FEC FORM 3X	AN	PORT OF D DISBU Other Than An A	RSEN	IENTS	S		RECEI FEC MAIL	CENTER
1. NAME OF COMMITTEE (in		OR PRINT ▼		nple: If typir the lines.	ng, type	12FE4M5		+++
ADDRESS (number and	d street)	DNAL SERVI 525, SOUTH :			<u></u>			
than previous reported. (AC				<u>L. I. J. A.</u>			62703	
2. FEC IDENTIFIC			IS THIS REPORT	KNU	NEW N) OR		ENDED	
 4. TYPE OF REP (Choose One) (a) Quarterly Rep 	(-	Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)		May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep 2	20 (M8)	Nov 20 (M11) (Non-Election Year Onty) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October	/ Report (Q1) / Report (Q2) . 15 / Report (Q3)	(c) 12-Day PRE-Election Report for the		Primary (12P	») [General (Special (1	12G)	Runoff (12R)
July 31	J Report (YE) Mid-Year Non-election	(d) 30-Day POST -Election		General (300	G) (Runoff (30	in the State	of Special (30S)
Terminat (TER)	ion Report	Report for the	: ction on	M M /	й т о /	Y # Y # Y # Y	in the State	1 1
5. Covering Period	0.9	01 202	20	through	0,9	, 30, ,	2020	
I certify that I have ex Type or Print Name o	-	port and to the best ONDA K FOL	•	vledge and I	belief it is true	e, correct and	complete.	
Signature of Treasure	, Kor	der KG	Ollert	D	D	ate <u>1</u> 0	12	2020
NOTE: Submission of t Office Use Only	alse, erroneous,	or incomplete informa	ation may sub	bject the per	son signing th	is Report to th	e penalties of 55 FEC FOI Rev. 05/	RM 3X

ł

Þ

ř.

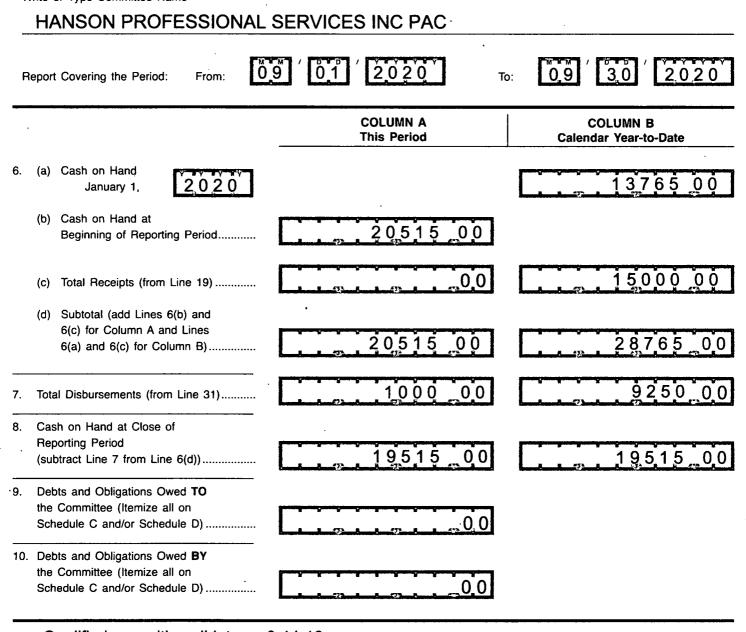
.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name



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)

Write or Type Committee Name

Page 3

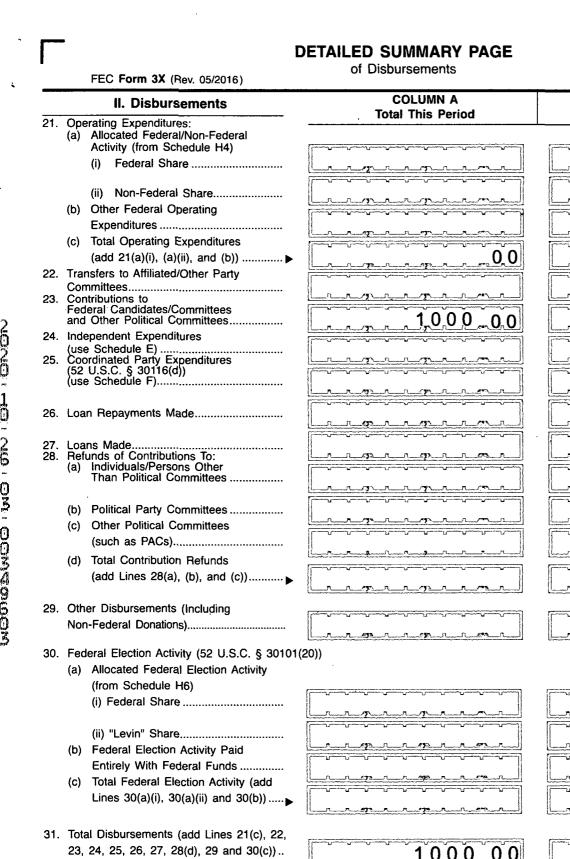
1.1.1

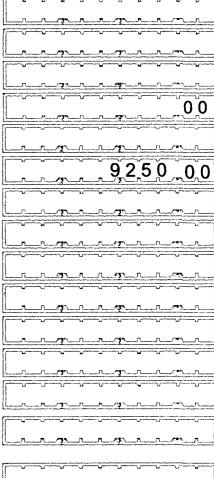
ITM				
Report Covering the Period: From:				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees				
(i) Itemized (use Schedule A)		1,500,0,0		
(ii) Unitemized				
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)		15000 00		
(b) Political Party Committees		L		
(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)		15000 0		
2. Transfers From Affiliated/Other				
Party Committees				
		۲۰ ۲۰		
3. All Loans Received				
4. Loan Repayments Received				
5. Offsets To Operating Expenditures		L		
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)				
5. Refunds of Contributions Made				
to Federal Candidates and Other		(*************************************		
Political Committees				
7. Other Federal Receipts	L			
(Dividends, Interest, etc.)				
3. Transfers from Non-Federal and Levin Fund	te	L		
(a) Non-Federal Account	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
(from Schedule H3)				
	[m	<u> </u>		
(b) Levin Funds (from Schedule H5)	L_n_n_n_n_n_n_n_n_			
	<u> </u>			
(c) Total Transfers (add 18(a) and 18(b))	<u></u>			
 Total Receipts (add Lines 11(d), 	<u> </u>	$\{ \underline{ \dots}, \underline{ \dots}$		
12, 13, 14, 15, 16, 17, and 18(c))				
). Total Federal Receipts	المحمد بمسم ومعمر ومعمر ومعمر ومعمر ومعمر ومعمر والمحمو والمحمو والمحمو			
(subtract Line 18(c) from Line 19)				
· · · ·		L_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r_r		

Page 4

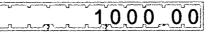
COLUMN B

Calendar Year-to-Date

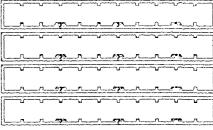


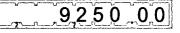


- 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....











DETAILED SUMMARY PAGE

of Disbursements

Page 5 FEC Form 3X (Rev. 05/2016) COLUMN A COLUMN B III. Net Contributions/ **Total This Period Calendar Year-to-Date Operating Expenditures** 33. Total Contributions (other than loans) 5000 00 0.0 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) 000 00 5 0.0 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 0.0 O 0 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures 0.0 0.0

ł

SCHEDUL	ΕA	(FEC	Form	3X)
ITEMIZED	REC	EIPTS	i	

ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)
· · · · · · · · · · · · · · · · · · ·		Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
HANSON PROFESSION	AL SERV	VICES INC PAC	
Full Name of Individual (Last, First, Middle Initia	al) or Full Org	ganization Name	Date of Receipt
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)	Occup	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼	
Full Name of Individual (Last, First, Middle Initia	al) or Full Org	ganization 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)	Occu	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Y	′ear-to-Date ▼	
Full Name of Individual (Last, First, Middle Initi	al) or Full Org	ganization Name	Date of Receipt
Mailing Address			
City	State	Zip Code	Amount of Each, Receipt this Period
FEC ID number of contributing federal political committee.	C .		
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼	
Primary General		<u>></u>	

·

1

I

SCH ITE

S	CHEDULE B (FEC Form 3X)	r		·									-	
	EMIZED DISBURSEMENTS	Use separate schedule(s)					NUMBER: PAGE 1 OF 1 y one)							
	Detailed Summary Page				F	21b 28a	22		23 28c		26 29	F	27 30b	
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the name	ments may n me and addr	ot be sold or us ess of any politic	sed b cal c	oy an omm	y perso ittee to	on for t solicit	he pur contrit	pose o putions	of so froi	olicitin m suc	g co sh ca	ontrib ommi	utions ttee.
Ν	NAME OF COMMITTEE (In Full)			•										
\mathbb{Z}	HANSON PROFESSIONA	L SERV	ICES INC	C P	AC	>								ι.
Å.	Full Name (Last, First, Middle Initial)						Date	e of Di	sburse	mer	nt			
	Ailing Address		.				Ő	ٌ ١	1	å		2 Ő	2	δÌ
	824 S MILLEDGE AVE STE 10	01						است		ابيند				=
	ATHENS	State GA	Zip Code 30605				FEC	ldenti	ficatio	n Ni	ımber			_
	Purpose of Disbursement			-			С	0 0	6	1	94	8	6	
	CONTRIBUTION TO FEDERAL C	ANDIDA			01 atego		Ame		Fach	Diel	bursor	non	t this	Period
	DARIN LAHOOD				Туре					_	_			_
	Office Sought: X House Disburse Senate	ment For: Primary	X General						9 <u>5</u>		<u>1,0</u>	0	<u>.0</u> ,	0.0
	State: IL District: 18	Other (spec					\mathbf{N}	Memo	ltem	Entir com Laho	e contril nittee w od for C	oution as all congri	to joir ocateo ess.	t fundraisin I to
_	Full Name (Last, First, Middle Initial)													
B.							Date	e of Di	sburse	mer	nt 			
	Mailing Address								L	D	Ĺ	- • · ·		
	City	State	Zip Code				FEC	Identi	ficatio	n Nu	ımber			
	Purpose of Disbursement		l 		11		С	······						
	Candidate Name				atego	لب iry/	Amo	ount of	Each	Dist	ourser	neni	t this	Period
	Office Sought: House Disburse	ment For:			Туре		Г		T	-				
		Primary	General				<u>ا م</u>		3 		2	.	<u></u>	Barris and
	State: District:	Other (spec	ify)					Memo	ltem					
с.	Full Name (Last, First, Middle Initial)						Date	e of Di	eburec	mor				
Ο.		·							D	D	/ 7		τγ	T W T
	Mailing Address						L		L		L		-	
	City	State	Zip Code				FEC	Identi	ficatio	n Nu	umber			
	Purpose of Disbursement	•	<u></u>	Γ			С		a					
	Candidate Name				1 atego	Jul	Amo	ount of	Each	Dist	ourser	neni	t this	Period
	Office Sought: House Disburse	ment For:			Туре		Г		.			1		
	Senate	Primary	General								12		.	·····
	State: District:	Other (spec	ify) ▼					Memo	ltem					
									• •		1 0	<u>–</u>	0	0.0
S	UBTOTAL of Disbursements This Page (optional).					• •	Ļ		25 I	_				00
ד	OTAL This Period (last page this line number only)							- *		1,0	0_0	0	00

FEC Schedule B (Form 3X) Rev. 05/2016

NONG - HO - NO - OW - ONAQOO

В.

С.

۶ Α.

I

|

i

SCHEDULE C (FEC Form 3X) LOANS

.

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

PAGE 1 OF 1 FOR LINE 13'OF FORM 3X

tors (if any) t dle Initial)	State ZI Cumulative Payme Date Date o Loan Source	
	Cumulative Payme	nt To Date Balance Outstanding at Close of This Due Interest Rate Secured: Yes
		Due Interest Rate Secured:
		Yes [
	o Loan Source	Name of Employer
		Occupation
State	ZIP Code	Amount Guaranteed Outstanding:
dle Initial)	<u>-</u>	Name of Employer
		Occupation
State	ZIP Code	Amount Guaranteed Outstanding:
dle Initial)		Name of Employer
		Occupation
State	ZIP Code	Amount Guaranteed Outstanding:
dle Initial)		Name of Employer
		Occupation
State	ZIP Code	Amount Guaranteed Outstanding:
age (optional)		······
	dle Initial) State dle Initial) State dle Initial) State age (optional)	dle Initial) State ZIP Code dle Initial) ZIP Code State ZIP Code dle Initial) ZIP Code

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding	Loans
· · · · · · · · · · · · · · · · · · ·	

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

X 9 10

OF 1

PAGE 1

HANSON PROFESSIONAL SERVICES INC PAC

A. Full Name (Last, First, Middle Initial) of Debto			Nature of Debt (Purpose):
Mailing Address			
· · · · · · · · · · · · · · · · · · ·			
City	State	Zip Code	
Outstanding Balance Beginning This Period		·····	
Amount Incurred This Period	Pa	yment 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	
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
Mailing Address		==: =	
	·		
City	State	Zip Code	
Outstanding Balance Beginning This Period			
			<u>.</u>
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Perio
SUBTOTALS This Period This Page (optional)			•
· · · · · · · · · · · · · · · · · · ·			
TOTALS This Period (last page this line number	only)		
TOTALS This Period (last page this line number			
TOTALS This Period (last page this line number TOTAL OUTSTANDING LOANS from Schedule ADD 2) and 3) and carry forward to appropriate	C (last page o	only)	

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

	•••			
Exclu	din	g L	oar	IS

(Use separate schedule(s) FOR LINE NUMBER: for each numbered line)

9 **X** 10

OF 1

PAGE 1

(check only one)

NAME OF COMMITTEE (In Full) HANSON PROFESSION	NAL SERVIC	ES INC PAC	• •			
A. Full Name (Last, First, Middle Initial) c	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor					
Mailing Address						
City	State	Zip Code	<u> </u>			
Outstanding Balance Beginning This Pe	eriod		····· I. · · · · · · · · · · · · · · · ·			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period			
B. Full Name (Last, First, Middle Initial) of	f Debtor or Creditor		Nature of Debt (Purpose):			
Mailing Address			`			
City	State	Zip Code				
Outstanding Balance Beginning This Pe Amount Incurred This Period		yment 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 Pe Amount Incurred This Period		yment This Period	Outstanding Balance at Close of This Period			
1) SUBTOTALS This Period This Page (opt	tional)					
2) TOTALS This Period (last page this line	number only)					
3) TOTAL OUTSTANDING LOANS from Sc	chedule C (last page of	oniy)				
4) ADD 2) and 3) and carry forward to app	ropriate line of Summ	ary Page (last page on	ly) ►O_O			

.

E		FEC MAIL CLIN 2020 OCT 22 PM 3: 40
	Federal Election Commission 1050 First Street NE Washington DC 20463	
		DATES HOUSE
S. Sixth St. Springfield, IL 62703	Ë.	Laise

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.		
Hand Delivered	Date of Receipt	
Postmarked USPS First Class Mail	Date of Receipt	
USPS Registered/Certified	Postmarked (R/C) 10 15 20	
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):	of Receipt or Postmarked	
PREPARER	10/23/20 DATE PREPARED	
(3/2015)		

Ì

.

I.

.