2016 - OK - 2N - ON - OOO74100

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016#42 Vs 23 ny AM 11: 41

FEC FORM 3X

Rev. 12/2004

									LU I WITICE L	Se-Othly '	
1,	NAME (OF TTEE (in full)	TYPE OR	PRINT ▼		ample: If ty er the lines		12FE	4M5		
Щ	A _, N _, S	ON PRO	ESSI	ONAL	SER	VIÇES	SINC	PA	2	ـــــــــــــــــــــــــــــــــــــــ	لحب
Ц										1 1 1	لىبىل
ADI	ORESS (number and street)	152	5 SOL	TH SI	XTH	STRE	ET			
	tha	eck if different in previously ported. (ACC)	SPR	INGF	IELD,				627	03	
2.	FEC ID	ENTIFICATION N	UMBER ▼		CITY			STATE	.	ZIP CO	DE 🛦
	C	0406124			3. IS THIS REPORT	r N	NEW (N) OF		AMENDED (A)		
4.	(Choose	·		nthly port P	Feb 20 (M2 Mar 20 (M3	النبا	May 20 (Ma		Aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
	(a) Qu	arterly Reports:		ă	Apr 20 (M4	, <u> </u>	Jul 20 (M7)		Oct 20 (M10)		Year Only) Jan 31 (YE)
		April 15 Quarterly Report ((July 15 Quarterly Report ((October 15 Quarterly Report ((January 31	Q2) (C)	12-Day PRE-Election Report for		Primary (1		_	eneral (12G) ecial (12S)	in the	Runoff (12R)
		Year-End Report (\) July 31 Mid-Year Report (Non-electic Year Only) (MY)	(d)	30-Day	ᄖ	General (30G)	Ru	enoff (30R)	State o	Special (30S)
		Termination Report (TER)		Report for	tne: Election on	W·W	/ B • B /	7 * * *	Y	in the State o	, 🔲
5.		g Period 0	4 0		016	through		4 3	0 20	16	
	_	I have examined that Name of Treasure		and to the b	-	owledge an	d belief it is	true, corre	ect and comple	ete.	
Sigi	nature of	f Treasurer	9	HOQ.	A	7		Date	0 5 1	3 ′	ž 0 1 6

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

FE6AN026

Office

Use

Only

2046 - 05 - 28 - 08 - 00075487

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)		Page 2
Write or Type Committee Name		
HANSON PROFESSIONAL SE	ERVICES INC. PAC	
Report Covering the Period: From:	4 01 2016 To	: 04 30 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2 0 1 6		2,5,65,0,0
(b) Cash on Hand at Beginning of Reporting Period	7,0,15,00	
(c) Total Receipts (from Line 19)	3,5,0,0,00	11,150 00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10,5,1,5,0,0	13715 00
7. Total Disbursements (from Line 31)	3,2,50 00	6,450 0,0
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7,2,65,0,0	7265,00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.0	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	00	
Qualified as multicandidate on 3 14 1	6	

For further information contact:

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

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

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

2046 · 05 · 28 · 08 · 000 · 61 · 000

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)
Write or Type Committee Name

HANSON PROFESSIONAL SERVICES INC. PAC

Report Covering the Period: From: 0_4	0.1 2016 To	$0.4 \frac{1}{30} \frac{1}{2016}$
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	3,500,00	11150 00
(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	3,500 00	11,150 00
(b) Political Party Committees		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 12. Transfers From Affiliated/Other Party Committees	3500_00	11_15000
13. All Loans Received	(0)	
 Loan Repayments Received		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	3,500,00	11,150,00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	3,500,00	11,150 00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	rating Expenditures:		Guioriadi Todi to Buto
(a)	Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share		
	,		
	(ii) Non-Federal Share	()	
(p)	Other Federal Operating		
	Expenditures	(3)	2-1-1-2-1-2-1-1-2-1-1
(c)	Total Operating Expenditures	0.0	0.0
22 Tron	(add 21(a)(i), (a)(ii), and (b))▶	2 0	
	nsfers to Affiliated/Other Party		
 23. Con 	tributions to		
	eral Candidates/Committees Other Political Committees	3250 00	6450 00
	ependent Expenditures	<u> </u>	
	Schedule E)		
25. Coo	ordinated Party Expenditures J.S.C. §441a(d))		(1)
(use	Schedule F)		1
26. Loa	n Repayments Made		
	ns Made unds of Contributions To:		9 9
	Individuals/Persons Other		
	Than Political Committees		
,, ,	B (0) 1 B 1 B 1 B		
(b)	Political Party Committees	(3)	
(c)	Other Political Committees (such as PACs)		
	(Such as PACS)		
(d)	Total Contribution Refunds		
(4)	(add Lines 28(a), (b), and (c))▶		
	(444 2 2-(4), (5), 4 (5),		
29. Oth	er Disbursements		
		(2)	
30. Fed	leral Election Activity (2 U.S.C. §431(20))		
(a)	Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
4-1	(ii) "Levin" Share		
(D)	Federal Election Activity Paid Entirely		
(0)	With Federal Funds		
(c)	Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
	Lines 30(a)(i), 30(a)(ii) and 30(b))		
31 Tota	al Disbursements (add Lines 21(c), 22,		
	24, 25, 26, 27, 28(d), 29 and 30(c))	3250 00	6450 00
,	,,,,	3,250 0.0	6,450_00
32. Tota	al Federal Disbursements		
(sut	otract Line 21(a)(ii) and Line 30(a)(ii)		
fron	n Line 31)	3,250 00	6450 00

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-**COLUMN B Total This Period** penditures Calendar Year-to-Date 33. Total Contributions (other than loans) 00 3500 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) 0 0 3500 00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 00 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 1 OF 3
·	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Detailed Summary Fage	13 14 15 16 17
Any information copied from such Reports and Statemen		
or for commercial purposes, other than using the name a	and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
ANSON PROFESSIONAL SE	RVICES INC. PAC	
V		
Full Name (Last, First, Middle Initial)		Date of Desciot
A. BALL JEFFERY T	·	Date of Receipt
Mailing Address 10142 WICS ROAD		04 01 2016
City Stat	e Zip Code	
DAWSON IL	62520	Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Eddi Modelpt this Fellow
federal political committee.		1,000,00
Name of Employer Occup	ation	
HANSON PROFESSIONAL SERVICES INC.	PRESIDENT	
Death Fair	gate Year-to-Date ▼	
Primary General		1
Other (specify) ▼	1,000 0.0	i i
Full Name (Last, First, Middle Initial)		Date of Bassint
B. PECORI SERGIO A Mailing Address		Date of Receipt
4517 TURTLE BAY		04 01 2016
City Stat	e Zip Code	الشنثا لندا لنا
SPRINGFIELDI	L 62711	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		1,000 00
Name of Employer Occup	agtion	
HANSON PROFESSIONAL SERVICES INC.	CHIEF EXECUTIVE OFFICER	
Receipt For:		-
Primary General Aggre	gate Year-to-Date ▼	<u>,</u>]
Other (specify) ▼	1,000 ,00	i }
		*
Full Name (Last, First, Middle Initial)	-	
C. WHALEN DANIEL J		Date of Receipt
Mailing Address		04 01 2016
	e Zip Code	04 01 2016
BLOOMINGTON IL	61701	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		500 00
Name of Employer Occup	nation	
HANSON PROFESSIONAL SERVICES INC.	SR VP	
Possint For:		
Primary General	egate Year-to-Date ▼	.
Other (specify) ▼	500 00	
		4
SUBTOTAL of Receipts This Page (optional))	2,500,00
		20
TOTAL This Period (last page this line number only)		0.0

2016
05
2
03,

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) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a	ay not be sold or used by any peaddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SERV	ICES INC. PAC	
Full Name (Last, First, Middle Initial) A. LOOS LUCINDA A		Date of Receipt
Mailing Address 8311 ROBERTSON ROAD		04 06 2016
City State EDWARDS IL	Zip Code 61528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250,00
Name of Employer HANSON PROFESSIONAL SERVICES INC.	VP	
Donaint For:	Year-to-Date ▼ , 250 00	
Full Name (Last, First, Middle Initial) B. FLETCHER MATHEW A Mailing Address		Date of Receipt
34454 NORTH PEORIA LINE ROAD City State	Zip Code	0.4 1.1 2016
FARMINGTON IL	61531	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250 00
Name of Employer Occupation HANSON PROFESSIONAL SERVICES INC.	VP	
Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ • 250 • 00	
Full Name (Last, First, Middle Initial) C. WALLER ROBERT A		Date of Receipt
Mailing Address 220 SANDSTONE DRIVE City State	Zip Code	0.4 1.1 2016
CHATHAM IL	62629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250 00
Name of Employer Occupation HANSON PROFESSIONAL SERVICES INC.	AVP	
Receipt For: Primary General Other (specify) ▼ Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		"
TOTAL This Period (last page this line number only)		0.0

')
Ó
1
Ĝ.
_
05
7
2
3
O
0000
Ţ
ĭ
×
1
12. 12.0

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 3 OF 3 Use separate schedule(s) (check only one) for each category of the X 11a 11c Detailed Summary Page 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) TRACHTMAN JAMES A Date of Receipt Mailing Address 12 IRONWOOD COURT City Zip Code State CARMEL IN 46033 Amount of Each Receipt this Period FEC ID number of contributing 250 00 federal political committee. Name of Employer Occupation HANSON PROFESSIONAL SERVICES INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 250 00 Other (specify) Full Name (Last, First, Middle Initial) B. Date of Receipt Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) -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. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify)

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

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

2,50

3500

0_0

00

SCHEDULE B (FEC Form 3X)	<u> </u>	FOR LINE	NUMBER:		PA	GE 1	OF 1
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	[V] 00			
	Detailed Summary Page	21b 27	22 28a	X 23 28b	24 .28c	25 29	26 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	NED/ ((OEO 1) (O D) (O	_					-
HANSON PROFESSIONAL S	SERVICES INC. PAC	·					
Full Name (Last, First, Middle Initial)							
LISA MURKOWSKI FOR US SE	NATE		W 14	Disburse	ment	7	
Mailing Address 1111 19TH STREET NW SUITE	1100		0 4	لللل	4	2016	
City	State Zip Code				_		
WASHINGTON DC Purpose of Disbursement	20036						
CONTRIBUTION TO FEDERAL CA	ANDIDATE	011	Amount	of Each	Disburse	ment this	Period
Candidate Name		Category/		V V	1 (000	0.0
LISA MURKOWSKI Office Sought: House Disburser	ment For:	Туре	<u></u>				أستنت
X Senate	Primary General	ĺ					
President State: AK District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
B. ACEC PAC			Date of	Disburse	ement		
Mailing Address				/ B		2016	Ÿ
1015 15TH STREET NW SUITE				<u>. L</u>	<u>-</u>		
	State Zip Code 20005						
Purpose of Disbursement	20005						
CONTRIBUTION TO PAC TO SUPPORT F	EDERAL CANDIDATES	011	Amount	of Each	Disburse	ment this	Period
Candidate Name N/A	1	Category/ Type		• ~····································	2.0	0.00	0.0
	ment For:	·ype	<u> </u>		J.		
	Primary General						
President State: District:	Other (specify) ₩						
Full Name (Last, First, Middle Initial)							
C. ANDRE CARSON FOR CONGRES	Se [.]		Date of	Disburse	ement		
Mailing Address			0.4	2	5 /	2016	
PO BOX 1863					<u></u>		
•	State Zip Code IN 46206	•					
Purpose of Disbursement	Ţ ş						
CONTRIBUTION TO FEDERAL CAN Candidate Name	DIDATE	011	Amount	of Each	Disburse	ment this	Period
ANDRE CARSON		Category/ Type				2.50	00
Office Sought: X House Disburse	ment For:		<u> </u>	<u> </u>			<u></u>
Senate X	Primary General Other (specify) ▼		11				
State: IN District: 07	Cuter (specify)						
SUBTOTAL of Disbursements This Page (optional)		······				2,5 0	0,0
TOTAL This Period (last page this line number only)			,	3 :	250	00

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 1 OF 1

	Detailed Summary Page	FOR LINE 13 OF FORM 3X
IAME OF COMMITTEE (in Full)		
HANSON PROFESSIONAL SERVICES INC. PAG	<u> </u>	
LOAN SOURCE Full Name (Last, First, Middle Initial)	E	election:
		Primary General
Mailing Address		Other (specify)
	<u></u>	
City State ZIP Co		- 0.4-4 1 0
Original Amount of Loan Cumulative Payment To	Date Balanci	e Outstanding at Close of This Period
TERMS Date Incurred Date Due	Interest Rate	Secured:
Date included Carago Date price	interest Hate	
	<u> </u>	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source		
Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Amount Guaranteed	
	Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	
City State ZIP Code	Guaranteed	
A Full Name (Last First Middle India)	Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address	Occupation	
	Amount	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
City State ZIP Code	Guaranteed Outstanding:	
	مراجعة	
SUBTOTALS This Period This Page (optional)	<u> </u>	0.0
TOTALS This Period (last page in this line only)	· C	00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forwar	rd to appropriate line of Summary
, , , , , , , , , , , , , , , , , , , ,		, r r or cannially.

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

(Use separate schedule(s)

FOR LINE NUMBER:

PAGE

X	9
	10

OF

luding Loans		numbered line)	(Check only one)	10
ME OF COMMITTEE (In Full) HANSON PROFESSIONAL S	SERVICES INC. PAC			
A. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of D	ebt (Purpose):	· · · · · · · · · · · · · · · · · · ·
Mailing Address				
City State .	Zip Code			
Outstanding Balance Beginning This Period		···	- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,- ,-	
Amount Incurred This Period	Payment This Period		ng Balance at Close o	
		محيا لمحد		
B. Full Name (Last, First, Middle Initial) of Del	btor or Creditor		Debt (Purpose):	
	btor or Creditor			
B. Full Name (Last, First, Middle Initial) of Del	btor or Creditor Zip Code			
B. Full Name (Last, First, Middle Initial) of Del	Zip Code			
B. Full Name (Last, First, Middle Initial) of Del Mailing Address City State Outstanding Balance Beginning This Period	Zip Code			
B. Full Name (Last, First, Middle Initial) of Del Mailing Address City State Outstanding Balance Beginning This Period	Zip Code	Nature of C		f This Pe
B. Full Name (Last, First, Middle Initial) of Del Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period	Zip Code Payment This Period	Nature of D	ng Balance at Close o	f This Pe
B. Full Name (Last, First, Middle Initial) of Del Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period	Zip Code Payment This Period	Nature of D	Debt (Purpose):	f This Pe
B. Full Name (Last, First, Middle Initial) of Del Mailing Address City State Outstanding Balance Beginning This Period Amount Incurred This Period	Zip Code Payment This Period	Nature of D	ng Balance at Close o	f This Pe

Payment 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) ▶

00

00

Outstanding Balance at Close of This Period

SCHEDULE D	(FEC	Form	3X)
DEBTS AND	OBLIGA	TIONS	3

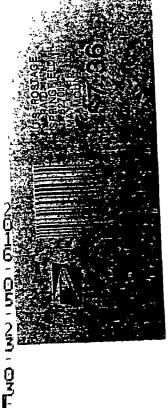
E

(Use separate schedule(s)

PAGE

xcluding Loans		r each pered line)	(check only one)
NAME OF COMMITTEE (In Full)			X 10
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		Outstandir	ng Balance at Close of This Period
	لب		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of D	Pebt (Purpose):
Mailing Address			
Mailing Address			
City State Zip Code			
Outstanding Balance Beginning This Period			
Amount Incurred This Period Payment This Period		Outstandii	ng Balance at Close of This Period
	<u></u>		
C. Full Name (Last, First, Middle Initial) of Debtor 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		Outstandi	ng Balance at Close of This Period
4) CUINTOTALO TEL DEL ATTI DE LA TEL DEL			0.0
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)			0.0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	nly) ▶		0.0





RECEIVED FED MAIL CERRE

7316 MAY 23

1525 S. Sixth St. | Springfield, IL 62703

HANSON Engineering | Planning | Allied Services

RETURN RECEIPT REQUESTED

FEDERAL ELECTION COMMISSION 999 E STREET N.W. WASHINGTON D.C. 20463

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate the second sec			
Hand Delivered	Date of Receipt		
Postmarked USPS First Class Mail	Date of Receipt		
USPS Registered/Certified	Postmarked (R/C) 5 / 17 / 16		
USPS Priority Mail	Postmarked		
USPS Priority Mail Express	Postmarked		
Postmark Illegible			
No Postmark			
Overnight Delivery Service (Specify):	Shipping Date		
Next Business Day Delivery			
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		
Other (Specify):	f Receipt or Postmarked		
PREPARER (3/2015)	5/23/16 DATE PREPARED		