# NEWN ENTRY DE LEWI DE MONTON

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED TEC MAIL CENTER

2022 FEB 28 AM 8: 49

Office Use Only

1.	COMMI	OF ITEE (in full)	TYPE OR PI	HINI ¥	example If ty over the lines		12FE4M5		
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L				11111		<u> </u>			لـنــــــــــــــــــــــــــــــــــــ
ADE	DRESS (1	number and street)	1,5,2,5	5 <sub>.  </sub> S <sub> </sub> O <sub> </sub> U <sub> </sub> T <sub> </sub>	H <sub>I</sub> S <sub>I</sub> IX <sub>I</sub> T	H			
Ľ	tha	eck if different n previously orted. (ACC)	$S_1P_1R_1$	I <sub>N</sub> G <sub>F</sub> I <sub>E</sub>	$L_1D_1$		I <sub>1</sub> L <sub>1</sub> [6 <sub>1</sub> 2 <sub>1</sub>	7 <sub>1</sub> 0 <sub>1</sub> 3]-	
2.	FEC ID	ENTIFICATION N	JMBER ▼	CITY	<b>' ^</b>	s	TATE A	ZIP COI	DE 🛦
	C o	0 4 0 6 1	2 4	3. IS RE	THIS N	NEW (N) <b>OR</b>	AMENDEI (A)	D	
4.	TYPE (Choose	OF REPORT One)	(b) Mont Repo	rt Mall	20 (M2)	May 20 (M5)	Aug 20 (M8	) 🔲	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	arterly Reports:	Due		20 (M3)	Jun 20 (M6)	Sep 20 (M9	, $\square$	Dec 20 (M12) (Non-Election Year Only)
		April 15 Quarterly Report (0	21)	Apr 2	0 (M4)	Jul 20 (M7)	Oct 20 (M10	» <u> </u>	Jan 31 (YE)
		July 15 Quarterly Report (0	(c)	12-Day PRE-Election	Primary (1		General (12G)	Ц	Runoff (12R)
		October 15 Quarterly Report (0		Report for the:	Conventio	n (12C)	Special (12S)		
		January 31 Year-End Report (	/E)	Election	on M	<u>′ ြီ</u> ′ [		in the State o	
		July 31 Mid-Year Report (Non-election Year Only) (MY)	on	30-Day POST-Election	General (3	30G)	Runoff (30R)		Special (30S)
		Termination Report (TER)		Report for the:  Election	on Man	/ <b>D T D</b> /	****	in the State o	d
5.	Covering	Period 01	<sup>™</sup> ′ δ1°	<sup>′</sup> 2022 `	through	n 01"	′ 31° ′ 202	22 ***	
l ce	rtify that	I have examined the	nis Report ar	nd to the best of r	ny knowledge an	d belief it is true	e, correct and comp	lete.	
Тур	e or Prin	t Name of Treasure	ROND	A K FOLKER	RTS				
Sigi	nature of	Treasurer	Ronc	ecch-	Policer	7 <u>)</u> Da	ate 02 M	17°	2022
NO.	TE: Subm	ission of false, erron	eous, or inco	mplete information	may subject the p	person signing thi	s Report to the pena	ılties of 52	U.S.C. § 30109
ı		fice  se					FE	C FOR Rev. 05/20	

	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name		
Н	ANSON PROFESSIONAL SERVICES INC PAC		
R	eport Covering the Period: From:	M / B B / Y Y Y Y O TO:	01
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
<b>3</b> .	(a) Cash on Hand  January 1,	[	21715.00
	(b) Cash on Hand at Beginning of Reporting Period	2 1 7 1 5 . 0 0	
	(c) Total Receipts (from Line 19)	8 9 0 0 . 0 0	8,900.00
	(d) Subtotal (add Lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3 0,,6 1 5 ,,0 0	3 0 6 1 5 . 0 0
7.	Total Disbursements (from Line 31)	5 0 0 0 . 0 0	5 0 0 0 . 0 0
В.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	25615.00	25615.00
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)		
V	Qualified as multicandidate on 0 This committee has qualified as a mul	03.14.16 ticandidate committee. (see FEC FORM 1M)	

## For further information contact:

Federal Election Commission 1050 First Street, N.E. Washington, DC 20463

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

# NEWN: DAINOR BENEVEL

## **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name HANSON PROFESSIONAL SERVICES INC PAC 2 0 2 2 0 2 To: Report Covering the Period: From. **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. 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)...... (b) Political Party Committees ..... (c) Other Political Committees (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 8900 0\_0 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other Party Committees..... 13. All Loans Received..... 14. Loan Repayments Received..... 15. 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..... 17. Other Federal Receipts (Dividends, Interest, etc.)..... 18. Transfers from Non-Federal and Levin Funds (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))........ 8.9.0.0 8900 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .......▶ 0.0 <u>8,900</u> 8,9,00

# **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
	(i) Federal Share		
	•		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures	7)	
	(c) Total Operating Expenditures		
,	(add 21(a)(i), (a)(ii), and (b))		77
•	Committees		
١.	Contributions to		
	Federal Candidates/Committees and Other Political Committees	5000.00	5000.0
١.	Independent Expenditures	492 492 492	
	(use Schedule E)		1 1 1 2 1 1 1 2 1 1 2 1
<b>,</b> .	(52 U.S.C. § 30116(d))		
	(use Schedule F)		475
,	Leen Consuments Made		
).	Loan Repayments Made	493 493 493	
,	Loans Made		
3.	Refunds of Contributions To:	47. 4. 49.	35 35
	(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))▶		
			<u> </u>
9.	Other Disbursements (Including		
	Non-Federal Donations)	47	473
).	Federal Election Activity (52 U.S.C. § 30101(2	20))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
		(3) (3)	435
	(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))		7
	Table Date and the control of the control of		
٦.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5,000.00	5000.0
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	5,00000	5000.0

# **DETAILED SUMMARY PAGE** of Disbursements

	FEC Form 3X (Rev. 05/2016)		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)	. 8,900.00	8,900.,00
34.	Total Contribution Refunds (from Line 28(d))		475 4 175 4 175 4
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	8,900.00	8,900,00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶		
37.	Offsets to Operating Expenditures (from Line 15, page 3)		275
38.	Net Operating Expenditures (subtract Line 37 from Line 36)		The state of the s

	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF6 (check only one)
11	EMIZED RECEIPTS	for each category of the Detailed Summary Page	✓ 11a       11b       11c       12         13       14       15       16       17
	ly information copied from such Reports and Statements make for commercial purposes, other than using the name and a		
$\setminus$	NAME OF COMMITTEE (In Full)		
А	ANSON PROFESSIONAL SERVICES IN	IC PAC	
Α.	Full Name of Individual (Last, First, Middle Initial) or Full C TOM BARTOLOMUCCI	Organization Name	Date of Receipt
Λ.	Mailing Address 9390 OLD INDIAN TRAIL		01 / 05 / 2022
	City State CHATHAM IL	Zip Code 62629	
	FEC ID number of contributing		Amount of Each Receipt this Period
	federal political committee.		
	HANSON PROFESSIONAL SERVICES INC PAC VF	cupation (for Individual)	Memo Item
	Receipt For: Aggregate Primary General	Year-to-Date ▼	
	Other (specify) ▼	600.00	
<del>—</del> В.	Full Name of Individual (Last, First, Middle Initial) or Full ( John Nelson	Organization Name	Date of Receipt
	Mailing Address 3712 Parador Drive	-	0 1 0 5 2 0 2 2
	City State Naperville IL	Zip Code 60564	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		300.00
	Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC VF	cupation (for Individual)	Memo Item
	Receipt For: Primary General Aggregate	e Year-to-Date ▼	
	Other (specify) ▼	<b>A A</b> 300.00	
<u> —</u>	Full Name of Individual (Last, First, Middle Initial) or Full ( James Messmore	Organization Name	Date of Receipt
	Mailing Address 1987 Brentwood Lane E		0 1 0 5 2 0 2 2
	City State IL	Zip Code 60189	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		, 600.00
	Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  VP	cupation (for Individual)	Memo Item
	Receipt For: Primary General Aggregate	e Year-to-Date ▼	
	Other (specify)	600.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		1500.00
┝	OTAL This Period (last page this line number only)		
1		······································	المساعدة الأسطورية المساعدة ا

SCHEDUL	E A (FEC Form 3X)		Use separate schedule(s)		NUMBER:	PAGE 2 OF6
ITEMIZED	RECEIPTS		for each category of the	(check only	y one)	11c
			Detailed Summary Page	13	14	15 16 17
	n copied from such Reports and Si cial purposes, other than using the					
NAME OF	COMMITTEE (In Full)			<del></del>		
HANSON	PROFESSIONAL SERVIC	ES INC P	AC			
Dovid N	of Individual (Last, First, Middle Init	ial) or Full C	rganization Name		. D	
Mailing Add			<del></del>	Date of	f Receipt	/ <b>******</b> ***
4700 Roslyn	Road	Chata	7: Code	0 1	0 6	2022
City Downers	Grove	State IL	Zip Code 60515	Amount	t of Each Re	eceipt this Period
	mber of contributing tical committee.	C			473	300.00
HANSON	mployer (for Individual) PROFESSIONAL SERVICES INC PA	I	upation (for Individual)	<b>□</b> м	emo Item	
Receipt Fo Prima Othe		Aggregate	Year-to-Date ▼  3 0 0 . 0 0  55 57 675			
Full Name B. Dan Wha	of Individual (Last, First, Middle Init alen	tial) or Full C	Organization Name	Date o	f Receipt	
Mailing Add				0 1	/ B B	/ Y Y Y Y 2 0 2 2
City Blooming	ton	State IL	Zip Code 62701	Amoun	t of Each Re	eceipt this Period
	mber of contributing tical committee.	С			4 75 1	3 0 0 . 0 0
	mployer (for Individual) ROFESSIONAL SERVICES INC PAC	Occ VP	cupation (for Individual)	<b>│                                    </b>	lemo Item	
Receipt Fo Prima Othe		Aggregate	Year-to-Date ▼  3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
Full Name C. Tom Lai	of Individual (Last, First, Middle Init mont	tial) or Full C	Organization Name	Date o	f Receipt	· · · · · · · · · · · · · · · · · · ·
Mailing Add				M M O 1	0 6	´ 2´ 0´ 2´ 2´
City Springfiel	d	State IL	Zip Code 62704	Amoun	t of Each Re	eceipt this Period
	mber of contributing tical committee.	С			<b>1</b>	500.00
HANSON	mployer (for Individual) PROFESSIONAL SERVICES IN		upation (for Individual) ard member		lemo Item	
Receipt Fo		Aggregate	Year-to-Date ▼  5 0 0 . 0 0  3 0 0 . 0 0			
SUBTOTAL	of Receipts This Page (optional)		•		,	1400.00
TOTAL This	Period (last page this line number	only)	·····		A 72	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 3 OF 6
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)  11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full)		<del></del>
HANSON PROFESSIONAL SERVICES INC F	PAC	
Full Name of Individual (Last, First, Middle Initial) or Full (	Organization Name	
A. Dennis Hollahan  Mailing Address		Date of Receipt
728 W Vine St.		0 1 0 7 2 0 2 2
City State IL	Zip Code 62704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		6 0 0 . 0 0
Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  VF	cupation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼  Aggregate	e Year-to-Date ▼ 6 0 0 . 0 0	
Full Name of Individual (Last, First, Middle Initial) or Full of B. Andrew Canopy	Organization Name	Date of Receipt
Mailing Address 79 Waldhim		
City State Morton IL	Zip Code 61550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		3,000.00
Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  VF	cupation (for Individual)	Memo Item
	e Year-to-Date ▼	_
Primary	3,00.,00	
Full Name of Individual (Last, First, Middle Initial) or Full C. Michael Flatt	Organization Name	Date of Receipt
Mailing Address 67 Axline Drive		M W ' 0 7 ' 2 0 2 2
City State IL	Zip Code 62629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		3 0 0 . 0 0
Name of Employer (for Individual) Oc VF	cupation (for Individual)	Memo Item
	e Year-to-Date ▼	7
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number only)		372 4 272 4 272

	CHEDULE A (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 4 OF 6 (check only one)
IT	EMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a		
1	NAME OF COMMITTEE (In Full)		
A	ANSON PROFESSIONAL SERVICES INC P	PAC	
Α.	Full Name of Individual (Last, First, Middle Initial) or Full C Howard Gotschall	Organization Name	Date of Receipt
Λ.	Mailing Address		
	3163 Russell Blvd. City State	Zıp Code	0 1 1 1 2 0 2 2
	St. Louis MO	63104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		3 0 0 . 0 0
	HANSON PROFESSIONAL SERVICES INC PAC VP	cupation (for Individual)	Memo Item
	Receipt For:  Primary General  Other (specify) ▼  Aggregate	3 0 0 . 0 0	
В.	Full Name of Individual (Last, First, Middle Initial) or Full C Ronda Folkerts	Organization Name	Date of Receipt
	Mailing Address 6409 Raintree Place	Tax a	0 1 7 2 0 2 2
	City State Springfield IL	Zip Code 62712	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		600.00
	Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  OCC	cupation (for Individual)	Memo Item
	Receipt For: Aggregate Primary General	Year-to-Date ▼	
	Other (specify) ▼	<b>6</b> ,0000 0	
c.	Full Name of Individual (Last, First, Middle Initial) or Full C Sergio Pecon	Organization Name	Date of Receipt
	Mailing Address 4517 Turtle Bay		01 2022
	City State Springfield IL	Zip Code 62711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		1500.00
	HANSON PROFESSIONAL SERVICES INC PAC CE	cupation (for Individual) O	Memo Item
	Receipt For:  Primary General Other (specify)  Aggregate	1 5 0 0 . 0 0	
9	SUBTOTAL of Receipts This Page (optional)		2 4 0 0 . 0 0
<b>-</b>	OTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 6 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and States or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full)		
MANSON PROFESSIONAL SERVICES INC PAC		
Full Name of Individual (Last, First, Middle Initial)	or Full Organization Name	
A. John Heyen  Mailing Address	<del>.</del>	Date of Receipt
3548 Glengate Drive	01-1-   7- 0-1-	0 1 1 8 2 0 2 2
•	State Zip Code IL 62711	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3 0 0 . 0 0
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occupation (for Individual) VP	Memo Item
Receipt For: Primary General Other (specify) ▼	ggregate Year-to-Date ▼  3 0 0 . 0 0	
Full Name of Individual (Last, First, Middle Initial)  B. Kevin Fuhr	or Full Organization Name	Date of Receipt
Mailing Address 1032 N. Euclid Avenue		01 18 2022
•	State Zip Code 60302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3 0 0 . 0 0
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occupation (for Individual) VP	Memo Item
Receipt For:	ggregate Year-to-Date ▼	
Primary General Other (specify) ▼	<b>,</b> 300. <b>,</b> 00	
Full Name of Individual (Last, First, Middle Initial)  C. Mina Biggs	or Full Organization Name	Date of Receipt
Mailing Address 12307 Newcastle Place		01 24 2022
	State Zip Code FL 34202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC PAC	Occupation (for Individual) VP	Memo Item
Receipt For:  Primary General	ggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1 2,000.00
TOTAL This Period (last page this line number only	·)	-12

SCHEDULE A (FEC FORM 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 OF 6
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)  11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and Statements more for commercial purposes, other than using the name and a		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
HANSON PROFESSIONAL SERVICES INC P	AC	
Full Name of Individual (Last, First, Middle Initial) or Full C  A James Trachtman	Organization Name	
A. James Trachtman  Mailing Address		Date of Receipt
12 Ironwood Court		01 24 2022
City State IN	Zip Code 46033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		3 0 0 . 0 0
HANSON PROFESSIONAL SERVICES INC PAC VP	upation (for Individual)	Memo Item
Receipt For:  Primary General  Other (specify) ▼  Aggregate	Year-to-Date ▼  3 0 0 . 0 0	
Full Name of Individual (Last, First, Middle Initial) or Full C	Organization Name	
B. Daniel Rayhill  Mailing Address 7524 Wentworth Drive		Date of Receipt    N   M   /   B   6   /   Y   Y   Y   Y   Y   Y   Y   Y   Y
City State IL	Zip Code 62711	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		3 0 0 . 0 0
Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  VP	cupation (for Individual)	Memo Item
	Year-to-Date ▼	
Primary	<b>3</b> 0 0 <b>0</b> 0 0	
Full Name of Individual (Last, First, Middle Initial) or Full C  Mathew Fletcher	Organization Name	Date of Receipt
Mailing Address 34454 North Peoria Line Rd		
City State Farmington IL	Z <sub>IP</sub> Code 61531	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		600.00
Name of Employer (for Individual)  HANSON PROFESSIONAL SERVICES INC PAC  VP	upation (for Individual)	Memo Item
Receipt For:  Primary General Aggregate	Year-to-Date ▼	
Other (specify)	, 600.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number only)		8,900.00

SCHEDULE B (FEC Form 3X)	Lien congrato cohodulo/o\	FOR LINE NUMBER. PAGE 1 OF 1		
ITEMIZED DISBURSEMENTS	for each category of the			
	Detailed Summary Page	28a 28b 28c 29 30b		
NAME OF COMMITTEE (In Full)				
HANSON PROFESSIONAL SERVICE	ES INC PAC			
Full Name (Last, First, Middle Initial)				
A. RODNEY FOR CONGRESS		Date of Disbursement		
Mailing Address		01 03 0 2022		
City		FEC Identification Number		
	L  62568			
	ANDIDATE	0 1 1 0 0 0 5 2 1 9 4 8		
Candidate Name		Category/ Amount of Each Disbursement this Period		
	nent For	Туре 2500.00		
· LV	1	47		
	Other (specify) ▼	Memo Item		
	·· <del>··</del>			
B.		Date of Disbursement		
GRAVES FOR CONGRESS		[XII] / [82 9] / [88 9] V		
Mailing Address 4701 NW 82ND STREET		01 03 2022		
		FEC Identification Number		
Purpose of Disbursement		C 0 0 3 5 9 0 3 4		
	ANDIDATE	0.1.1		
		Category/ Amount of Each Disbursement this Period		
	nent For:	2500.00		
<b>  </b>     <b>  </b>	Primary General			
	Other (specify)	Memo Item		
Full Name (Last, First, Middle Initial)				
<b>c.</b>		Date of Disbursement		
Mailing Address		M M M / D D / Y V V V V V		
		Land Land		
City	State Zip Code	FEC Identification Number		
Purpose of Disbursement		C		
Candidate Name		Amount of Foot Dickerson and this Porting		
		Type Amount of Each Disbursement this Period		
		492		
	· L			
State: District:	Caron (openiny)	Memo Item		
Use separate schedule(s) for each category of the Detailed Summary Page   210   22   23   26   27   28   28   28   28   28   28   28				
IOIAL This Period (last page this line number only)				

CHEDULE C (FEC DANS	Form 3X)		Use separate schedule(s) PAGE OF for each category of the Detailed Summary Page FOR LINE 13 OF FO	ORM 3X
AME OF COMMITTEE (In F	-ull)			
LOAN SOURCE Full Na Mailing Address	me (Last, First, Mi	ddle Initial)	Memo Item Election: Primary General Other (specify) ▼	
Walling Address	_			
City		State	ZIP Code	
Original Amount of Loan		Cumulative Pa	ayment To Date  Balance Outstanding at Close of	This Peri
TERMS Date Incur		M • M / D •		ed: es
List All Endorsers or Gu 1. Full Name (Last, First,	and the second s	to Loan Source	Name of Employer	<u></u> •
Mailing Address	<u> </u>		Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First,	Middle Initial)		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 Guaranteed Outstanding:	
4. Full Name (Last, First,	Middle Initial)		Name of Employer	
Mailing Address			Occupation .	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period TI	nis Page (optional)		<b>—————————————————————————————————————</b>	** <u></u>
OTALS This Period (last p	age in this line on	ly)	······································	
Carry outstanding balance	only to LINE 3, Sc	hedule D, for th	nis line. If no Schedule D, carry forward to appropriate line of	Summa

SCHE	EDULE C-1 (FEC Form 3X)		Supplementary for				
LOA	NS AND LINES OF CREDIT FROM	NS Information found on					
Federal	Election Commission, Washington, D.C. 20463		Page of Schedule C				
NAME	OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER				
LENDI	NG INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)				
Full Na	ame 	-172	%				
Mailing	g Address		Mam / Dao / Ashahah				
		Date Incurred or Establishe					
City	State Zip Code	Date Due	M M / D D / V V V				
	Has loan been restructured? No Yes	If yes, date originally incurr	red / POD / YVVVV				
В.	If line of credit,	Total Outstanding					
	Amount of this Draw:	Balance:	35 4 35				
C.	Are other parties secondarily liable for the debt in						
_	<u> </u>	rs must be reported on Schedule C					
D.	D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  No Yes If yes, specify:						
			Does the lender have a perfected security interest in it? No Yes				
E.	Are any future contributions or future receipts of	interest income, pledged as	What is the estimated value?				
	collateral for the loan? No Yes If y	yes, specify:					
			47-1-17-1-17-1-17-1-17-1-17-1-17-1-17-1				
	A depository account must be established pursua to 11 CFR 100.82(e)(2) and 100.142(e)(2).	ant Location of account:					
	Date account established:	Address:					
	M = M / D = B / Y = Y = Y	City, State, Zip:	<del></del>				
F.	If neither of the types of collateral described above the loan amount, state the basis upon which this						
G.	COMMITTEE TREASURER		DATE				
ĺ	Typed Name Signature		M = M   / O = O   / Y = Y = Y				
	Signature		Lad Lad Lamed				
Н.	Attach a signed copy of the loan agreement.						
1.	<ul> <li>I. TO BE SIGNED BY THE LENDING INSTITUTION:</li> <li>I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loar accurate as stated above.</li> </ul>						
	favorable at the time than those imposed for . sis which assures repayment, and has						
	complied with the requirements set forth at		iking this loan.				
	ORIZED REPRESENTATIVE d Name		DATE				
		Title					

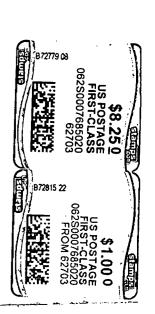
SCHEDULE D (FEC Form 3X)					PAGE	OF		
DEBTS AND OBLIGATIONS sc					FOR LINE NUMBE			
Excluding Loans					(check only one)	9		
NAME OF COMMITTEE (In Full)			l			1 1.0		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor					Nature of Debt (Purpose):			
·								
Mailing Address								
Ola	I Chair	Tio Code						
City	State	Zip Code						
Outstanding Balance Beginning This Period		,						
Amount Incurred This Period	Pay	yment This Period		Outstandii	ng Balance at Close	of This Period		
Amount mounted this fields	ra	ye.r. Ting i enou		Catatanuli	.g Calance at Close	3. 1113 1 61100		
		<u> </u>	لب		<u> </u>			
B. Full Name (Last, First, Middle Initial) of Debtor of		Nature of D	ebt (Purpose).					
Mailing Address			$\neg$					
City	State	Zip Code						
Chy	State	Zip Code						
Outstanding Balance Beginning This Period	•							
Amount Incurred This Period	Pa	yment This Period		Outstandii	ng Balance at Close	of This Period		
						<del></del>		
2)2.4.4.22		<u> </u>		<u> </u>	<u> </u>			
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor			Nature of D	ebt (Purpose):			
Ì								
Mailing Address								
City	State	Zip Code						
			ŀ		<u> </u>			
Outstanding Balance Beginning This Period								
Amount Incurred This Period	Pa	yment This Period		Outstandi	ng Balance at Close	of This Period		
	* * *				V	• • •		
A) CURTOTALO TEL Desired Tel D				T-4-7				
1) SUBTOTALS This Period This Page (optional)	••••••		<b>&gt;</b>	++	77 4 77	+		
2) TOTALS This Period (last page this line number of	only)		▶	<u> </u>	- 27 <u>2 - 8 - 8 - 273 - 8</u>			
3) TOTAL OUTSTANDING LOANS from Schedule C	(last nage o	anly)			<del></del>	* * *		
	tiast page 0	// ny /		<del></del>				
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page o	nly) ▶					

Federal Election Commission Washington, DC. 20463 1050 First Street NE

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Received from Senate Public Records Office	Date of Receipt							
Received from Electronic Filing Office	Date of Receipt							
Other (Specify):	Date of Receipt or Postmarked							
1250	2/28/2>							
PREPARER (2/2015)	DATE PREPARED							
(3/2015)								