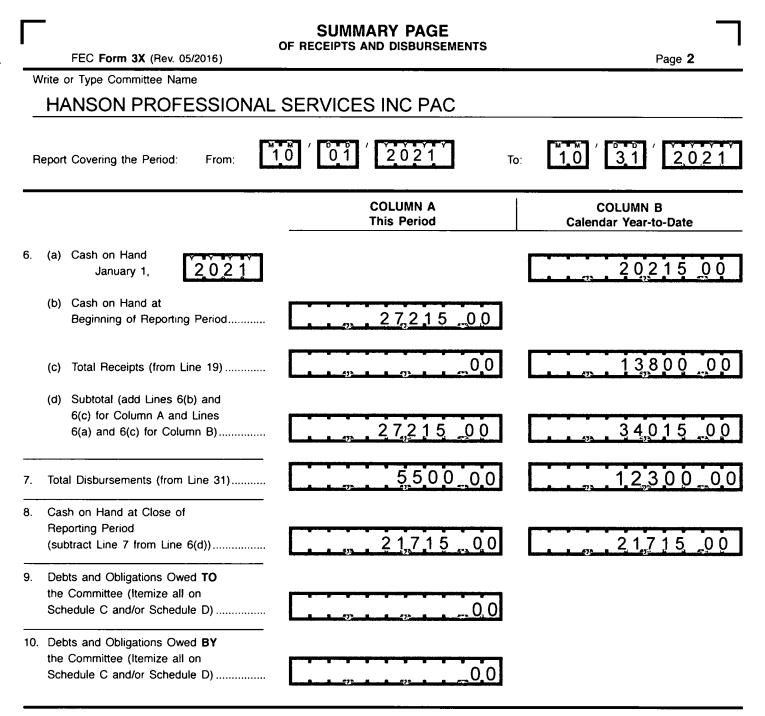
FEC FORM 3X	AND DIS	OF RECEI BURSEME An Authorized Cor		RECEIVED	
1. NAME OF COMMITTEE (in f	TYPE OR PRINT V	Example: over the	If typing, type lines.	12FE4M5	
L HANSON PR	OFESSIONAL SE	RVICES INC F	ΡΑÇ	<u>† 1</u>	
				<u> </u>	
ADDRESS (number and	street) [1525, SOU	ΙΤΗ \$ΙΧΤΗ \$ΤΙ	REET		
Check if different than previous reported. (AC		<u>, , , , , , , , , , , , , , , , , , , </u>		<u>[][</u>] [62	2703.] - []
2. FEC IDENTIFICA				STATE A	
C 0 0 4 0	6124	3. IS THIS REPORT	NEW (N) OR	AMEND (A)	DED
July 15 Quarterly October 1	Report (Q1) Report (Q2) Report (Q2) Repor	lection	May 20 (M5) Jun 20 (M6) Jul 20 (M7) ary (12P) ention (12C)	Aug 20 (M Sep 20 (M Oct 20 (M General (12G) Special (12S)	M9) Dec 20 (M12) (Non-Election Year Only) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 31 M Report (N Year Only	Report (YE) fid-Year lon-election /) (MY)		ral (30G)	Runoff (30R)	in the State of Special (30S)
5. Covering Period I certify that I have exa Type or Print Name of Signature of Treasurer	amined this Report and to th Treasurer RONDA K				20,21
NOTE: Submission of fa	alse, erroneous, or incomplete	information may subject	the person signing the	his Report to the pe	
Office Use Only					EC FORM 3X Rev. 05/2016



Qualified as multicandidate on 3-14-16.

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. 05/2016)

Page 3

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N	/rite or Type Committee Name					
– R	Report Covering the Period: From: 10 01 2021 To. 10 31 2021					
	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)	00	1380000			
	 (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii) 					
	 (b) Political Party Committees (c) Other Political Committees (such as PACs) 					
12.	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	<u> </u>	13,800,00			
13.	All Loans Received					
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)					
16.	(Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other					
	Political Committees 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))	473 <u>.</u> 475. 4°2.				
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	<u> </u>	13800.00			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	0.0	1380000			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

COLUMN A Total This Period

0

0.0

500

0

COLUMN B

Page 4

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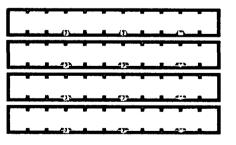
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Calendar Year-to-Date

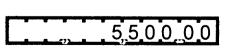
- **II. Disbursements** Operating Expenditures: 21. (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (i) (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 22. Transfers to Affiliated/Other Party Committees..... 23. Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures (use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)...... 25. 26. Loan Repayments Made
 - Loans Made......
 Refunds of Contributions To:

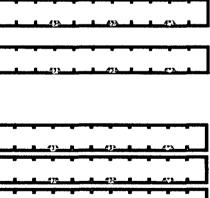
 (a) Individuals/Persons Other
 Than Political Committees
 - (b) Political Party Committees
 - (c) Other Political Committees (such as PACs).....
 - 29. Other Disbursements (Including Non-Federal Donations).....
 - 30. Federal Election Activity (52 U.S.C. § 30101(20))
 - (a) Allocated Federal Election Activity
 (from Schedule H6)
 (i) Federal Share
 - (ii) "Levin" Share.....

 - 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)......

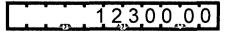


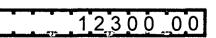
5,500.00











DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)	or Disbursements	Page 5
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than loans) (from Line 11(d), page 3)		13800.00
Total Contribution Refunds (from Line 28(d))	47 <u>2</u> 47 <u>2</u> 47 <u>2</u>	<i>4</i> 53 <i>4</i> 53 <i>4</i> 53
Net Contributions (other than loans) (subtract Line 34 from Line 33)	<u> </u>	13800.00
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.0	.0.0
Offsets to Operating Expenditures (from Line 15, page 3)		
Net Operating Expenditures (subtract Line 37 from Line 36)		
	III. Net Contributions/ Operating Expenditures Total Contributions (other than loans) (from Line 11(d), page 3) Total Contribution Refunds (from Line 28(d)) Net Contributions (other than loans) (subtract Line 34 from Line 33) Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) Offsets to Operating Expenditures (from Line 15, page 3) Net Operating Expenditures	FEC Form 3X (Rev. 05/2016) III. Net Contributions/ Operating Expenditures COLUMN A Total This Period Total Contributions (other than loans) (from Line 11(d), page 3) 0.0 Total Contribution Refunds (from Line 28(d))

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	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
	y information copied from such Reports and State for commercial purposes, other than using the na			
	NAME OF COMMITTEE (In Full)			
V	HANSON PROFESSIONA	L SER	VICES INC PAC	
A .	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	Date of Receipt
	Mailing Address			
	City	State	Zip Code	
	FEC ID number of contributing	C	····	Amount of Each Receipt this Period
	federal political committee. Name of Employer (for Individual)	Occi	upation (for Individual)	
	Receipt For:			_ −
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
В.	Full Name of Individual (Last, First, Middle Initial)) or Full O	rganization Name	Date of Receipt
υ.	Mailing Address			
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
— C.	Full Name of Individual (Last, First, Middle Initial,) or Full C	Organization Name	
U.	Mailing Address			
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		••••••	0.0

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 (check only one) 21b 22 23 26 27 28a 28b 28c 29 301	OF 1
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam	nents may not be sold or used ne and address of any politica	d by any person for the purpose of soliciting contributions from such comm	outions littee.
NAME OF COMMITTEE (In Full)	` ·		
HANSON PROFESSIONAL	L SERVICES INC	PAC	
Full Name (Last, First, Middle Initial) A.	· · · ·	Date of Disbursement	
AMERICAN COUNCIL OF ENGINEER	ING COMPANIES (AC	EC/PAC)	
Mailing Address 1015 15TH STREET NW SUITE 800			
City WASHINGTON DC	State Zip Code 20005	FEC Identification Number	
Purpose of Disbursement		C 00010868	1
CONTRIBUTION TO PAC TO SUPPORT FEDERAL Candidate Name	CANDIDATES		1
		Category/ Type Amount of Each Disbursement this	لسطيسية
Office Sought: House Disburser	ment For. Primary General	5,0.0.0	00
President	Other (specify) ▼	AMENDED REPOR	TTO CORRE
State:District:		OMITTED FROM OF	
Full Name (Last, First, Middle Initial) B.		Date of Disbursement	
Mailing Address			
City	State Zip Code	FEC Identification Number	
Purpose of Disbursement			1
Candidate Name		1	
		Category/ Amount of Each Disbursement this	; Period
Office Sought: House Disburser			14 3
President	Primary General Other (specify)		
State: District:		Memo item	
Full Name (Last, First, Middle Initial)			
С.		Date of Disbursement	
Mailing Address			
City	State Zip Code	FEC Identification Number	
Purpose of Disbursement	l		1
Candidate Name	O.1.1 Category/ Amount of Each Disbursement this	Period	
Office Sought: House Disburser	ment For:	Туре	<u> </u>
Senate	Primary General	L	
President	Other (specify)	Memo Item	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		5,000	00
		5000	
TOTAL This Period (last page this line number only)	,		

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) for each category of the	PAGE 1
Detailed Summary Page	FOR LI

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GE 1 OF 1

			Detailed Summary Page	FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (In F	-uli)			
HANSON PROF	ESSIONAL	SERVICE	ES INC PAC	
LOAN SOURCE Full Name (Last, First, Middle Initial)				
				General
Mailing Address				Other (specify) ▼
City		State	ZIP Code	
,				
Original Amount of Loan		Cumulative Pa	yment To Date Bala	nce Outstanding at Close of This Period
TERMS	rad		Date Due Interest Rate	
			Date Due Interest Rate	
	i			% (apr) Yes No
List All Endorsers or Gu 1. Full Name (Last, First,		o Loan Source	Name of Employer	۰
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7
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)	<u> </u>	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount	
City			Guaranteed Outstanding:	
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period Th	is Page (ontionel)			
				<u> </u>
OTALS This Period (last pa	age in this line onl	y)		,
arry outstanding balance of	only to LINE 3. Sci	hedule D. for thi	is line. If no Schedule D. carry forv	ward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS			(Use separate schedule(s) for each	PAGE 1 OF 1 FOR LINE NUMBER: (check only one)
			numbered line)	10
NAME OF COMMITTEE (IN Full) HANSON PROFESSIONAL				
A. Full Name (Last, First, Middle Initial) of Debte				Debt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period	I	1		
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Period
	······*			
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This Perioc
1) SUBTOTALS This Period This Page (optional)				<u>" </u>
2) TOTALS This Period (last page this line number only)			<u> </u>	<u> </u>
	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) (Use set set set set set set set set set s				PAGE 1 OF FOR LINE NUMBER: (check only one)
ME OF COMMITTEE (In Full) HANSON PROFESSIONA	L SERVIC	ES INC PAC	···	<u>.</u>
A. Full Name (Last, First, Middle Initial) of De	btor or Creditor		Nature of C	ebt (Purpose):
Mailing Address	Otata	Zip Codo		
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This f
B. Full Name (Last, First, Middle Initial) of Det	otor or Creditor		Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of This F
C. Full Name (Last, First, Middle Initial) of De	btor or Creditor		Nature of D	lebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Pa	yment This Period		ng Balance at Close of This F
SUBTOTALS This Period This Page (optional)			-;; <u> -;; -;</u>
TOTALS This Period (last page this line number only)				<u> </u>
) TOTAL OUTSTANDING LOANS from Schedu				O
ADD 2) and 3) and carry forward to appropriate	ate line of Summa	ary Page (last page o	only) 🕨	

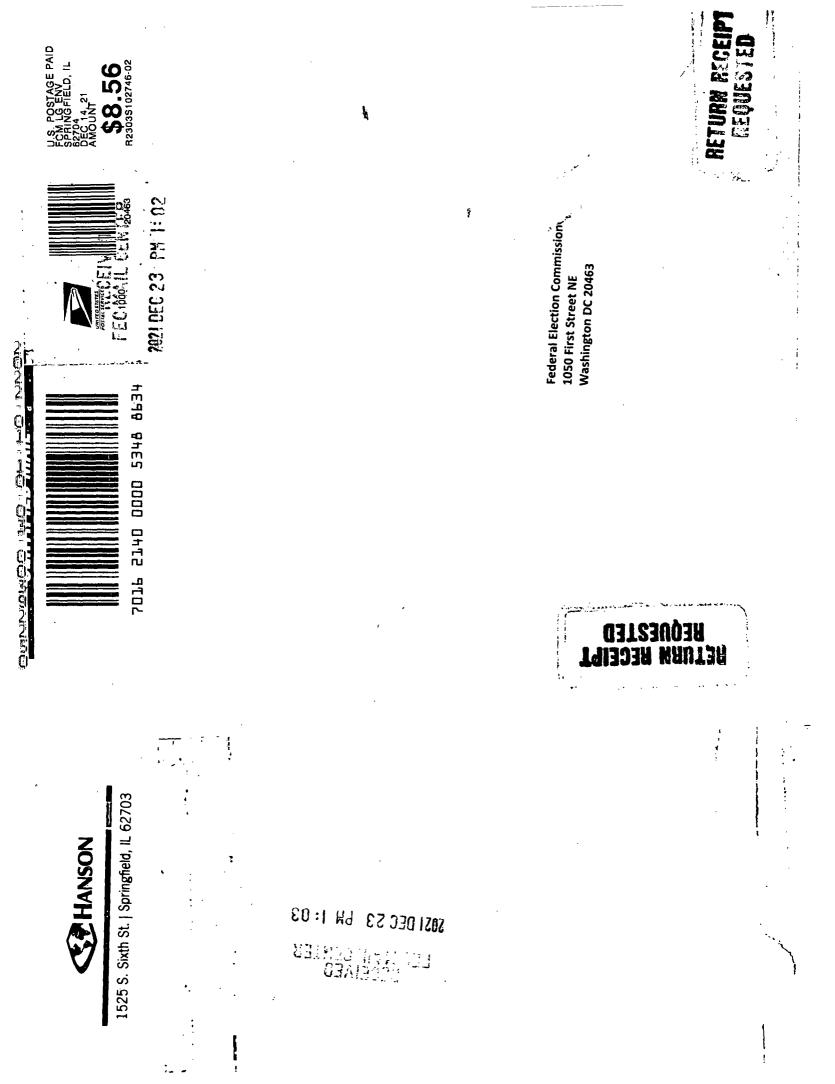
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
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USPS Priority Mail Express	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
	Next Business Day Delivery			
Received from House Records & Registrati	Date of Receipt on Office			
Received from Senate Public Records Offic	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
PREPARER	I/10/22 DATE PREPARED			
(3/2015)				

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