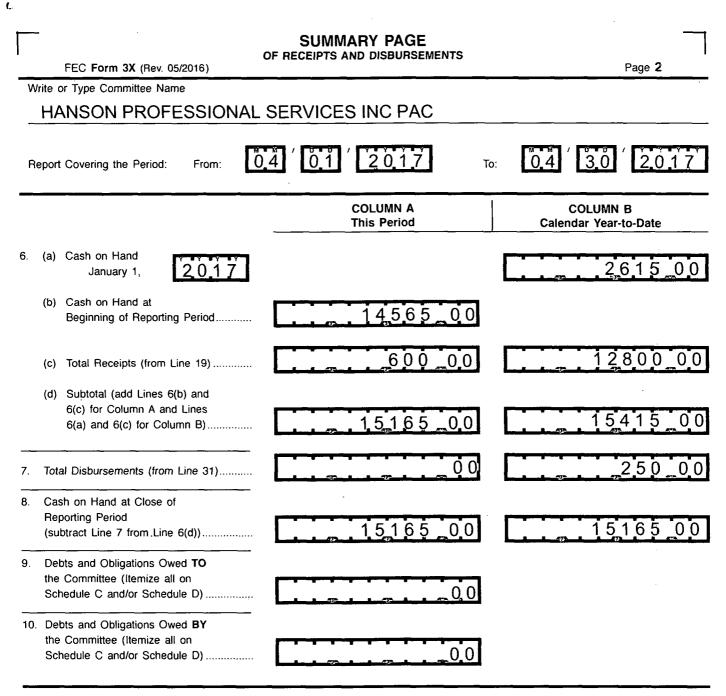
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FEC FORM 3X	AND DIS	OF REC SBURSEM	IENTS	Offic	RECEIVED FEC MAIL CENTER 2017 NAY 22 AM 11: 50 20 Use Only
1. NAME OF COMMITTEE (in 1	TYPE OR PRINT		ple: If typing, type the lines.	12FE4M5	
ADDRESS (number and			<u>C PAC</u> TREET		
Check if diffe than previous reported. (AC		FIELD			2703]-[]
2. FEC IDENTIFIC	ATION NUMBER V				
C 0,0.4 (0.6124	3. IS THIS REPORT	NEW (N) O	R AMEND)ED
July 15 Quarterly October Quarterly January Year-End July 31 Report (Year On	y Report (Q1) y Report (Q1) y Report (Q2) 15 y Report (Q3) 31 d Report (YE) Mid-Year Non-election ly) (MY) (c) 12-D PRE- Report (d) 30-D POS	Election on	May 20 (M Jun 20 (M Jul 20 (M) Primary (12P) Convention (12C) General (30G)	16) Sep 20 (1	M9) Dec 20 (M12) (Non-Election Year Only) M10) Jan 31 (YE)
-	xamined this Report and to	-	through	4 30 2	2 0 1 7 mplete.
Signature of Treasure	V	NA		Date 05	05 / 2017
NOTE: Submission of Office Use Only	talse, erroneous, or incomple	te information may sut	oject the person signin		enalties of 52 U.S.C. § 30109. FEC FORM 3X Rev. 05/2016

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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

FEC Form 3X (Rev. 05/2016) DETAILED SUMMARY PAGE								
Wr	ite or Type Committee Name							
	HANSON PROFESSIONAL S	ERVICES INC PAC						
	TIANSON FILO ESSIONAE S							
Re	port Covering the Period: From: 0.4	0 <u>1</u> 2017 To						
	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)	600_00	12800 00					
	(ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)►	600_00	12800_00					
	 (b) Political Party Committees (c) Other Political Committees (such as PACs)							
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	600,00	12800 00					
12.	Transfers From Affiliated/Other Party Committees							
13.	All Loans Received							
	Loan Repayments Received 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	<u> </u>						
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))▶	_600_00	12800.00					
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	600_00	12800_00					

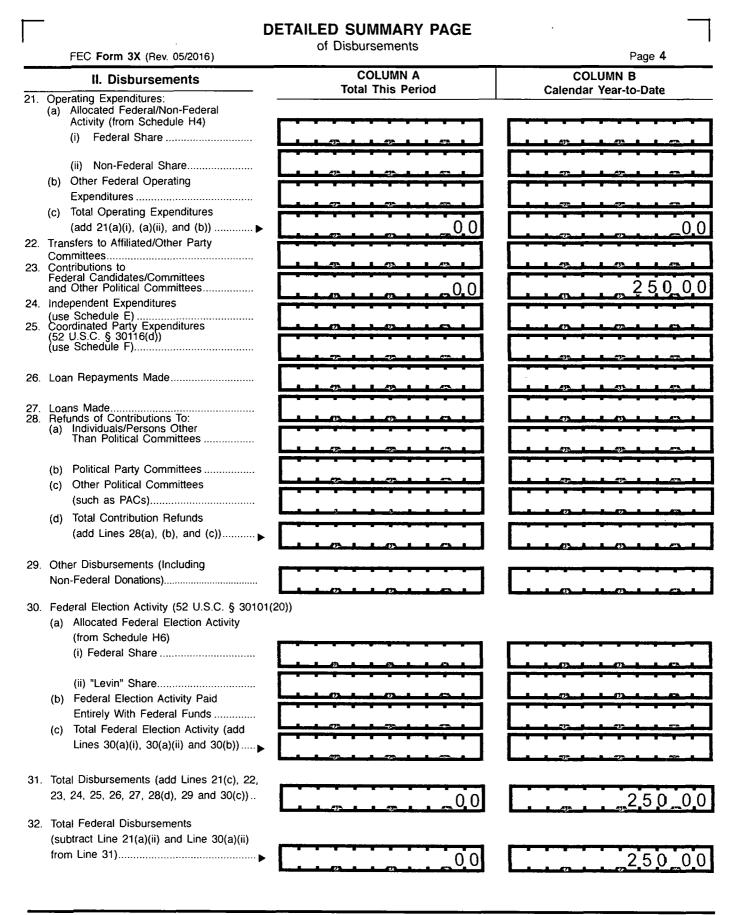
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DETAILED SUMMARY PAGE of Disbursements FEC Form 3X (Rev. 05/2016) Page 5 COLUMN A III. Net Contributions/ COLUMN B **Total This Period Operating Expenditures Calendar Year-to-Date** 33. Total Contributions (other than loans) 600_00 2800 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) 2800 6.000.0 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures

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0.0

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(add Line 21(a)(i) and Line 21(b))

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

SCI	HEDULE A (FEC Form 3X)			se separate schedule(s)		NE NUMBER:	PAGE	_1 OF 1		
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page			only one) a 11b 14	11c	12 16 17		
Any or fo	information copied from such Reports and Stat or commercial purposes, other than using the n	tements ma ame and a	ay no addres	t be sold or used by any pess of any political committee	erson for t to solicit	he purpose of contributions f	soliciting rom such	contributions committee.		
$\left \right\rangle$	IAME OF COMMITTEE (In Full) HANSON PROFESSIONA		RVI(CES INC PAC						
A.	ull Name of Individual (Last, First, Middle Initia SNOWDEN CHARLES H, JR	l) or Full C	Organi	zation Name	Date	e of Receipt		J		
_	Mailing Address 1300 PALMER TER					04 13 2017				
		State		Zip Code 32207	Amo	ount of Each F	leceipt thi	s Period		
	EC ID number of contributing ederal political committee.	С				600_00				
1	lame of Employer (for Individual) HANSON PROFESSIONAL SERVICES		upatio	on (for Individual) SR VP		Memo Item		• .		
Ē	Receipt For:		Year	-to-Date V				1		
	Other (specify) V		35	_ 600_00	ļ					
Б.	ull Name of Individual (Last, First, Middle Initia	al) or Full C	Drgan	ization Name	Dat	e of Receipt	·	<u> </u>		
ſ	Mailing Address				~]	ŶŦŶŦŶ		
Ō	City	State		Zip Code	Am	ount of Each F	Beceint thi	s Period		
	FEC ID number of contributing ederal political committee.	С								
ī	Name of Employer (for Individual)	Oco	cupati	ion (for Individual)	╡᠐	Memo Item				
i	Receipt For:	Aggregate	e Yea	r-to-Date ▼				•		
	Other (specify) ▼		<u>,</u>] ·					
C.	Full Name of Individual (Last, First, Middle Initia	al) or Full (Organ	ization Name	Dat	te of Receipt				
	Mailing Address							Y		
	City	State		Zip Code	Am	ount of Each I	Receipt th	s Period		
	FEC ID number of contributing federal political committee.	С				<u> </u>				
	Name of Employer (for Individual)	Oct	cupati	ion (for Individual)	- C	Memo Item				
	Receipt For: Primary General Other (specify)	Aggregate	e Yea	r-to-Date ▼]					
s	JBTOTAL of Receipts This Page (optional)				Γ		6	0.0.0.0		
	OTAL This Period (last page this line number o				- F			0.0.00		

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SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 1 OF 1		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b 28a	22 23 26 27 28b 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may r me and addr	not be sold or used ess of any political	t by any perso I committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)						
ANSON PROFESSIONA	L SER	/ICES INC	PAC			
Full Name (Last, First, Middle Initial) A.				Date of Disbursement		
A.						
Mailing Address						
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement	<u>.</u>	·····	011	С		
Candidate Name		L		Amount of Each Disbursement this Period		
Office Sought: House Disburse	ement For:		Туре			
Senate	Primary	General				
State: District:	Other (spe	city) 🔻		Memo Item		
Full Name (Last, First, Middle Initial)						
В.				Date of Disbursement		
Mailing Address						
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement	Candidate Name Category/					
Candidate Name						
Office Sought: House Disburse	ement For:		Туре			
Senate	Primary	General				
State: District:	Other (spe	city)		Memo Item		
Full Name (Last, First, Middle Initial) C.				Date of Disbursement		
·····						
Mailing Address						
City	State	Zip Code		FEC Identification Number		
Purpose of Disbursement	011	С				
Candidate Name	Amount of Each Disbursement this Period					
	ement For:		Туре			
Senate President	Primary Other (spe	General ecify) ▼		Memo Item		
State: District:						
SUBTOTAL of Disbursements This Page (optional))		•••••••			
TOTAL This Period (last page this line number on	ly)		••••••			

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

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SCHEDULE C (FEC Form 3X) LOANS

DANS		Use separate schedule(s) PAGE 1 OF 1 for each category of the Detailed Summary Page FOR LINE 13 OF FORM	
AME OF COMMITTEE (In)		Detailed Summary Page FOR LINE 13 OF FORM	
LOAN SOURCE Full Na	ame (Last, First, Mic	Idle Initial)	Memo Item Election: Primary
		General	
Mailing Address			Other (specity) ▼
City		State ZI	IP Code
Original Amount of Loan	· · · · · · ·	Cumulative Payme	ent To Date Balance Outstanding at Close of This
			<u> </u>
TERMS Date Incu	rred	Date	Due Interest Rate Secured:
N T M / 10 T D /		/ [ورو] / [سرم	/ (apr) Yes [
List All Endorsers or Gu		o Loan Source	
1. Full Name (Last, First	, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount
			Guaranteed Outstanding:
2. Full Name (Last, First	, Middle Initial)		Name of Employer
		<u> </u>	
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
4. Full Name (Last, First		_!	Outstanding:
	, Middle millary		
Mailing Address	<u> </u>		Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period T	nis Page (optional)		
TOTALS This Period (last	name in this line only		
		y,	
Carry outstanding balance	only to LINE 3, Sci	nedule D, for this li	ine. If no Schedule D, carry forward to appropriate line of Sum

ь.

<u>.</u>					1
CHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS Excluding Loans	(Use separate schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one)	0F 1 X 9 10		
NAME OF COMMITTEE (In Full)			1		
HANSON PROFESSIONAL	SERVIC	ES INC PAC	;		
A. Full Name (Last, First, Middle Initial) of Debto	Nature of D	Nature of Debt (Purpose):			
Mailing Address	····				
City	State	Zip Code			
Outstanding Balance Beginning This Period					
7					
Amount Incurred This Period	Pa	yment This Period	Outstandi	ng Balance at Close of	This Perio
			▃┛└╾╸		-
B. Full Name (Last. First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):	<u></u>
					Į
Mailing Address		· · · ·			i
City	State	Zip Code) I
	- Chulo	2.0 0000			۲ ۲
Outstanding Balance Beginning This Period					}
Amount Incurred This Period	Pa	ayment This Period	Outstandi	ng Balance at Close of	This Peric
				-72-1-1-22-11	1
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of C	ebt (Purpose):	1
				,	
Mailing Address					ł
	Ctoto	Zia Cada			
City	State	Zip Code			ł
Outstanding Balance Beginning This Period			• · · · · · · · · · · · · · · · · · · ·		1
			:		ļ
Amount Incurred This Period	Pa	ayment This Period	Outstand	ng Balance at Close of	This Perio
	Brundhum Bruns Ar				
1) SUBTOTALS This Period This Page (optional).			►		.00
2) TOTALS This Period (last page this line number only)					
3) TOTAL OUTSTANDING LOANS from Schedule	e C (last page	only)	···· L		0.0
4) ADD 2) and 3) and carry forward to appropriate	e line of Summ	nary Page (last page (oniy) 🕨		0_0

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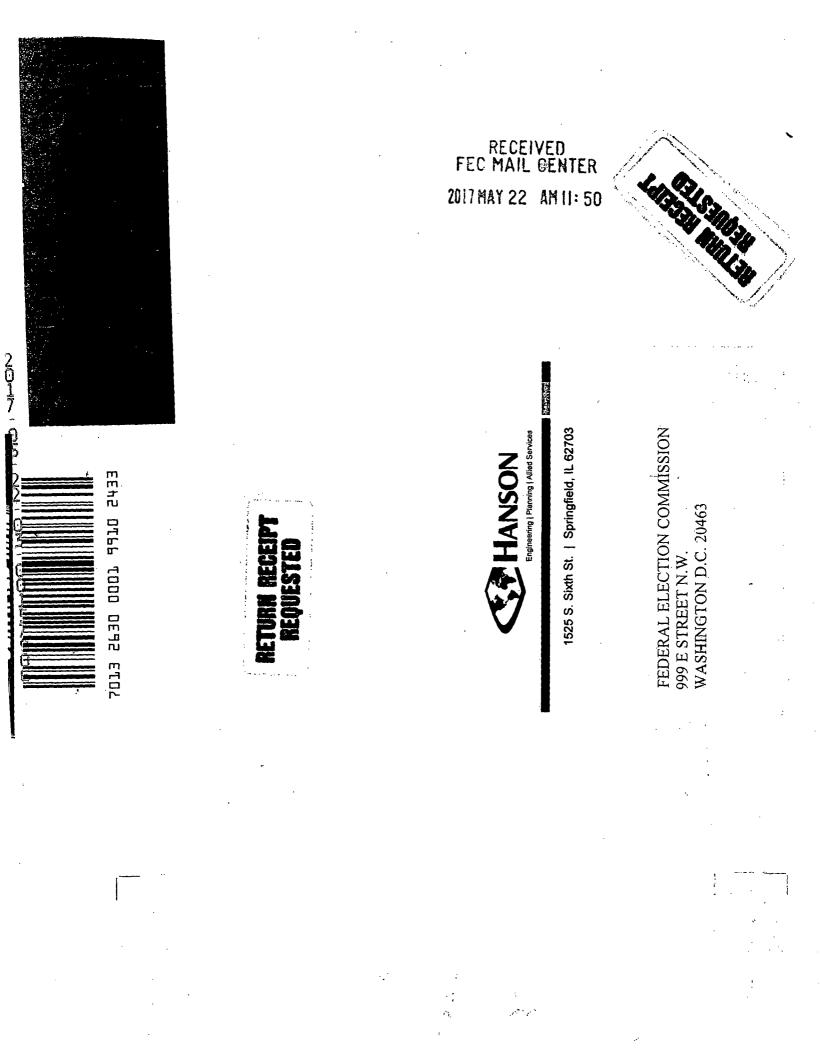
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DE Exc	HEDULE D (FEC Form 3X) BTS AND OBLIGATIONS cluding Loans ME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE 1 OF 1 FOR LINE NUMBER: (check only one) 9 ,X 10
	HANSON PROFESSIONAL S	ERVICE	ES INC PAC		
L	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor				ebt (Purpose):
-	Mailing Address				
	City	State	Zip Code		
	Outstanding Balance Beginning This Period	<u> </u>	<u> </u>		
	Amount Incurred This Period	Рау	ment This Period	Outstandi	ng Balance at Close of This Period
			· · · · · · · ·		
	B. Full Name (Last, First, Middle Initial) of Debtor o	or Creditor		Nature of D	ebt (Purpose):
	Mailing Address				
	City	State	Zip Code		
	Outstanding Balance Beginning This Period Arnount Incurred This Period Payment This Period				ng Balance at Close of This Period
	C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	lebt (Purpose):
	Mailing Address				
	City	State	Zip Code		
	Outstanding Balance Beginning This Period	Pay	ment This Period	Outstandi	ng Balance at Close of This Period
	SUBTOTALS This Period This Page (optional)		·	···· •	
2	TOTALS This Period (last page this line number	only)			
3	TOTAL OUTSTANDING LOANS from Schedule C		00		
4	ADD 2) and 3) and carry forward to appropriate 1	ine of Summa	ry Page (last page o	nly) 🕨	.0.0

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