# 8039862356

#### FEC FORM 3X

Signature of Treasurer

FE5AN015

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FECHALL CENTER

7000 H 1 100 ffiger Use Quily ...

				2000 Harpflines U	se, Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: I over the lin	f typing, type	2FE4M5	44 0- 39 	
HAMSON PR	OFESSIONA	L SERUI	CES IN	G PAC		
	<u> </u>		<del>                                     </del>		لنستنط	
ADDRESS (number and street	et) [15125 150	UTH, STX	,T,H, ST,	<del></del>	لحسيسا	
Check if different than previously reported. (ACC)	B,P,R,I,NG, F	TELO		T4 1627	<u> </u>	
2. FEC IDENTIFICATION	N NUMBER ▼	CITY	S	TATE 🛦	ZIP CODE	
0004.06	124	3. IS THIS REPORT	NEW OR	AMENDED (A)		
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Rep July 15 Quarterly Rep October 15 Quarterly Rep January 31 Year-End Rep July 31 Mid-Y Report (Non-e Year Only) (M	port (Q1)  (c) 12-Day PRE-Elect Report for  port (Q2)  cort (Q3)  cort (YE)  (d) 30-Day POST-Ele Report for	Apr 20 (M4)  Primar ion the: Conve	May 20 (M5)  Jun 20 (M6)  Jul 20 (M7)  y (12P)  intion (12C)  al (30G)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S)  Runoff (30R)	Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)  Jan 31 (YE)  Runoff (12R)  in the State of  Special (30S)  in the State of	
5. Covering Period 0.3 01 2008 through 0.3 2008						
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 Tre	easurer Jo	Ellen K.	EIM			
	. / )					

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

Date

•	Office				[ ·			FEC FORM 3X
1	Use	•	•	į			. '	Rev. 12/2004
	Only		l '	ļ	· .			1101. 122004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

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Write or Type Committee Name		
	PROFESSIONAL SERVICES I	NC PAC
Report Covering the Period: Fr	rom: 03,008	To: 0,2 ' 3,9 ' 20,08
·	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	008	4950,00
(b) Cash on Hand at  Beginning of Reporting Peri	10d 445000	
(c) Total Receipts (from Line 19	9)	70.0000
(d) Subtotal (add Lines 6(b) an 6(c) for Column A and Line 6(a) and 6(c) for Column B	S mojecuje a majecuje a	11.9.5.0.00
7. Total Disbursements (from Line	31)50000	1,000,00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1095000	1095000
9. Debts and Obligations Owed To the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed B' the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified	d as a multicandidate committee. (see FEC FORM 1M)	
The second secon	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. 02/2003)

## **DETAILED SUMMARY PAGE** of Receipts

Page 3

Write or Type Committee Name

7 111103010 1101033101340	HANSON	Professional	Selvices	INC	PAC
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Rep	port Covering the Period: From:	1 01 2008 то	Q2 29 2008
·	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)	7,000,00	7,000,00
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	7,000,00	7000,00
ĺ	(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)	7,0,0,0,00	700000
	Transfers From Affiliated/Other Party Committees		
-	All Loans Received		
15.	Loan Repayments Received  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		
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds		
18.	(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))	7,000,00	7000,00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	1,000,00	7,00,000

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28039662

#### **DETAILED SUMMARY PAGE**

of Disbursements Page 4 FEC Form 3X (Rev. 02/2003) COLUMN A **COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4) 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 Committees..... Contributions to Federal Candidates/Committees and Other Political Committees..... 24. Independent Expenditures 26. Loan Repayments Made..... Than Political Committees ..... (b) Political Party Committees ..... 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)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

#### **DETAILED SUMMARY PAGE**

of Disbursements

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

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	·	Detailed Summary Page	_	13	116	- 11 <sup>1</sup>		16	· 17
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NAME OF COMMITTEE (In Full)	•								
Hanson Professional Service	s Inc.	PAC	· · ·	•					
Full Name (Last, First, Middle Initial)  A. Pecol Sergio	<u> A</u>		D	ate of	Receipt				٠.
Mailing Address 4517 Turti				ζà	,	Ţ] '	2 0	Ö	8
City Springfield	State 工L	Zip Code しスクート	Ai	mount	of Each I	Receip	ot this F	Period	
FEC ID number of contributing federal political committee.	C.				L-OL-L		1:	50	00
Hanson Professional Services	Occupation CEO	President						٠	
Receipt For:  Primary	_	Year-to-Date ▼ 750.00							
Full Name (Last, First, Middle Initial)  B. Pall Jeffery  Mailing Address			D	ate of	Receipt	<b>.</b>	777		
City Dances Rd.	State	Zip Code		0,2		<u> </u>	Buen-New	0_0	8
FEC ID number of contributing federal political committee.	C .	62520	Î	mount	of Each i	Receip	ot this i	eriod	00
Name of Employer Hanson Professional Services	Occupation VP -	evanueer							
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼						٠	
Full Name (Last, First, Middle Initial)  C. Keim, JO Ellen		· · · · · · · · · · · · · · · · · · ·	D	ate of	Receipt				
Mailing Address 15251 West Loami Roo				Ďά	/ 2	<u>্</u> য	2.0	0.0	8
New Berlin	State	Zip Code U2U7O		mount	of Each	Receij	ot this I	Period	
FEC ID number of contributing federal political committee.	C				- Paragramay		.50	) <u>0</u>	00
Name of Employer Hanson Professional Services Inc.	Occupation SVP1	CFO accountai	25						
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 50.0.0 (	3					· ·	

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

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Any information copied from such Reports and Statements	may not be pold or used by any no	13 14 15 16 17
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. Messmore James P.	•	Date of Receipt
Mailing Address	•	المندادية المعارات المعارات
1987 Brentwood Lane State	Zip Code	0,2 1,9 20,08
Wheaton IL	60187	. Amount of Each Receipt this Period .
FEC ID number of contributing federal political committee.		500,00
Name of Employer Hanson Professional Services Inc. Secondary		
n to Fare	te Year-to-Date ▼	
Other (specify)	.50,0,00	
Full Name (Last, First, Middle Initial)		Date of Preside
B. Cusick, Robert W. Mailing Address	<del></del>	Date of Receipt
City State	Zip Code	02/25/2008
Sprinfield IL	<u>62712</u>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500,00
Name of Employer Occupati	_	1.
Hanson Professional Services Exe		4 .
Primary General	te Year-to-Date ▼	
Other (specify)	A 45,00AO,0	
Full Name (Last, First, Middle Initial)  C. Vocaclyay David A		Date of Receipt
Mailing Address		
City_ State	Zip Code	02/19/2.0.0.8
Pittsboro IN	46167	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		
Hanson Professional Services VP	on EDGINEER	
Receipt For: Aggrega	te Year-to-Date ▼	1
Primary General Other (specify)	500,00	
SUBTOTAL of Receipts This Page (optional)		15,0,0,00
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	Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any Information copied from such Reports and St	latements may not be sold or used by any ner	
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 Servic	es Inc. PAC	
Full Name (Last, First, Middle Initial)		Date of Desci-t
A. Bartolomucci, Thomas Mailing Address	(A) E	Date of Receipt
9390 Old Indian T	Trail	02/15/2008
City	State Zip Code	Series Single Device Cold Supplier Series Se
Chatham	IL 62629	. Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Name of Employer Hanson Professional Services	AVP ENGINEER	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	According to the second se	•
Other (specify)	50,0,00	
Full Name (Last, First, Middle Initial)	•	Date of Bendant
B. Lundin, Tracy K. Mailing Address		Date of Receipt
Mailing Address	ndina	0211412008
City	Tenhan .	aventures Antelescial Seculturalismental
Springfield	IL 62707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	┫.
Hanson Professional Services	Serior VP engineer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General .	50000	
Other (specify)		
Full Name (Last, First, Middle Initial)	•	Date of Descript
C. Freitag Joan C. Malling Address		Date of Receipt
176 Maple Grove		02 20 2008
City	State Zip Code	mency   Restaurable frameworks
<u>Springfield</u>	IL 62712	Amount of Each Receipt this Period
FEC ID number of contributing	c	50000
federal political committee.	Township and the second second second second second	
Name of Employer Hanson Professional Services Inc.	Occupation MARKETING	
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Primary General	And the second s	11
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	Detailed Summary Page	11a   11b   11c   12   13   14   15   16   17					
Any information copied from such Reports and Sta	atements may not be sold or used by any pe						
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 Service	es Inc. PAC						
Full Name (Last, First, Middle Initial)  A. KNUCKEY, Todd	Δ	Date of Receipt					
	_						
Mailing Address 10604 BIACK IR		02 19 2008					
Louisville	State Zip Code 4029 (	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	500.00					
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Name of Employer Hanson Professional Services Inc.	Occupation VP-ENGINEER						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify)	50000						
	Lange Secretaries of The college and the college of						
Full Name (Last, First, Middle Initial)  B. WILKINSON EUGE	NS D	Date of Receipt					
Mailing Address	_						
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federal political committee.		50,0,0,0					
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Primary General .							
Other (specify) 🔻	<u> </u>						
Full Name (Last, First, Middle Initial)  C. Porrowman, Phill	PE	Date of Receipt					
N. W. A. I.							
Mailing Address 8205 W 15446 City		0.2 25 2.0.0 8					
Overland Park	State Zip Code KS 66223	Amount of Each Receipt this Period					
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Name of Employer Hanson Professional Services	Senior UP-engineer						
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ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)				
	Detailed Summary Page	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 per address of any political committee	son for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)						
Hanson Professional Services Inc.	PAC					
Full Name (Last, First, Middle Initial)		Date of Receipt				
A. McCree, John W. Malling Address		Date of necept				
2005 Oak Creek 1		03 14 20 08				
City Springfield State	Zip Code しょつり	. Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		35,0,00				
Name of Employer Hanson Professional Services Inc.	KINEER					
	Year-to-Date ▼					
Other (specify)	500,00					
Full Name (Last, First, Middle Initial)  B. COMCILA, ANTHONY	1 C	Date of Receipt				
Mailing Address 34 OKLAHOMA		0.2 2.5 2.00.8				
City Morton Itale	Zip Code - 61550	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		500,00				
Name of Employer Hanson Professional Services						
Receipt For: Aggregate	Year-to-Date ▼	<b>-</b> .				
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City State	Zip Code	Amount of Each Receipt this Period				
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•	Detailed Summary Page	21b 27	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Any information copied from such Reports and Statem	nents may not be sold or used	by any person	for the purpose of soliciting contributions
or for commercial purposes, other than using the name	ne and address of any political of	committee to s	olicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
HANSON PROT	LESSIONAL.	Serv	ICES INC PAC
Full Name (Last, First, Middle Initial)			Date of Disbursement
Volunteers for	Shimkus		Man / Dad / Varant
Mailing Address  Box 5458			03 38 3008
Spring Field	State Zip Code		
Purpose of Disbursement	~ 6270	<u> </u>	
political contribution	tederal candidate		Amount of Each Disbursement this Period
Candidate Marine John Shimko		Category/ Type	50000
Office Sought: House Disburser	ment For:	.,,,,,	general response and responsible for a state of the state
Senate President	Primary General		
State: IL District: 19	Other (specify) ▼		•
Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
Mailing Address			
City	State Zip Code		·.
Purpose of Disbursement	I		Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought:   House   Disburse	ment For:	Туре	
Senate	Primary General		•
President District	Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			· ·
5.	•		Date of Disbursement
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Mailing Address			
City	State Zip Code		
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Candidate Name	<b>L</b>		Amount of Each Disbursement this Period
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	ment For:		
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	NAME OF COMMITTEE (In Full)			_										
_	HANSON Pr		DIVIL	Sereul	<u>'C</u>	<u> </u>		1		<del>VA</del>	<u> </u>			
A.	Full Name (Last, First, Middle Initia	ai)						Date	of D	isburse	ement			
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	State: District:		Other (spec	:ify) 🔻				-						
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	State: District:	·												•

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

CHEDULE C (FEC Form :	5A)	Use separate schedule(s)	PAGE / OF /
DANS		for each category of the Detailed Summary Page	FOR LINE 13 OF FORM 3X
ME OF COMMITTEE (In Full)	,	······································	· · · · · · · · · · · · · · · · · · ·
HANSON I	PROFESSION AL	Sexuices	INC PAC
LOAN SOURCE Full Name (Last, I	First, Middle Initial)	E	lection:
		·  }	Primary General
Mailing Address			Other (specify)
City	State ZIP Co	ode	
Original Amount of Loan	Cumulative Payment To	Date Balance	a Outstanding at Close of This Po
TERMS Date Incurred	Date Due	Interest Rate	Secured:
( TYPY	<u>'''''''''</u>		% (apr) Yes
List All Endorsers or Guarantors (	if any) to Loan Source		
1. Full Name (Last, First, Middle In	itial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Ini	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed Outstanding:	لمسيميا
4. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	<del></del>
	·	Amount	
City	State ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (	optional)	······ }	$\mathcal{D}$
OTALS This Period (last page in this	s line only)		
		. Papatilus	ard to appropriate line of Summ

## SCHEDULE D (FEC Form 3X)

(Use separate schedule(s)

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EBTS AND OBLIGATIONS  xcluding Loans		for each numbered line)	(check only one)	<b>P</b> 9
		<u> </u>	L	10
NAME OF COMMITTEE (In Full)  HAUSON PROFE  A. Full Name (Last, First, Middle Initial) of Debtor of	ESSIONAL SE	RVICES	INC. PA	<del>2</del>
A. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor	Nature of E	Debt (Purpose):	
Mailing Address				
City State	Zip Code			
Outstanding Balance Beginning This Period		·		
Amount Incurred This Period	Payment This Period	Outstand	ing Balance at Close	of This Period
Autorit mounted time i direct	A STATE OF THE PARTY OF THE PAR		mg balance at close	01111010100
	Annalis Sankarda in Market Lad			
B. Full Name (Last, First, Middle Initial) of Debtor or	Creditor	Nature of I	Debt (Purpose):	
Mailing Address				
Maining Addition		ţ		
City State	Zip Code			
Outstanding Balance Beginning This Period				
Custaliting Parameter Degitting Time I direct				
				•
Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close	of This Period
	· wheeland a should be should be		here i i i i i i i i i i i i i i i i i i	
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of	Debt (Purpose):	
	·		( - (	
	· · · · · · · · · · · · · · · · · · ·		•	
Malling Address	•		•	
City	State Zip Code			
	* ·		<del></del>	<del></del>
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close	of This Perio
				- Jackson
1) SUBTOTALS This Period This Page (optional)				
2) TOTALS This Period (last page this line number of	nly)	>		0
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	>		0
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page of	only) >		O

SCHEDULE I	(FEC	Form 3X)
DEBTS AND	<b>OBLIGA</b>	TIONS

(Use separate

DEBTS AND OBLIGATIONS Excluding Loans	for each numbered line)	(check only one)	]9
NAME OF COMMITTEE (In Full)	nambered injer		<u> 7.10</u>
	SERVICES	INC PAC	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		ebt (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
B. 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  Amount Incurred This Period Payment This Period	Outstandi	ng Balance at Close of Thi	s Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of E	Debt (Purpose):	
		. , ,	
Mailing Address	· ·		
City State Zip Code			
Outstanding Balance Beginning This Period			
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	- Parameter		
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) ▶		0

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USPS Express Mail	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		
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