2018 - 10 - 24 - 0M - 00242551

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

		For Other Than A	An Authorized	Committee	ZV18 OC	124 AM 8	se Only
1. NAME OF COMMITT	EE (in full)	TYPE OR PRINT ▼		mple: If typing, r the lines.	type 12F	E4M5	J
HANSO	Ņ PŖĢĘĘS	SSIONAL SEI	RVICES IN	IC PAC	11111		
				1111			
ADDRESS (nu	imber and street)	1525 SOU	ГҢ ŞІХТН	STREET,	1 1 1 1		
than	ck if different previously rted. (ACC)	SPRINGFI	ELD , , ,		, <u> </u>	. 6270	Q3, - , , ,
2. FEC IDE	NTIFICATION N	UMBER ▼	CITY ▲	,	STATE		ZIP CODE ▲
C 0,	0.4.0.6.1.2	24	3. IS THIS REPORT	NEV (N)	V OR [AMENDED (A)	
(Choose (terly Reports: April 15 Quarterly Report (Counterly Report (Non-electic Year Only) (MY)	PRE-Ele Report f (d) 30-Day POST-E Report f	ection	Jun Jul Primary (12P) Convention (120		Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) Aunoff (30R)	in the State of Special (30S
	(TER)		Election on				in the State of
5. Covering	Period 1	0 0 1 7 2	018	through	10 /	17 20	18
		his Report and to the		wledge and beli	ef it is true, con	rrect and comple	ete.
Type or Print Signature of	Name of Treasure	JO ELLEN	REINI Perts		Date	10 / 1	8 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office				FEC FORM 3X
Use				Rev. 05/2016
 Only	ļ			

NOTE: TO: 24: ON: DOZGNESS

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Vrite	or	Type	Committee	Name

	HANSON PROFESSIONAL S	ERVICES INC PAC	
R	eport Covering the Period: From: 10	′ 0 1 ′ 2 0 1 8 то	1,0 / 1,7 / 2,0,18
	·	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2,0,18		10,615,00
	(b) Cash on Hand at Beginning of Reporting Period	10465 00	·
	(c) Total Receipts (from Line 19)	0,0	14,700.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10_465_00	25,315,00
7.	Total Disbursements (from Line 31)	3,000,00	17,850 00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7,465,00	7,465,00
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.0	

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

2018 - 10 · 24 · 0m · 0022420000

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Report Covering the Period: From:	/ <mark>0,1</mark> / 2,0,18 то	o: 10 / 17 / 2018
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.0	14700 0
(i) Itemized (use Schedule A)	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	0.0	14700.0
(b) Political Party Committees	A A 612 B B 612 A A 612 A	<u>, , , , , , , , , , , , , , , , , , , </u>
(c) Other Political Committees		
(such as PACs)		122 1 122 1 122 1
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		14700 0
Totals to Line 33, page 5)▶		<u> </u>
2. Transfers From Affiliated/Other		
Party Committees	A	423 1 423 1 4 423 1 4 4 7 3
3. All Loans Received		
3. All Loans Neceived		
A Lasa Banasanta Basaisan		
Loan Repayments Received Offsets To Operating Expenditures	A	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)		
6. Refunds of Contributions Made		
to Federal Candidates and Other		·
Political Committees		
7. Other Federal Receipts		
(Dividends, Interest, etc.)		
8. Transfers from Non-Federal and Levin Funds 🟲		
(a) Non-Federal Account		
(from Schedule H3)		
r		
(b) Levin Funds (from Schedule H5)	- 1 - 273 - 1 - 4 - 273 - 1 - 1 - 4°2 - 1	
Ī		
(c) Total Transfers (add 18(a) and 18(b))	N N 472 N A 473 N A 475 N A 475 N A	
•	· ·	
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	0.0	14700.0
ь	7 7 233 7 7 235 8 A 235 AV	
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	0.0	14700 0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	70.07	- Outched Tearto-bate
(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	0.0
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to		
Federal Candidates/Committees and Other Political Committees	3000,00	17,850,00
24. Independent Expenditures (use Schedule E)	22 22 22 22 22 22 22 22 22 22 22 22 22	
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)	1 0 1 0 1 1 0 1 1 0 1 1 0 1 1 1 0 1	
26. Loan Repayments Made	423	
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 (Including		
Non-Federal Donations)		
30. Federal Election Activity (52 U.S.C. § 3010	1(20))	
(a) Allocated Federal Election Activity	(20))	
(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))		
ŕ		772
31. Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	3000 00	17850 00
00 Total Fadaral District		
32. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	300000	17850 00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

TEO TOTAL SX (Hev. 03/2010)	1 age 3		
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)	0.0	14,700.00	
34. Total Contribution Refunds (from Line 28(d))			
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.0.0	14,7,00,.00	
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)	0.0	0.0	

SCHEDULE A (FEC Form 3)	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one) 11a
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
HANSON PROFESSIO	·		
Full Name of Individual (Last, First, Middle A	e Initial) or Full C	organization Name	Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C .		7 And
Name of Employer (for Individual)	Осс	upation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]
Full Name of Individual (Last, First, Middl B. Mailing Address	e Initial) or Full C	Organization Name	Date of Receipt
City	State	Zip Code	Amount of Each Pagaint this Pariod
FEC ID number of contributing federal political committee.	c :		Amount of Each Receipt this Period
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICE Receipt For:	S INC.	supation (for Individual)	Memo Item
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]
Full Name of Individual (Last, First, Middl	e Initial) or Full C	Organization Name	Date of Receipt
Mailing Address City	State	Zip Code	
FEC ID number of contributing federal political committee.	C .		Amount of Each Receipt this Period
Name of Employer (for Individual)	Occ	cupation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	ll)		0,0
TOTAL This Period (last page this line num	nber only)		0.0

SCHEDULE B (FEC Form 3X)	
ITEMIZED DISBURSEMENTS	Use separate so for each catego

TEMIZED DISBURSEMENTS	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)							
Any information copied from such Reports and Statem	Detailed Summary Page nents may not be sold or used	28a 28b 28c 29 30b by any person for the purpose of soliciting contributions						
		committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)								
/ HANSON PROFESSIONAL	SERVICES INC I	PAC						
Full Name (Last, First, Middle Initial)		Date of Disbursement						
RODNEY ILLINOIS VICTORY FU								
Mailing Address 499 SOUTH CAPITOL STREET SI		10 10 2018						
- ·	State Zip Code	FEC Identification Number						
WASHINGTON DC Purpose of Disbursement	20003	C00687632						
CONTRIBUTION TO PAC TO SUPPORT FE	EDERAL CANDIDATE	011						
Candidate Name		Category/ Amount of Each Disbursement this Period						
N/A Office Sought: House Disbursen	nent For:	Type 100000						
	Primary General							
President State: District:	Other (specify) ▼	Memo Item						
Full Name (Last, First, Middle Initial)								
B		Date of Disbursement						
LAHOOD FOR CONGRESS	10 10 2018							
PO BOX 10735								
City	State Zip Code	FEC Identification Number						
Purpose of Disbursement	01012	$\begin{array}{c} \bullet \bullet \bullet \bullet \\ \bullet \bullet \bullet \bullet \bullet \end{array}$						
CONTRIBUTION TO FEDERAL CAN	DIDATE	011						
Candidate Name		Category/ Amount of Each Disbursement this Period						
DARIN LAHOOD Office Sought: X House Disbursen	Type 2,0.0.0,0.0							
_ <u> </u>	Primary X General							
1 1 1 1 1	Other (specify)	Memo Item						
State: District: 18 Full Name (Last, First, Middle Initial)								
C.		Date of Disbursement						
		MAM / DAD / ARABARA						
Mailing Address		لصبحا لحا لما						
City	State Zip Code	FEC Identification Number						
Purpose of Disbursement								
Candidate Name	O.11 Category/ Amount of Each Disbursement this Period							
24		Type Calculation Control of Calculation Contr						
Office Sought: House Disbursen	ment For: Primary General							
President	Mama lam							
State: District:	Other (specify) ▼	Memo Item						
SUBTOTAL of Disbursements This Page (optional)		3,0,0,0,0						
TOTAL This Period (last page this line number only))	300000						

SCHEDULE C (FEC Form 3X) LOANS

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

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

			Detailed Summary Page FOR LINE 13 OF FORM 3X		
AME OF COMMITTEE (In Full)					
HANSON PROFESS	SIONAL	SERVICES I	NC PAC		
LOAN SOURCE Full Name (La	st, First Mir	dle Initial)	☐ Memo Item		
(200	,	,	Primary		
Mailing Address			General Cther (crecity)		
Mailing Address			Other (specify) ▼		
City	 ,	Ctota: _::=	Code		
City		State ZIP	Code		
Original Amount of Loan		Cumulative Payment	To Date Balance Outstanding at Close of This Period		
		<u> </u>			
TERMS Date Incurred		Date D	due Interest Rate Secured:		
مجمعا / لعموا / لعمير	400	Mam / DAD /	TO THE TOTAL PROPERTY OF THE TOTAL PROPERTY		
	<u></u> L	أ لحصا لحصا	% (apr) Yes No		
List All Endorsers or Guaranto		o Loan Source			
1. Full Name (Last, First, Middle	Initial)		Name of Employer		
			- Committee		
Mailing Address			Occupation		
City	State	ZIP Code	Amount (Company Compa		
Oity	State	Zii Code	Guaranteed		
2. Full Name (Last, First, Middle	Initial		Outstanding:		
2. Full Name (Last, First, Middle	nnu ai)		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		
	State	ZII COUE	Amount Guaranteed		
A Full Name /Last Flora Maid II	Initial		Outstanding:		
4. Full Name (Last, First, Middle	: mual)		Name of Employer		
Mailing Address			Occupation		
			Сосираноп		
City	State	ZIP Code	Amount		
			Guaranteed Outstanding:		
SUBTOTALS This Period This Pag	e (optional)	***************************************			
TOTALS This Period (last page in	TOTALS This Period (last page in this line only)				
Carry outstanding balance only to	LINE 3, Sc	hedule D, for this line	e. If no Schedule D, carry forward to appropriate line of Summary.		

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

(Use separate schedule(s) for each

FOR LINE NUMBER: (check only one)

PAGE

X	9
	10

NAME OF	COMMIT	IFF (In Full)	
---------	--------	-------	----------	--

cluding Loans			numbered line)	10	
AME OF COMMITTEE (In Full)				·	
HANSON PROFESSIONAL	SERVIC	CES INC PAC		· .	
A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	Nature of Debt (Purpose):	
Mailing Address					
City	State	Zip Code		•	
Outstanding Balance Beginning This Period	I	,			
Amount Incurred This Period	Pa	ayment This Period	Outstandir	ng Balance at Close of This Period	
		<u></u>			
B. Full Name (Last, First, Middle Initial) of Debtor	r or Creditor		Nature of D	ebt (Purpose):	
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period					
Amount Incurred This Period	. Pa	ayment This Period	Outstandii	ng Balance at Close of This Period	
C. Full Name (Last, First, Middle Initial) of Debte	or or Creditor		Nature of D	oht (Durnoss)	
C. Full Name (Last, First, Middle Millar) of Debt	or or creditor		Nature of D	ebt (Purpose):	
Mailing Address	· · · · · · · · · · · · · · · · · · ·				
City	State	Zip Code			
Outstanding Balance Beginning This Period			<u>I</u> .		
Amount Incurred This Period	Pa	ayment This Period	Outștandii	ng Balance at Close of This Period	
) SUBTOTALS This Period This Page (optional)				0_0	
<u> </u>					
2) TOTALS This Period (last page this line numbe	r only)		<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) ▶

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

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE 1

П	9
X	10

OF 1

TANIAL OF COMMINITIES (III I dil)	
LIANCON DDOCECCIONAL	CEDVICES

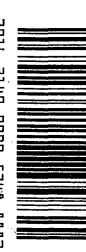
ME OF COMMITTEE (In Full) HANSON PROFESSIONAL	SERVIC	ES INC PAC	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Pa	ayment This Period	Outstanding Balance at Close of This Period
27 1 27 1 27 1	A 215.		
B. Full Name (Last, First, Middle Initial) of Debt	tor or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Pa	ayment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Det	btor or Creditor		Nature of Debt (Purpose):
<u> </u>			
Mailing Address			
City	State	Zip Code	<u> </u>
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Pa	ayment This Period	Outstanding Balance at Close of This Period
SUBTOTALS This Period This Page (optional))		0,0
TOTALS This Period (last page this line numb	per only)		> 0.0
TOTAL OUTSTANDING LOANS from Schedul		·	
ADD 2) and 3) and carry forward to appropria	ate line of Summ	nary Page (last page on	niy)▶

Springfield, IL 62703

RETURN RECEIPT REQUESTED

Federal Election Commission 1050 First Street NE Washington DC 20463

70-80: 94: 05: 00-05: 0



Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to	COMING DOCUMENTS
Hand Delivered	Date of Receipt
Postmarked USPS First Class Mail	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
	Postmarked
USPS Priority Mail Express	·
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Off	Date of Receipt ice
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
of	10-24-18
(3/2015)	DATE PREPARED