of	Each	Disburs	emer	nt this	Period
Candidate Name	L	Categor	y/		~~~~	<u> </u>				
Office Cought	sement For:	Туре		<u> </u>	<u></u>	<b>/</b>	<b>/</b>	<u> </u>		مسميسا
Office Sought: House Disbu	Primary General									
President	Other (specify)									
State: District:	······································									
Full Name (Last, First, Middle Initial)	1		T							
<b>B.</b>				Date of						
Mailing Address	<u>-</u>									᠃ᡨ
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City	State Zip Code		Τ							
Purpose of Disbursement						•				
· · · · · · · · · · · · · · · · · · ·				Amount of Each Disbursement this			Period			
Candidate Name		Categor	 y/		~	<del></del>	<u>,</u>		<u> </u>	
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Office Sought: House Disbu	sement For: Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)										
С.	:		ļ	Date of						
Mailing Address			+	โห้าาพ	י [	ں ور	ו   ס	<b>Y</b> U	Υ <u></u> υγ	ν <b>γ</b> -]]
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City	State Zip Code									
Purpose of Disbursement	<u> </u>									
			Amoun	t of	Each	Disburs	emer	nt this	Period	
Candidate Name										<b>-</b>
		Туре	-		<u></u>	<u></u>	/	<u></u>	<u></u> /	<u> </u>
Office Sought: House Disbu	sement For: Primary General									
President	Other (specify)									
State: District:										
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SUBTOTAL of Disbursements This Page (optional	l)	••••••	►	L_r_	<u></u>	<b></b>		<u>`</u>		
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TOTAL This Period (last page this line number of	יואָן			للسحس		<u></u>		<u> </u>		<u>~~</u>

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## SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s)	PAGE 1 OF 1
for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X

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L <b>OAN SOURCE</b> Full Na	me' (Last, First, Middle Initial)	Election: Primary General
Mailing Address		Other (specify)
City	State ZIP	Code
Original Amount of Loan		•
TERMS Date Incu	rred Date (	Due Interest Rate Secured:
List All Endorsers or Generation 1. Full Name (Last, First	uarantors (if any) to Loan Source	Name of Employer
1. Full Name (Last, Fils		
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First	, Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First	, Middle Initial)	Name of Employer
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First	, Middle Initial)	Name of Employer
Mailing Address		Occupation -
City	State ZIP Code	Amount Guaranteed Outstanding:
	his Page (optional)	

	LE D (FEC Form 3X) ND OBLIGATIONS Loans	(Use separate schedule(s) for each numbered line)	PAGE 1 OF FOR LINE NUMBER: (check only one)	
	OMMITTEE (In Full) NSON PROFESSIONAL	_ SERVICES INC. PAC		
A. Full Mailing A	Jame (Last, First, Middle Initial) of	Debtor or Creditor	Nature of E	Debt (Purpose):
City	State	Zip Code		
	nding Balance Beginning This Period	od Payment This Period		ing Balance at Close of This P
B. Full N	ame (Last, First, Middle Initial) of [	Debtor or Creditor	Nature of [	Debt (Purpose):
Mailing A	ddress			
City	State	Zip Code		
	nding Balance Beginning This Peri	od	<u>_</u>	
	<u></u>			

		Nature of Debt (Purpose):
	Mailing Address	
	City State Zip Code	
	Outstanding Balance Beginning This Period	
	Amount Incurred This Period Payment This Period	Outstanding Balance at Close of This Period
1)	SUBTOTALS This Period This Page (optional)	
2)	TOTALS This Period (last page this line number only)	00
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)	

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) >

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CHEDULE D (FEC Form 3X)	F	(Use separate	PAGE 1 OF 1
EBTS AND OBLIGATIONS		schedule(s)	
cluding Loans	[	for each numbered line)	(check only one) 9 X 10
IAME OF COMMITTEE (In Full)			
HANSON PROFESSIONAL SE	ERVICES INC. PAC		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):
		·	
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This Period		J	
	•		
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debto			·
B. Fun Name (Last, First, Midule Initial) of Debto			bebt (Purpose):
Mailing Address			
City State	Zip Code		
Outstanding Balance Beginning This Period		<u>_</u>	
			·
Amount Incurred This Period	Payment This Period	Outstandi	ng. Balance at Close of This Period
Langeran	Langerger		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	ebt (Purpose):
Mailing Address			
City	State Zip Code		
Outstanding Balance Beginning This Period			
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Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
L			
			00
SUBTOTALS This Period This Page (optional)►			<u></u>
) TOTALS This Period (last page this line numbe	TOTALS This Period (last page this line number only)		<u>00</u>
) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	►	
) ADD 2) and 3) and carry forward to appropriate	ling of Summany Page (last page on		00
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.		
Hand Delivered	Date of Receipt	
USPS First Class Mail	Postmarked	
USPS Registered/Certified	Postmarked (R/C)	
USPS Priority Mail	Postmarked	
Delivery Confirmation [™] or Signature Confirmation [™] Label		
USPS Express Mail	Postmarked	
Postmark Illegible		
No Postmark		
Overnight Delivery Service (Specify):	Shipping Date	
	xt Business Day Delivery	
Received from House Records & Registration O	Date of Receipt	
Received from Senate Public Records Office	Date of Receipt	
Received from Electronic Filing Office	Date of Receipt	
Other (Specify):	Date of Receipt or Postmarked	
	1/25/12	
PREPARER (3/2005)	DATE PREPARED	