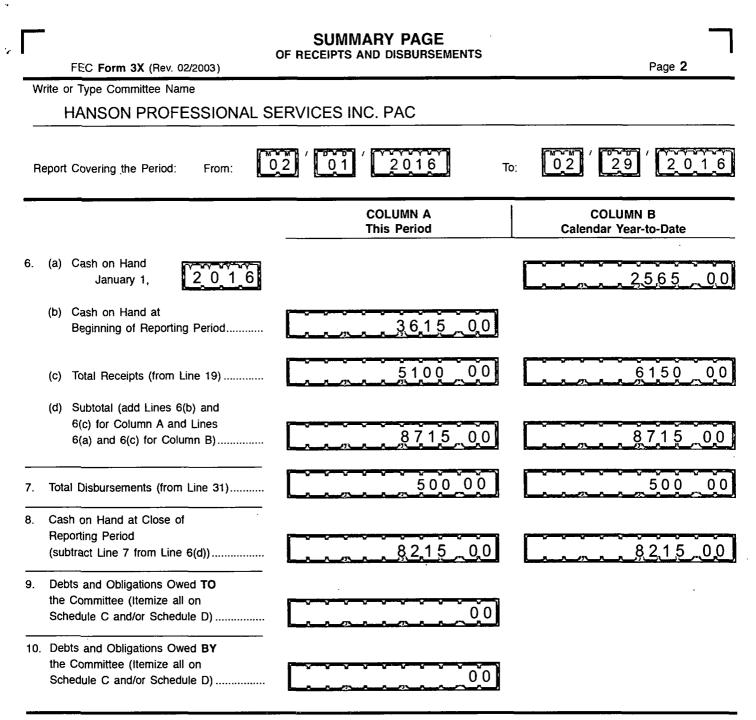
FEC FORM 3X	AND DIS	OF RECEIP BURSEMEN An Authorized Comm	TS	FEC MA	EIVED IL CENTER 28 PM 1:06
1. NAME OF COMMITTEE (in 1	TYPE OR PRINT V	Example: If over the line		2FE4M5	
ADDRESS (number and Check if differ than previous		DUTH SIXTH	STREET		
2. FEC IDENTIFICA	ATION NUMBER V				
C 00406	6124	3. IS THIS REPORT	NEW (N) ; OR	AMENDED (A)	
July 15 Quarterly October Quarterly January Year-End July 31 Report (Year On	Report Due On: Due On: Due On: (c) 12-Day PRE-El Report PRE-El Report 15 (Report (Q2) 15 (c) 12-Day PRE-El Report 15 (d) 30-Day POST-	lection for the: Convent Election on	ion (12C)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S)	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 5. Covering Period 6. 0.2 ' 0.1 ' 2.016' through 6. 0.2 ' 2.9 ' 2.016' 7. 1.5 ' 2.016' 					
NOTE: Submission of f Office Use Only FE6AN026	alse, erroneous, or incomplete	information may subject the	person signing this	FEC	es of 2 U.S.C. §437g. FORM 3X Rev. 12/2004

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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

X

[DET. FEC Form 3X (Rev. 06/2004)	AILED SUMMARY PAGE of Receipts	Page 3
w	rite or Type Committee Name HANSON PROFESSIONAL SERVIO	CES INC. PAC	
R	eport Covering the Period: From:	01 2016 To	02 29 2016
_	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
12.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)	<u>5,100,00</u> <u>5,100,00</u> <u>5,100,00</u> <u>5,100,00</u>	
14.	Loan Repayments Received		
	Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other		
	Political Committees Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)		
	(b) Levin Funds (from Schedule H5)		
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5,100,00	6,1,5,0_0,0
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)►	510000	615000

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. Disbursements

COLUMN A

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal		L
	Activity (from Schedule H4)		
	(i) Federal Share		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))►	00	0
2.	Transfers to Affiliated/Other Party		
	Committees		
3.	Contributions to		
	Federal Candidates/Committees and Other Political Committees	500 00	500 0
4	Independent Expenditures		
•••	(use Schedule E)		
5.	Coordinated Party Expenditures		
	(2 U.S.C. §441a(d)) (use Schedule F)		
96	Loan Repayments Made		
.0.	Loan nepayments made		
7	Loans Made		
8.	Refunds of Contributions To:		<u> </u>
	(a) Individuals/Persons Other		
	Than Political Committees		
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		ويسمحن المتعاوية والمتعاونة والمتعاونة والمتعاونة والمتعاونة والمتعاونة والمتعاونة والمتعاونة والمتعاونة والمتعاو
	(add Lines 28(a), (b), and (c))▶		
	(add 2.1.00 20(a), (b), and (b))		
a	Other Disbursements		
.9.			
ທ	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
	(ii) "Levin" Share		
		<u> </u>	
	(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))►		
	Total Diaburgamenta (add Lines Of (s), 60		
51.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	500.00	500_0
2	Total Federal Disbursements	· · · · · · · · · · · · · · · · · · ·	
<i>،</i> د.			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	500 00	500 0

FE6AN026

DETAILED SUMMARY PAGE

of 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) 	5100 00	6150 00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5,100 00	6150 00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	00	00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	00	00

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FEC Form 3X (Rev. 02/2003)

FE6AN026

SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 1 OF 5
, , ,	Use separate schedule(s)	(check only one)
TEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12
	Detailed Summary Page	
Any information copied from such Reports and Stat	ements may not be sold or used by any no	┺┉┺╤┺╴╼┻╴╹╺╍┸╶┠╍╴╎╍╹╴╻╍╢╴╢╍╴
or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full)		
/ HANSON PROFESSIONAL	SERVICES INC. PAC	
Full Name (Last, First, Middle Initial)		
BRADFORD, WILLIAM, C.		Date of Receipt
Mailing Address 1460 SHADWELL CIRCLE		
	01-1- 7- 0-1-	
City HEATHROW	State Zip Code FL 32746	
		Amount of Each Receipt this Period
FEC ID number of contributing	C	500 00
federal political committee.		
	Occupation	-
HANSON PROFESSIONAL SERVICES INC.	SR VP	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify)	5.0.0.00	
Full Name (Last, First, Middle Initial)		
BSACHTLEBEN, ROD		Date of Receipt
		02 04 2016
525 BIG HORN BASIN CT		
City WILDWOOD	State Zip Code MO 63011	
		Amount of Each Receipt this Period
FEC ID number of contributing		250 00
federal political committee.		
Name of Employer	Occupation	
HANSON PROFESSIONAL SERVICES INC.	VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	250 00	
Full Name (Last, First, Middle Initial)		Data of Descipt
NELSON, JOHN, W.		Date of Receipt
Mailing Address 3712 PARADOR DR		
City	State Zip Code	- I have his
NAPERVILLE	IL 60564	Amount of Each Receipt this Period
EEC ID number of contributing	β−γ−υ−υ−υ−υ−υ−υ− η	
FEC ID number of contributing federal political committee.		250 00
•		
	Occupation	
HANSON PROFESSIONAL SERVICES INC.	VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	250 00	
<u> </u>		<u> </u>
		1000 00
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number of		
TOTAL This Period (last page this line number or	ну) 🕨	·

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 2 OF 5	
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)	
	Detailed Summary Page	X 11a 11b 11c 12	
		13 14 15 16 17	
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an			
NAME OF COMMITTEE (In Full)			
HANSON PROFESSIONAL SEF	NICES INC. PAC		
Full Name (Last, First, Middle Initial)			
A. MESSMORE, JAMES P Mailing Address		Date of Receipt	
815 COMMERCE DRIVE, SUITE 200			
City State	Zip Code		
OAK BROOK IL	60523	Amount of Each Receipt this Period	
FEC ID number of contributing		500.00	
federal political committee.		500 00	
Name of Employer Occupa			
HANSON PROFESSIONAL SERVICES INC	SR VP		
	ate Year-to-Date ▼		
Primary General Other (specify) ▼	500 00		
	<u> </u>		
Full Name (Last, First, Middle Initial)	······································		
B. MCDONALD JR, DAVID R		Date of Receipt	
Mailing Address			
4700 ROSLYN RD City State	Zip Code		
DOWNERS GROVE	-	Amount of Each Receipt this Period	
FEC ID number of contributing			
federal political committee.	<u></u>	250 00	
Name of Employer Occupa	tion		
HANSON PROFESSIONAL SERVICES INC	AVP		
Receipt For: Aggreg	ate Year-to-Date ▼	-	
Other (specify)	<u>250,00</u>		
Full Name (Last, First, Middle Initial)			
C. COOMBE, JOHN P		Date of Receipt	
Mailing Address		ليمتحدثنها القمقا القميسا	
7030 GRASSLAND CT City State	Zip Code		
SARASOTA FL	34241	Amount of Each Receipt this Period	
FEC ID number of contributing	······································		
federal political committee.	<u></u>	500 00	
Name of Employer Occupa	ition	_	
HANSON PROFESSIONAL SERVICES INC.	EXEC VP		
Receipt For: Aggreg	ate Year-to-Date ▼	-1	
Primary General	· · · · · · · · · · · · · · · · · · ·		
Other (specify)	500 00		
SUBTOTAL of Receipts This Page (optional)		1250 00	
TOTAL. This Period (last page this line number only)	••••••		

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 3 OF 5		
· · · ·	Use separate schedule(s)	(check only one)		
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12		
		13 14 15 16 17		
Any information copied from such Reports and Statements r				
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 SER	VICES INC. PAC			
Full Name (Last, First, Middle Initial) A. POTTS, GARY J		Date of Receipt		
Mailing Address 12215 CHEROKEE ST		02 19 2016		
City State	Zip Code			
LEAWOOD KS	66209	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		500 00		
Name of Employer Occupation		_		
HANSON PROFESSIONAL SERVICES INC	SR VP			
	e Year-to-Date ▼	-		
Primary General Aggregation				
Other (specify)	500 00			
Full Name (Last, First, Middle Initial) B. POCHOP, MICHAEL		Date of Receipt		
Mailing Address				
2413 SW HICKORY LANE		02 19 2016		
City State	Zip Code			
LEE'S SUMMIT MO	64082	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		350,00		
Name of Employer Occupation	on	-		
HANSON PROFESSIONAL SERVICES INC.	VP			
Receipt For:	e Year-to-Date ▼			
Primary General				
Other (specify)	<u>350</u> 00			
Full Name (Last, First, Middle Initial)				
C. CUSICK, ROBERT W Mailing Address		Date of Receipt		
40 VILLA GROVE		0,2 0,1 20,16		
City State	Zip Code			
SPRINGFIELD IL	62712	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		500 00		
Name of Employer Occupation				
HANSON PROFESSIONAL SERVICES INC.	EXEC VP			
Persint For:				
Primary General	te Year-to-Date ▼			
Other (specify) ▼	500 00			
SUBTOTAL of Receipts This Page (optional)		1,350,00		
TOTAL This Period (last page this line number only)		00		

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S	CHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 4 OF 5		
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••		Detailed Summary Page	X 11a 11b 11c 12		
	y information copied from such Reports and Stateme	intermet he cold or used by any no	13 14 15 16 17		
	for commercial purposes, other than using the name				
Ν	NAME OF COMMITTEE (In Full)				
\mathbb{Z}	HANSON PROFESSIONAL S	ERVICES INC. PAC			
A.	Full Name (Last, First, Middle Initial) MOLL, JAMES W		Date of Receipt		
	Mailing Address 1850 W LAUREL				
	City Sta SPRINGFIELD IL	ate Zip Code 62704			
			Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	<u> </u>	250 00		
	Name of Employer Occu	upation	1		
	HANSON PROFESSIONAL SERVICES INC.	VP	_		
	Receipt For: Agg	regate Year-to-Date ▼			
	Other (specify)	,2,50,00			
	Full Name (Last, First, Middle Initial)				
В.			Date of Receipt		
	Mailing Address 2469 MALMAISON		02 08 2016		
	City St	ate Zip Code			
	BELVIDERE	61008	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		250 00		
	Name of Employer Occu	upation			
	HANSON PROFESSIONAL SERVICES INC	VP	_		
		regate Year-to-Date ▼			
	Other (specify) ▼	<u> </u>			
_	Full Name (Last, First, Middle Initial)				
U.	SCHRADER, MATTHEW H Mailing Address				
	6319 EDGE WATER DR		02 09 2016		
		ate Zip Code			
	WATERLOO IL	62298	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		250 00		
		upation	1		
	HANSON PROFESSIONAL SERVICES INC	VP	_		
Receipt For: Aggregat		regate Year-to-Date ▼	.		
	Other (specify) ▼	250 00			
Γ	UBTOTAL of Receipts This Page (optional)		750.00		
	OTAL This Period (last page this line number only)	····· •			

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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 5 OF 5		
ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)		
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12		
	<u>l</u>	13 14 15 16 17		
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)		·····		
/				
Full Name (Last, First, Middle Initial)		Data of Descipt		
A. FREITAG, JOAN C Mailing Address		Date of Receipt		
176 MAPLE GROVE		02 09 2016		
	ate Zip Code			
SPRINGFIELD	IL 62712	Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	Lange and the second	500,00		
Name of Employer Occ	upation	-		
HANSON PROFESSIONAL SERVICES INC	SR VP			
	regate Year-to-Date ▼			
Other (specify)	500 00			
	500 00			
Full Name (Last, First, Middle Initial)				
B. BIGGS, MINA		Date of Receipt		
Mailing Address				
3221 FALCON PT	ate Zip Code			
SPRINGFIELD		Amount of Each Descript this Deriod		
		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		250 00		
Name of Employer Occ	upation			
HANSON PROFESSIONAL SERVICES INC.	VP			
Dessing Com	regate Year-to-Date ▼	-		
Primary General	•			
Other (specify) ▼	<u>, , , , 2,50 , 0,0</u>			
Full Name (Last, First, Middle Initial)		+		
C.		Date of Receipt		
Mailing Address				
City Si	ate Zip Code			
		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.				
Name of Employer Occ	upation			
Receipt For:	regate Year-to-Date ▼	-1		
Primary General				
Other (specify)	<u>,</u>			
CURTOTAL of Dessing This Dave (750.00		
SUBTOTAL of Receipts This Page (optional)	······			
TOTAL This Period (last page this line number only)	·····	5,1,0,0,00		
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EIMIZED DISBORSEMENTS tor each category of the Delated Summary Page 210 212 22	CHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 1_OF 1	
Detailed Summary Page 27 38a 280 29 39 30 Number opied from such Reports and Statements may not be old or used by any person for the purpose of solicing contributions from such contrelations from such contrelations from such contrelati	TEMIZED DISBURSEMENTS				
is or commercial purpose, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTER (in Full) HANSON PROFESSIONAL SERVICES INC. PAC Full Name (Last, First, Middle Initial) RODNEY FOR CONGRESS Maling Address Control Construction		Detailed Summary Page			
HANSON PROFESSIONAL SERVICES INC. PAC Full Name (Last, First, Middle Initia) RODNEY FOR CONGRESS Maling Address City State CONSTRUCTION TO FEDERAL CANDIDATE Contraction Previous State City State					
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address C/O 55 WEST MONROE, SUITE 940 City State Zip Code Purpose of Disbursement Other (spacify) Contract Surget: President City State State: IL City State State: IL City State Disbursement City State: Disbursement For: Primary General Other (spacify) State State: Disbursement For: Purpose of Disbursement City			•		
RODNEY FOR CONGRESS Date of Disbursement Mailing Address C/O 55 WEST MONROE, SUITE 940 City State Zip Code CONTRIBUTION TO FEDERAL CANDIDATE O 1 1 Candidate Name O 1 1 Contraction Name State Disbursement Contraction Name Disbursement For: O 1 1 Control Sought: Mailing Address Disbursement For: O 1 1 Control Sought: State: Disbursement For: O 1 1 State: IL Disbursement For: O 1 1 President Other (specify) Other (specify) Other (specify) Mailing Address City State Zip Code Purpose of Disbursement Disbursement For: O 1 1 Category' Office Sought: House Disbursement For: O 1 1 Category' Office Sought: House Disbursement For: O 1 1 Category' Office Sought: House Disbursement For: O 1 1 Category' Office Sought: House Disbursement For: O 1 1 Category' Office Sought:			,		
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C/Ó 55 WEST MONROE, SUITE 940 City State Zip Code CONTRIBUTION TO FEDERAL CANDIDATE Q11 Candidate Name Disbursement For: State Disbursement For: Senate Disbursement For: Senate Disbursement For: State: L Other (specify) ↓ Amount of Each Disbursement Disbursement For: Senate Disbursement For: President Q11 City State City State President Disbursement For: President Q11 Candidate Name Q11 Candidate Name Disbursement For: President Other (specify) ↓ State: Disbursement City State City State City Senate President Disbur	RODNEY FOR CONGRESS				
ÚHCAGO IL 60603 Purpose of Disbursement CONTRIBUTION TO FEDERAL CANDIDATE Image: Contract of Each Disbursement this Period Candidate Name President Disbursement For: Image: Contract of Each Disbursement for: State: IL Disbursement For: Image: Contract of Each Disbursement for: Image: Contract of Each Disbursement State: IL Disbursement For: Image: Contract of Each Disbursement State: IL Disbursement Image: Contract of Each Disbursement City State Zip Code Purpose of Disbursement Image: Context of Each Disbursement this Period City State Zip Code Purpose of Disbursement Image: Context of Each Disbursement this Period City State Disbursement For: President Disbursement For: Disbursement State: Disbursement Image: Context of Each Disbursement City State Zip Code Purpose of Disbursement Image: Context of Each Disbursement Image: Context of Each Disbursement City State Zip Code Purpose of Disbursement Disbursement For: <td></td> <td>940</td> <td></td> <td>02 22 2016</td>		940		02 22 2016	
Purpose of Disbursement Ontribution TO FEDERAL CANDIDATE Ontil 1 Candidate Name Disbursement For: Senate Primary General State: IL Diskursement Disbursement Disbursement City State Zip Code Purpose of Disbursement Disbursement Type City State Zip Code Purpose of Disbursement Disbursement Amount of Each Disbursement this Period City State Zip Code Purpose of Disbursement Disbursement For: Amount of Each Disbursement this Period City State Zip Code Purpose of Disbursement Disbursement For: Senate President Disbursement For: Disbursement State: Disfrict: President Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City State City State Zip Code Purpose of Disbursement City Amount of Each Disbursement this Period City State Zip Code Purpose of Disbursement Disbursement		-			
Candidate Name Category/ Type Other Sought: House Senate Primary General Other (specify) Tull Name (Last, First, Middle Initia) Mailing Address City State: Disbursement Candidate Name Office Sought: House Senate President City State: Disbursement Candidate Name Office Sought: House Senate President Disbursement City State: Disbursement Candidate Name Office Sought: House Senate President Disbursement City State: Disbursement City <td></td> <td>IL 00003</td> <td></td> <td></td>		IL 00003			
Category/ Type Office Sought: House President Disbursement For: Other (specify) General Other (specify) State: L District: Disbursement For: Other (specify) Date of Disbursement Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Amount of Each Disbursement this Period City State Disbursement For: Disbursement Other (specify) City State Disbursement for: Disbursement Amount of Each Disbursement this Period City State Disbursement For: Disbursement for: Disbursement Disbursement for: Disbursement for: Disbursement Amount of Each Disbursement this Period Vilia Name (Last, First, Middle Initial) Date of Disbursement Disbursement Kate: Disbursement Other (specify) Amount of Each Disbursement this Period Mailing Address City State Zip Code Purpose of Disbursement Other (specify) Amount of Each Disbursement this Period City State Disbursement For: President Other (specify) City House Senate Disbursement For: Primary General Other (specify) Amount of Each Disbursement this Period State			011	Amount of Each Disbursement this Period	
Office Sought: House Disbursement For: Primary General State: IL District: 13 Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Other (specify) ▼ Amount of Each Disbursement this Period Candidate Name Disbursement For: Other (specify) ▼ Amount of Each Disbursement this Period Office Sought: House Disbursement For: Other (specify) ▼ Date of Disbursement State: District: Primary General Other (specify) ▼ Date of Disbursement State: District: Primary General Other (specify) ▼ Date of Disbursement Griy State Zip Code Purpose of Disbursement Other (specify) ▼ Amount of Each Disbursement this Period City State Disbursement For: Other (specify) ▼ Amount of Each Disbursement this Period City State: Disbursement For: Other (specify) ▼ Amount of Each Disbursement this Period City House Disbursement For: Other (specify) ▼				500,00	
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SCHEDULE C (FEC Form 3X) l

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LOANS		Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)			
HANSON PROFESSIONAL S	ERVICES INC. P/	AC	
LOAN SOURCE Full Name (Last, First, f	Viddle Initial)		Election:
	,		Primary
	,		General Other (specify)
Mailing Address			Other (specify)
City	State ZIP (Code	·
Original Amount of Loan	Cumulative Payment	To Date Balance	ce Outstanding at Close of This Period
TERMS Date Incurred		Je Interest Rate	Secured:
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)) to Loan Source	Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	▞᠊᠆ᡒ᠃᠊ᡐ᠅᠅ᡐ᠃ᡔ᠅᠅᠅᠅᠁ᡔ᠁ᡝ᠁
		Outstanding:	<u>))</u>
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	· · · · · · · · · · · · · · · · · · ·
		Couparion	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	<u></u>
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed	
		Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	<u></u>
	- 0		00
SUBTOTALS This Period This Page (option	31) 		
TOTALS This Period (last page in this line of	only)	····· F	00
Carry outstanding balance only to LINE 3, 5	Schedule D, for this line.	If no Schedule D, carry forwa	ard to appropriate line of Summary.

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SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans		(Use separate schedule(s) for each numbered line)	PAGE 1 OF 1 FOR LINE NUMBER: (check only one)
NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SER	VICES INC. PAC		10
A. Full Name (Last, First, Middle Initial) of Debtor of	r 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 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		ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of D	Pebt (Purpose):
Mailing Address			
City	State Zip Code		
Outstanding Balance Beginning This Period		···l	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)			00
2) TOTALS This Period (last page this line number of	nly)		<u> </u>
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	┣━━━	<u> </u>
4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page or	ıty) ►	00

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DE	SCHEDULE D (FEC Form 3X) Us DEBTS AND OBLIGATIONS Excluding Loans					PAGE 1 OF 1 FOR LINE NUMBER: (check only one) 9 X 10	
NAN	NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SERVICES INC. PAC						
Ţ	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of D	ebt (Purpose):	
ŀ	Mailing Addr	ess					
	City	State	Zip Code				
		ng Balance Beginning This Pe	<u> </u>		L		
	An	nount Incurred This Period	Payment Th			ng Balance at Close of This Period	
		<u></u>		7			
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of D	lebt (Purpose)	
ł	Mailing Addr	ess			-		
ļ	City	State	Zip Code				
	An	ng Balance Beginning This Period		is Period	Outstandir	ng Balance at Close of This Period	
ľ	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of D	ebt (Purpose):	
-	Mailing Address						
	City		State Zip C	Code	-		
		ng Balance Beginning This Period	Payment Th	is Period	Outstandi	ng Balance at Close of This Period	
1)	1) SUBTOTALS This Period This Page (optional)					00	
2)	2) TOTALS This Period (last page this line number only)					00	
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)						
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►						

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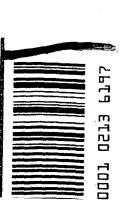
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified 3/17/16 Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express Postmark Illegible** No Postmark Shipping Date **Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt **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 or Postmarked Other (Specify): PREPARER DATE PREPARED (3/2015)