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**FEC** FORM 3X

## REPORT OF RECEIPTS FEC AND DISBURSEMENTS 2022 MAY 20 AM 11: 14 For Other Than An Authorized Committee

	ļ.							Office U	se Only	
1. NAME OF COMMITT	= CEE (in full)	TYPE OR P	RINT ▼		ample. If ty er the lines.		12FI	E4M5		
[H <sub>i</sub> A <sub>i</sub> N <sub>i</sub> S <sub>i</sub> C	$[H_1A_1N_1S_1O_1N_1 \ P_1R_1O_1F_1E_1S_1S_1I_1O_1N_1A_1L_1 \ S_1E_1R_1V_1I_1C_1E_1S_1 \ I_1N_1C_1 \ P_1A_1C_1 \ I_1I_1I_1I_1I_1I_1I_1I_1I_1I_1I_1I_1I_1I$									
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ADDRESS (nu	imber and street)	1,5,2,	5 <sub>1 1</sub> 8 <sub>101</sub> 1	u <sub>l</sub> t <sub>i</sub> h <sub>i i</sub>	S <sub>l</sub> i <sub>l</sub> x <sub>l</sub> t	<sub>ı</sub> h <sub>ı ı</sub> S <sub>ı</sub> t	<sub>l</sub> r <sub>l</sub> e <sub>l</sub> e <sub>l</sub>	t, , , , ,		لببب
than	ck if different previously rted. (ACC)	$[S_1p_1r_1]$	$i_1 n_1 g_1 f_1$	i <sub>l</sub> e <sub>l</sub> l <sub>l</sub> d			LI_L	[6,2,7	0,3]-	
2. FEC IDE	NTIFICATION N	UMBER ▼		CITY A			STATE 4	<b>\</b>	ZIP COI	DE 🛦
Co	0 4 0 6 1	2 4	3	3. IS THIS REPORT	. 🗹	NEW (N) OR		AMENDED (A)		
(Choose C	DF REPORT Dne)  terly Reports:  April 15 Quarterly Report (Counterly Report (Non-electic Year Only) (MY)  Termination Report (TER)	Q2) (c) Q3) YE) (d)	12-Day PRE-Election Report for the  30-Day POST-Election Report for the	lection on	) <u> </u>	n (12C)	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) neral (12G) ecial (12S)	in the State o	Special (30S)
5. Covering Period 04 01 2022 through 04 30 2022										
Type or Print Name of Treasurer  RONDA K FOLKERTS  RONDA K FOLKERTS										
Signature of Treasurer Rocka K. Follows Date 05 06 2022										
NOTE: Submis		neous, or inco	mplete inforn	nation may s	subject the p	erson signing	this Repo	FEC	es of 52 FOR Rev. 05/20	M 3X

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## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 05/2016)	or rizotal to kind diodonotimento	· Page <b>2</b>
	rite or Type Committee Name HANSON PROFESSIONAL SEI	PVICES INC DAC	
_		VICES INC FAC	
R	eport Covering the Period: From	04 01 2022 To	04 <sup>m</sup> / 30 <sup>p</sup> / 2022 <sup>v</sup> /
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand  January 1,  2022		21,715.00
	(b) Cash on Hand at Beginning of Reporting Period	30,065.00	
	(c) Total Receipts (from Line 19)		<sub>15</sub> ,200.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30,665.00	36,915.00
7.	Total Disbursements (from Line 31)	400.00	6,650.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30,265.00	30,265.00
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	275 275 275	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
_ _	his committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	
	<del></del>	For further information contact:	
		Federal Election Commission 1050 First Street, N.E. Washington, DC 20463	

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

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## **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

	frite or Type Committee Name HANSON PROFESSIONAL SERVICES INC PAC		
R	eport Covering the Period. From:	01 / 2022 To	04 / 04 / 2022
	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	600.00	45 200 00
	(i) Itemized (use Schedule A)	(7) (7)	15,200.00
	(ii) Unitemized	5 - 173 - 1 - 173 - 1 - 173 - 1 - 173 - 1	672
	(iii) TOTAL (add		45,000,00
	Lines 11(a)(i) and (ii)▶	600.00	15,200.00
	(b) Political Party Committees		275 A
	(c) Other Political Committees		
	(such as PACs)		7) 40
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	600.00	
	Totals to Line 33, page 5)▶	600.00	15,200.00
12.	Transfers From Affiliated/Other		
	Party Committees	(7) I (7) I (7)	475
	<u> </u>		
13.	All Loans Received	(2)	
	Loan Repayments Received	77	-72
15.	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	A 475 A 475 A 4 475 A	475 4 475 4 475
16.	Refunds of Contributions Made to Federal Candidates and Other		
	Political Committees		
17	Other Federal Receipts	77	49. 49.
17.	(Dividends, Interest, etc.)		
18	Transfers from Non-Federal and Levin Funds	()	(1)
	(a) Non-Federal Account		
	(from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
	(b) Leviii i dilas (iloin ocheadic ilo)	7 0 0	
	(c) Total Transfers (add 18(a) and 18(b))		
	<b></b>		
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	600.00	15,200.00
20	Total Federal Receipts		
	(subtract Line 18(c) from Line 19)▶	600.00	15,200.00
	And the second of the second o		10,200.00

## **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
21.	Operating Expenditures:	Total Tills Fellou	Calendar real-to-bate
	(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share		
	(i) Tederal Silare	49-49-49-49-49-49-49-49-49-49-49-49-49-4	
	(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		
<b>23</b> .	Contributions to		
	Federal Candidates/Committees and Other Political Committees	400.00	6,650.00
24	Independent Expenditures		23 1 23 1 23 1
	(use Schedule E)		
25.	Coordinated Party Expenditures	535	<u> </u>
	(52 U.S.C. § 30116(d)) (use Schedule F)		
	(200	48	
26	Loan Repayments Made		
20.	Louis Hopaymonto Mado	() <u>)</u>	
27	Loans Made		
28.	Refunds of Contributions To:	<b>3 1 2 1 2 2</b>	
	(a) Individuals/Persons Other Than Political Committees		
	man Folitical Committees	75 75 75	
	(h) Califord Body Committees		
	(b) Political Party Committees	475	
	(c) Other Political Committees		
	(such as PACs)	, , , , , , , , , , , , , , , , , , , ,	4 4 77 4 4 47
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶		
	•	2) 2) 2) 2)	<i>y</i>
29.	Other Disbursements (Including		
	Non-Federal Donations)		
		72 (2	- 173 - 175
30.	Federal Election Activity (52 U.S.C. § 30101(20	0))	
	(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))▶		
	, and the second	673 A	R A A 22 R A A A A A A A A A A A A A A A
31	Total Disbursements (add Lines 21(c), 22,		
٥	23, 24, 25, 26, 27, 28(d), 29 and 30(c))		
	20, 27, 20, 20, 27, 20(4), 20 414 00(6))	400 00	6,650.00
32	Total Federal Disbursements		
JŁ.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	400.00	
			6,650.00

D	FT	ΔΗ	_ED	SI	IMN	IΔR	V	PΔ	GF

of Disbursements

FEC Form 3X (Rev. 05/2016)	or bisbursements	Page <b>5</b>
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)	400.00	6,650.00
34. Total Contribution Refunds (from Line 28(d))	100 100 100 100 100 100 100 100 100 100	4D 4D C2
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	400.00	6,650,00
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)	273 A 273	

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

Temilized Receipts	SCHEDULE A (FEC FOIII 3A)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF1 (check only one)
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions of tor commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  ANNON PROFESSIONAL SERVICES INC PAC  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  A. Charles Snowden  Mailing Address 165 Carnauba Way  City  Ponter (specify) and primary  General  Other (specify) and primary  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Mailing Address  City  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Mailing Address  City  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Aggregate Year-to-Date Y  Perimary  General  Other (specify) and Aggregate Year-to-Date Y  Primary  General  Other (specify)	ITEMIZED RECEIPTS	for each category of the	
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)  ANSON PROFESSIONAL SERVICES INC PAC  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  A. Charles Showden  Mailing Address  165 Carnauba Way  City  Ponte Vedra  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  Primary General  City  State  Zip Code FEC ID number of contributing federal political committee.  Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Mailing Address  City  State  Zip Code  Anount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  City  State  Zip Code  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Primary General  Other (specify)  Aggregate Year-to-Date ▼  Primary General  Other (specify)  Aggregate Year-to-Date ▼  Primary General  Other (specify)		Detailed Summary Page	
NAME OF COMMITTEE (in Full)  HANSON PROFESSIONAL SERVICES INC PAC  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  A. Charles Snowden  Mailing Address 165 Carrauba Way  City Ponte Vedra FEC 1D number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Individual (Last, First, Middle Initial) or Full Organization Name  C.  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Aggregate Year-to-Date Y  Primary General  Other (specify) Y  State  Zip Code  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Memo Item			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Charles Snowden Making Address 165 Carnauba Way City Ponte Vedra FEC ID number of contributing federal political committee.  Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC Primary General Other (specify)   Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mailing Address City State Zip Code FEC ID number of contributing federal political committee.  Name of Employer (for Individual) Receipt For: Primary General Other (specify)   Full Name of Individual) Receipt For: Primary General Other (specify)   Full Name of Individual) City State Zip Code FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   Aggregate Year-to-Date   Amount of Each Receipt this Period	<del></del>		
A. Charles Snowden  Mailing Address 165 Carnauba Way  City Promary General Other (specify)   FEC ID number of contributing federal political committee.  Mailing Address  City State Promary General Other (specify)   FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   FEUI Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Mailing Address  City  State  Zip Code  FEC ID number of contributing federal political committee.  Aggregate Year-to-Date   FUII Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Mailing Address  City  State  Zip Code  FEC ID number of contributing federal political committee.  Amount of Each Receipt this Period  Amount o	HANSON PROFESSIONAL SERVICES INC P	PAC	
Making Address 165 Carnauba Way City Ponte Vedra FEC ID number of contributing federal political committee.  Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC Receipt For: Primary General Other (specify)  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Mailing Address City State City State City Fecelipt For: Receipt For: Primary General Other (specify)  Full Name of Employer (for Individual) Fecelipt For: City State City State City State City Cocupation (for Individual) Fecelipt For: City State City Aggregate Year-to-Date V City Committee City Aggregate Year-to-Date V City City Cocupation (for Individual)  Fecelipt For: City Aggregate Year-to-Date V City Committee City Aggregate Year-to-Date V City City Cocupation (for Individual)  Date of Receipt this Period  Amount of Each Receipt this Period  City Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period  City Amount of Each Receipt this Period  Amount of Each Recei		Organization Name	
165 Carnauba Way City Ponte Vedra  FL  State 32081  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC Receipt For:   General   Other (specify) ▼  State   Zip Code   Aggregate Year-to-Date ▼   Other (specify) ▼  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Mailing Address City State   Zip Code   Amount of Each Receipt this Period    Date of Receipt    Amount of Each Receipt this Period    Amount of Each Receipt this Period    Amount of Each Receipt    Amount of Each		<u>-</u> -	Date of Receipt
FC ID number of contributing federal political committee.  Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC Receipt For:   General Other (specify)   Aggregate Year-to-Date   Amount of Each Receipt this Period	165 Carnauba Way		04 12 2022
Superior   Second   State	7		Amount of Each Receipt this Period
HANSON PROFESSIONAL SERVICES INC PAC    Receipt For:	- II . I		600.00
Primary   General Other (specify)   Genera	HANSON PROFESSIONAL SERVICES INC PAC VF	, ,	Memo item
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B.  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)   Aggregate Year-to-Date   C.  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  Date of Receipt  Memo Item  Date of Receipt  Memo Item  Memo Item  Memo Item  Receipt For:  Aggregate Year-to-Date   Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date   Aggregate Year-to-Date   Occupation (for Individual)  Memo Item	Aggregate		
B. Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing tederal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)   CITY  Aggregate Year-to-Date   CITY  State Zip Code  Amount of Each Receipt this Period  Date of Receipt This Period  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing tederal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date   Aggregat	Other (specify) ▼	600.00	
Mailing Address  City  State Zip Code  FEC ID number of contributing tederal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify) ▼  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  C.  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  The Code  Amount of Each Receipt this Period  C.  Amount of Each Receipt this Period	• • • • • • • • • • • • • • • • • • • •	Organization Name	Data of Receipt
Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify) ▼  Mailing Address  City State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date ▼  Primary General Other (specify)			May , Day , Yarayay
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C.  Mailing Address  City  State  Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General  Other (specify)  Aggregate Year-to-Date ▼  Other (specify)  Aggregate Year-to-Date ▼	City State	Zip Code	Amount of Each Receipt this Period
Receipt For:    Primary	¥ 16.4		Amount of Each Necept this Feriod
Primary	Name of Employer (for Individual)  Occ	cupation (for Individual)	Memo Item
C.    Full Name of Individual (Last, First, Middle Initial) or Full Organization Name   Date of Receipt		e Year-to-Date ▼	7
C:  Mailing Address  City  State Zip Code  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)  Date of Receipt  Amount of Each Receipt this Period  Memo Item		ΛΑΑ	
City  State  Zip Code  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary  Other (specify)  State  Zip Code  Amount of Each Receipt this Period  Memo Item  Aggregate Year-to-Date ▼		Organization Name	Date of Receipt
Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date ▼			
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date ▼	City State	Zip Code	Amount of Each Receipt this Period
Receipt For:  Primary General Other (specify)  Aggregate Year-to-Date ▼			
Primary General Other (specify)	Name of Employer (for Individual)  Occ	cupation (for Individual)	Memo Item
Other (specify)		e Year-to-Date ▼	7
SUPTOTAL of Receipts This Regar (actions))		-9)	
I CHEST CLUB OF L'OCCUPIO This L'OCCU (actions)		<del></del>	600.00
SUBTOTAL of Receipts This Page (optional)		· · · · ·	

ITEMIZED DISBURSEMENTS	l lan congrete cobodulo(s)		FOR LINE I (check only 21b 28a	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		, <b></b>		
HANSON PROFESSIONAL SERVICE	ES INC F	PAC		
Full Name (Last, First, Middle Initial)				Date of Dishusement
A. RODNEY FOR CONGRESS				Date of Disbursement
Mailing Address PO BOX 344				04 08 2022
City S TAYLORVILLE II	state	Zip Code 62568		FEC Identification Number
Purpose of Disbursement	<u></u>	<u>02000</u>		C 0 0 5 2 1 9 4 8
Candidate Name		<b>L</b>	0 1 1 Category/	Amount of Each Disbursement this Period
RODNEY DAVIS Office Sought:  House Disburser	ent For:	<u> </u>	Туре	400.00
Senate 🗸	Primary	General		<del>~ 400</del> .00
State:   District: 13	Other (speci	ify) ▼		Memo Item
Full Name (Last, First, Middle Initial)				
В.				Date of Disbursement
Mailing Address				M • M / 6 • 6 / • • • • • • • • • • • • • • •
City	State	Zıp Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name				And A / 5   Bill   District
			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser	nent For: Primary	General		42 47 47
	Other (speci			Memo Item
State District: Full Name (Last, First, Middle Initial)				
C.				Date of Disbursement
Mailing Address				M M / O D / V V V V V
		1		
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement		<u> </u>		c
Candidate Name			Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For		Type	
Senate	Primary	General		72 1 72 1 4 72
State: President District:	Other (spec	ify) ¯ <b>▼</b>		Memo Item
CHRIOTAL of Dishussessets This Days (set 1)		·	<u>.                                    </u>	400.00
SUBTOTAL of Disbursements This Page (optional)	•••••		<u> </u>	
TOTAL This Period (last page this line number only).			······ <b>&gt;</b>	400.00

## SCHEDULE C (FEC Form 3X) **LOANS**

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

PAGE 1

FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SERVICES INC PAC Election: LOAN SOURCE Full Name (Last, First, Middle Initial) Primary General Mailing Address Other (specify) ▼ City ZIP Code State Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period दुक्त ए १ । ११ च प्रकारिक प्राप्त कार्यकृति ए एउपक्रम् । व्यक्ति ५ ५ (व्यक्षि والمراجع المربيع المعيان المراجع المراجع المحاجل المهاجع والمراجع والمراجع والمراجع والمراجع والمراجع one make the contract the carry of the carry to a Training of the Store of the **TERMS** Date incurred Date Due Interest Rate Secured: 1 3 0 70 1 7 V 7 V Yes No % (apr) Arrest 2 Co List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation <u>इस्त भन्न एक्ट्रिक्ट १५५ मध्ये ४८०० व्यक्ति । १ १ १५ ४</u> City State ZIP Code Amount Guaranteed Outstanding: hadada (1900) bir beri da (1901) a 1 . . . **. .** . . . 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation State ZIP Code City Amount Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: ج**و**ري داريه بيد**و**ل جانبيغيا ۾ Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code City State Amount Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... 0.0 TOTALS This Period (last page in this line only)..... .00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 1
FOR LINE NUMBER: (check only one)

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OF 1

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AME OF COMMITTEE (In Full)	· · - · - · - · · - · · · · · · ·			
HANSON PROFESSIONAL	SERVIC	CES INC PAC	,	
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of Debt (Purpo	ose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period				
and referred that the confidence of the first terms				
Amount Incurred This Period	Participation of	ayment This Period	Outstanding Balance	at Close of This Period
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B. Full Name (Last, First, Middle Initial) of Debto			Nature of Debt (Purpo	
				,
Mailing Address				•
		1 7:- 0-4		
City	State	Zip Code		
Outstanding Balance Beginning This Period		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Amount Incurred This Period	P:	ayment This Period	Outstanding Balance	at Close of This Period
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C. Full Name (Last, First, Middle Initial) of Debi	or or Creditor		Nature of Debt (Purpo	ose):
Mailing Address				
City	State	Zip Code		
Outstanding Release Resigning This Resid				
Outstanding Balance Beginning This Period				
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Amount Incurred This Period	Ρ.	ayment This Period	Outstanding Balance	e at Close of This Period
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2) TOTALS This Period (last page this line number	r only)		▶	, 0.0
) TOTAL OUTSTANDING LOANS from Schedule	C (last page	only)	<b>&gt;</b>	, 00
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ADD 2) and 3) and carry forward to appropriate	e line of Sumn	nary Page (last page o	only) ▶	<b>,</b> , , , , , 0, 0 ;

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

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 1
FOR LINE NUMBER: (check only one)

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OF 1

NAME OF COMMITTEE (In Full)					
HANSON PROFES	SIONAL	SERV	ICES I	NC F	PAC

HANSON PROFESSIONAL S	SERVIC	ES INC PAC			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):		
Mailing Address					
Спу	State	Zip Code			
A CO	इ.स. १ (द्रम्य) शहर <b>मि</b>	ayment This Period আৰু ১৮ কুলোই এল্বেফাল্য সক্ষা ক্রিকা তেন্ত্রতা ইচছ প্রথমিকা অফ্রাইন শ্রীক্রিকের			
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):		
Mailing Address		· · · · · · · · · · · · · · · · · · ·	-		
City	State	Zip Code			
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Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period  Amount Incurred This Period	• • • • • • • •	ayment This Period	Outstanding Balance at Close of This Period		
) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	. 0.0		
TOTALS This Period (last page this line number	only)	<b>&gt;</b>	.0.0		
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