

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED 2011 APR 25 AM 11:43 FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 HANSON PROFESSIONAL SERVICES INC PAC

ADDRESS (number and street) 1525 SOUTH SIXTH ST

Check if different than previously reported. (ACC) SPRINGFIELD IL 62703

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00406124 3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- 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)
Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c)

- 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

(d)

- 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period 03/01/2011 through 03/31/2011

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

Type or Print Name of Treasurer JO ELLEN KEIM

Signature of Treasurer [Handwritten Signature] Date 03/19/2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 8 columns and 2 rows. Row 1: Office Use Only. Row 2: FEC FORM 3X Rev. 12/2004

11030601141

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**HANSON PROFESSIONAL SERVICES INC. PAC**

Report Covering the Period: From: **03 / 01 / 2011** To: **03 / 31 / 2011**

11030601142

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2011</b>		<b>281500</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>506500</b>	
(c) Total Receipts (from Line 19) .....	<b>235000</b>	<b>460000</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<b>741500</b>	<b>741500</b>
7. Total Disbursements (from Line 31) .....	<b>150000</b>	<b>150000</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<b>591500</b>	<b>591500</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	

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)

Page 3

Write or Type Committee Name

**HANSON PROFESSIONAL SERVICES INC. PAC**

Report Covering the Period: From:

03 ' 01 ' 2011

To:

03 ' 31 ' 2011

**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
- (i) Itemized (use Schedule A).....

235000

460000

- (ii) Unitemized.....
- (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

235000

460000

- (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).....▶

235000

460000

**12. Transfers From Affiliated/Other Party Committees.....**

**13. All Loans Received.....**

**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)).....▶**

235000

460000

**20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶**

235000

460000

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**DETAILED SUMMARY PAGE  
of Disbursements**

**II. Disbursements**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

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)) .....	0	0
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	1,500.00	1,500.00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(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)) ..	1,500.00	1,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1,500.00	1,500.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	235000	460000
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	235000	460000
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	00	00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	00	00

11030601125

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 1 OF 3

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HANSON PROFESSIONAL SERVICES INC. PAC

Full Name (Last, First, Middle Initial)

A. SACHTLEBEN, ROD, A

Mailing Address

525 BIG HORN BASIN CT

City

WILDWOOD

State

MO

Zip Code

63011

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 / 16 / 2011

Amount of Each Receipt this Period

250.00

Name of Employer

HANSON PROFESSIONAL SERVICES INC

Occupation

VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

B. BRADFORD, WILLIAM, C

Mailing Address

1460 SHADWELL CIRCLE

City

HEATHROW

State

FL

Zip Code

32746

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 / 16 / 2011

Amount of Each Receipt this Period

250.00

Name of Employer

HANSON PROFESSIONAL SERVICES INC

Occupation

SR.VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

C. TRACHTMAN, JAMES, A

Mailing Address

12 IRONWOOD CT

City

CARMEL

State

IN

Zip Code

46033

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 / 16 / 2011

Amount of Each Receipt this Period

250.00

Name of Employer

HANSON PROFESSIONAL SERVICES INC

Occupation

VP

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

11030601146

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **2** OF **3**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)

**HANSON PROFESSIONAL SERVICES INC. PAC**

11030601147

A. Full Name (Last, First, Middle Initial)  
**VORNDRAN, DAVID, A**

Mailing Address  
**6054 BROOKSHIRE DR**

City **PITTSBORO** State **IN** Zip Code **46167**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **ASST. VP**

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt  
**03' 07' 2011**

Amount of Each Receipt this Period  
**250.00**

B. Full Name (Last, First, Middle Initial)  
**RECHNER, THOMAS, A**

Mailing Address  
**525 AUGUSTA DR**

City **CHATHAM** State **IL** Zip Code **62629**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **ARCHITECT**

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt  
**03' 08' 2011**

Amount of Each Receipt this Period  
**250.00**

C. Full Name (Last, First, Middle Initial)  
**BROWN, ROBERT, K**

Mailing Address  
**15. GERGETOWNE RD**

City **SHERMAN** State **IL** Zip Code **62684**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **SR. POLICY ADVISOR**

Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt  
**03' 09' 2011**

Amount of Each Receipt this Period  
**250.00**

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

**750.00**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE **3** OF **3**

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)

**HANSON PROFESSIONAL SERVICES INC. PAC**

A. Full Name (Last, First, Middle Initial)  
**MESSMORE, JAMES, P**

Mailing Address  
**1987 BRENTWOOD LANE**

City **WHEATON** State **IL** Zip Code **60189**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **SR.VP.**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt

**03 / 07 / 2011**

Amount of Each Receipt this Period

**250.00**

B. Full Name (Last, First, Middle Initial)  
**KEIM, JO, E**

Mailing Address  
**15251 W LORAIN RD**

City **NEW BERLIN** State **IL** Zip Code **62670**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **SR.VP.**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt

**03 / 07 / 2011**

Amount of Each Receipt this Period

**250.00**

C. Full Name (Last, First, Middle Initial)  
**MCQUILLAN, MICHAEL, F**

Mailing Address  
**17303 HALSGAME LN**

City **GREVE COEUR** State **MO** Zip Code **63141**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HANSON PROFESSIONAL SERVICES INC** Occupation **VP.**

Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **3.50.00**

Date of Receipt

**03 / 07 / 2011**

Amount of Each Receipt this Period

**3.50.00**

SUBTOTAL of Receipts This Page (optional).....▶

**850.00**

TOTAL This Period (last page this line number only).....▶

**2350.00**

11030601148



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

HANSON PROFESSIONAL SERVICES INC. PAC

Full Name (Last, First, Middle Initial)

A. VOLUNTEERS FOR SHIMKUS

Date of Disbursement

Mailing Address

PO BOX 661

03 / 03 / 2011

City

COLLINSVILLE

State

IL

Zip Code

62234

Purpose of Disbursement

CONTRIBUTION TO FEDERAL CANDIDATE

011

Amount of Each Disbursement this Period

500.00

Candidate Name

JOHN SHIMKUS

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: IL

District: 19

Full Name (Last, First, Middle Initial)

B. ISSA FOR CONGRESS

Date of Disbursement

Mailing Address

PO BOX 368

03 / 22 / 2011

City

FALLS CHURCH

State

VA

Zip Code

22040

Purpose of Disbursement

CONTRIBUTION TO FEDERAL CANDIDATE

011

Amount of Each Disbursement this Period

1000.00

Candidate Name

DARRELL ISSA

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: CA

District: 49

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

MM / DD / YYYY

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1500.00

TOTAL This Period (last page this line number only).....▶

1500.00

11030601149

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full)  
**HANSON PROFESSIONAL SERVICES INC. PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address	
City State ZIP Code	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	MM / DD / YYYY	MM / DD / YYYY	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	
<b>TOTALS</b> This Period (last page in this line only).....▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

11030601150

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

NAME OF COMMITTEE (In Full)  
**HANSON PROFESSIONAL SERVICES INC. PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		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
---	-----------------------------	---------------------	---

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		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
---	-----------------------------	---------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		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)..... ▶	<table border="1"> <tr><td>0</td></tr> <tr><td>0</td></tr> <tr><td>0</td></tr> <tr><td>0</td></tr> </table>	0	0	0	0
0					
0					
0					
0					
2) TOTALS This Period (last page this line number only)..... ▶					
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) ▶					

11030601151

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

NAME OF COMMITTEE (In Full)  
**HANSON PROFESSIONAL SERVICES INC. PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
Amount Incurred This Period		

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
Amount Incurred This Period		

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Payment This Period	Outstanding Balance at Close of This Period
Amount Incurred This Period		

1) SUBTOTALS This Period This Page (optional)..... ▶	
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	

11030601152

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.

11030601153

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 4/19/11
<input type="checkbox"/> USPS Priority Mail  Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):  Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

 PREPARER	4/25/11 DATE PREPARED
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