2019: 10: 10: 0M: 00296906

FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEO MAIL CENTER

2019 OCT 10 PM 12: 17

Office Use Only

1. NAME (OF ITEE (in full)	TYPE OR	PRINT ▼	Example: over the I	If typing, type nes.	12FE4M	15	
[HANS	ON PROFES	SSIPNA	ĻĻ SERVIC	ES INC F	'AC		<u> </u>	
Lilli				1111				
ADDRESS (number and street)	1525	SOUTH S	IXTH STF	REET	<u> </u>	1. 1 1 1 1 1	
tha	eck if different n previously orted. (ACC)	L SPR	NGFIELD				62703	
2. FEC ID	ENTIFICATION N	UMBER ▼	Ci	TY 🛦		STATE ▲	ZIP C	ODE A
C 0	0.4.0.6.1	24		S THIS REPORT	NEW (N) OF		MENDED ()	
4. TYPE (Choose	OF REPORT One)		port 🔲 🖰	20 (M2)	May 20 (M	5) Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Qua	arterly Reports:	Du	e On: Ma	r 20 (M3)	Jun 20 (M	' LJ '	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report (6	21)		20 (M4)	Jul 20 (M7		20 (M10)	Jan 31 (YE)
	July 15 Quarterly Report ((c)	12-Day PRE-Election		ry (12P)	General		Runoff (12R)
	October 15 Quarterly Report (Q3)	Report for the:	Conv	ention (12C)	Special	(125)	
	January 31 Year-End Report (YE)	Electi	on on	M / D D		in the State	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d)	30-Day POST-Election Report for the:	Gene	al (30G)	Runoff	(30R)	Special (30S)
	Termination Repor (TER)	t	·	on on	M / D D	, , , , , , ,	in the State	
5. Covering	g Period 0	9 0	1 201	9 thr	ough 0	9 30	2019]
I certify that	I have examined to	•		-	e and belief it is	true, correct ar	nd complete.	
Type or Prin	t Name of Treasure	er <u>RON</u>	DA K FOLKE	RTS				
Signature of	Treasurer	Pmc	la K. J	coeke	£5	Date 1	04	2019
	nission of false, error	neous, or inc	complete information	on may subject	he person signing	this Report to	the penalties of 5	2 U.S.C. § 30109.
	ffice Jse						FEC FO Rev. 05	

2019:10:10:0M:00296907

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HARICANI DE	ROFESSIONAL	CEDIMOLE	INIC DAC
	COUNTRIE	$\omega_{\rm LL} \cap \omega_{\rm LL} \cup \omega_{\rm LL} $	HING FAC

Report Covering the Period:

From:

0.9 0.1 2.019

3,0

2019

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	, (a) Cash on Hand		Odicinal Teal to bate
o .	January 1, 2,019		7465 00
	(b) Cash on Hand at Beginning of Reporting Period	14,265,00	
	(c) Total Receipts (from Line 19)	0.0	15750 00
	(d) Subtotal (add Lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	" 14,265 00	23,215,00
— 7.	Total Disbursements (from Line 31)	200	8,950,00
8.	Cash on Hand at Close of		·
	Reporting Period (subtract Line 7 from Line 6(d))	14,265_00	14,265,00
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)	0.0	

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

2019:40:40:0M:0029090%

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

HANSON PROFESSIONAL SERVICES INC PAC

R	eport Covering the Period: From: 09	′ 0,1 ′ 2,019 то:	09 30 2019
	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	0.0	15750 00
	(i) Itemized (use Schedule A)	, , , 0,0	, 15,750,00
	(ii) Unitemized		4 - 1 - 272 - M - 4 - 273 - M - 4 - 273 - M
	(iii) TOTAL (add		4575000
	Lines 11(a)(i) and (ii)▶	0,0	15,750,00
	(b) Political Party Committees		
	(c) Other Political Committees		
	(such as PACs)	477 L. 4. 477	473
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	0.0	15750 00
	Totals to Line 33, page 5)	0.0	13/30/00
12.	Transfers From Affiliated/Other		
	Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
	Offsets To Operating Expenditures	77	
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)		270 2 270 2 270 2
16.	Refunds of Contributions Made		
	to Federal Candidates and Other		
	Political Committees	473	
17.	Other Federal Receipts		
10	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	1	
10.	(a) Non-Federal Account		
	(from Schedule H3)		
	(nom conocció rio)		(7) (7)
	(b) Levin Funds (from Schedule H5)		
	(c) Total Transfers (add 18(a) and 18(b))		
	_		1
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	,,00	15,750,00
20.	Total Federal Receipts		
	(subtract Line 18(c) from Line 10)		15750 00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

		II. Disbursements	COLUMN A Total This Period	COLUMN B
21.	Ope (a)	erating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
		(i) Federal Share	(T)	
		(ii) Non-Federal Share	1	
	(b)	Other Federal Operating		
	` '	Expenditures		
	(c)	Total Operating Expenditures		
		(add 21(a)(i), (a)(ii), and (b))▶	0.0	0.0
22.	Trai	nsfers to Affiliated/Other Party		
		nmittees	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
23.	Fed	ntributions to leral Candidates/Committees I Other Political Committees	0.0	8,95000
		ependent Expenditures		
25	(use	e Schedule E)ordinated Party Expenditures		
۷۵.	(52 (use	U.S.C. § 30116(d)) e Schedule F)	75 - 75 - 75 - 75 - 75 - 75 - 75 - 75 -	
26.	Loa	ın Repayments Made		
		ins Made runds of Contributions To:		
	(a)	Individuals/Persons Other		
		Than Political Committees	47-1-47-1-47-1-47-1-47-1-47-1-47-1-47-1	47
	(b)	Political Party Committees		
	(c)	Other Political Committees		
	(0)	(such as PACs)		
	(4)			4 77: 4 A 77: 4 A 77: 4
	(a)	Total Contribution Refunds		
		(add Lines 28(a), (b), and (c))	475 4 475 4 4 775	49-49-49-49-49-49-49-49-49-49-49-49-49-4
29.		er Disbursements (Including		
	Nor	n-Federal Donations)		
30.	Fed	deral Election Activity (52 U.S.C. § 30101	(20))	
	(a)	Allocated Federal Election Activity		
		(from Schedule H6)		
		(i) Federal Share		
		(ii) "Levin" Share		1
	(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))		77
31.	Tota	al Disbursements (add Lines 21(c), 22,		
	23.	24, 25, 26, 27, 28(d), 29 and 30(c))	0.0	8,950.00
32.		al Federal Disbursements		
		btract Line 21(a)(ii) and Line 30(a)(ii)		
	fror	m Line 31)▶	0.0	8,950.00
			72	

DETAILED SUMMARY PAGE

of Disbursements

•	FEC Form 3X (Rev. 05/2016)	or Disbursements	Page 5
	III. Net Contributions/ Operating Expenditures	COLUMN A Total This Périod	COLUMN B Calendar Year-to-Date
	Fotal Contributions (other than loans) from Line 11(d), page 3)		15750 00
•	Total Contribution Refunds from Line 28(d))		
	Net Contributions (other than loans) subtract Line 34 from Line 33)		15750 00
	Total Federal Operating Expenditures add Line 21(a)(i) and Line 21(b))▶		0.0
	Offsets to Operating Expenditures (from Line 15, page 3)		
38. 1	Net Operating Expenditures subtract Line 37 from Line 36)	00	0.0

<u> </u>	NIEDIUE A JEEO E ON	-		
S (CHEDULE A (FEC Form 3X)	İ	Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 1
T	EMIZED RECEIPTS	J	for each category of the	(check only one)
•		ļ	Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
	y information copied from such Reports and Statement			
or	for commercial purposes, other than using the name a	and ac	dress of any political committee	to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\rangle	HANSON PROFESSIONAL S	FR	VICES INC PAC	
_				
	Full Name of Individual (Last, First, Middle Initial) or F	ull Or	ganization Name	But 18 11
A.				Date of Receipt
	Mailing Address			Maw / Dab / Andrad
	City State		Zip Code	⊣
	State	C	Zip Code	Amount of Early Descript No. 2011
				Amount of Each Receipt this Period
	FEC ID number of contributing	•		
	federal political committee.			
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
				_
	Receipt For: Aggre	egate	Year-to-Date ▼	
	Primary General	J	· · · · · · · · · · · · · · · · · · ·	1
	Other (specify) ▼		72. 1. 1. 72. 1. 1. (* <u>2. 1. 1. (*2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.</u>	
	Full Name of Individual (Last, First, Middle Initial) or F	ull Or	ganization Name	
В.				Date of Receipt
	Mailing Address			Men / DeD / Veren
	City	e	Zip Code	
				Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.			
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item
	rame of Employer (for mornidal)		-panoli (ioi marridadi)	
	Receipt For:	1	Voor to Date ♥	-
	Primary General Aggre	yale	Year-to-Date ▼	•
	Other (specify) ▼	•	A A A	1
			; <u>, , , , , , , , , , , , , , , , , , , </u>	4
_	Full Name of Individual (Last, First, Middle Initial) or F	-ull O	rganization Name	
C.	, ,		-	Date of Receipt
	Mailing Address			
	City Stat	te	Zip Code	
		-		Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.			
	N	T		Memo Item
	Name of Employer (for Individual)	Occi	ipation (for Individual)	Wello Kelli
	Receipt For:	<u>l</u>		-
		egate	Year-to-Date ▼	_
	Primary General Other (specify)	-		1
	Cities (specify)		72-1-17-1-1-19-1-	J
_ ا	DIDTOTAL of Descipto This Dans (s. Co. 1)			0.0
Ľ	SUBTOTAL of Receipts This Page (optional)			
١,	COTAL This Period (lest page this line number artis)			0.0
4 1	FOTAL This Period (last page this line number only)			<u> </u>

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one) 21b 22 23 26 27 28a 28b 28b 28c 29 30b
	ne and address of any politic	sed by any person for the purpose of soliciting contributions cal committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Mailing Address		Date of Disbursement
City S Purpose of Disbursement Candidate Name	State Zip Code	FEC Identification Number C 1 1 Category/ Amount of Each Disbursement this Period
<u> </u>	nent For: Primary General Other (specify) ▼	Type Memo Item
Full Name (Last, First, Middle Initial) B. Mailing Address		Date of Disbursement
Purpose of Disbursement Candidate Name N/A Office Sought: House Disbursem Senate	nent For: Primary General Other (specify)	FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address		Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate	State Zip Code ment For: Primary General Other (specify) ▼	FEC Identification Number C C Amount of Each Disbursement this Period Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).		

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE 13 OF

HANSON PROP LOAN SOURCE Full Na			Memo Item Election:		
	(2001, 7 11 01, 1711	- und	Primary General		
Mailing Address			Other (specify) ▼		
City State ZIP C			IP Code		
Original Amount of Loan		Cumulative Payme	ent To Date Balance Outstanding at Close of This Pe		
TERMS Date Incu	rred	Date	Due Interest Rate Secured:		
Mam / Dag /	**************************************	May 1 Gag	% (apr)		
List All Endorsers or Gu	uarantors (if any) to	o Loan Source			
. Full Name (Last, First,	Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
. 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		
	State	ZIP Code	Amount Guaranteed Outstanding:		
City	, Middle Initial)		Name of Employer		
City I. Full Name (Last, First			Occupation		
. Full Name (Last, First	State	ZIP Code	Amount Guaranteed Outstanding:		
. Full Name (Last, First Mailing Address			Guaranteed Outstanding:		

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

Excluding Loans

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

FOR LINE NUMBER: (check only one)

PAGE 1

X	9
	10

OF 1

NAME O	F COMM	TTEE	(In	Full)
--------	--------	------	-----	-------

	HANSON	PROFESSIONAL	SERVICES	INC PAC
--	--------	--------------	----------	---------

HANSON PROFESSIONAL S	PERVIC	ES INC PAC	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor o	r Creditor		Nature of Debt (Purpose):
Mailing Address			
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			<u></u>
# # # # # # # # # # # # # # # # # # #			
Amount Incurred This Period	Pay	yment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period	•		
77			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
) SUBTOTALS This Period This Page (optional)			<u> </u>
) TOTALS This Period (last page this line number of	nly)		<u> </u>
) TOTAL OUTSTANDING LOANS from Schedule C	(last page o	nly)	·
) ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ary Page (last page only)	,

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)

	9
X	10

NAME OF	COMMITTE	E (In	Full)			
	1001		~	-001	 	 ~ .

HANSON PROFESSIONAL	SERVIC	ES INC PAC	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			,
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
	3)	<u> </u>	
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):
Mailing Address			·
City	State	. Zin Codo	
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period
49)			
1) SUBTOTALS This Period This Page (optional)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2) TOTALS This Period (last page this line number	only)		0.0
B) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			
., = =, and e, and carry remains to appropriate		,g- (o. Fg- o)	

REQUESTED

Washington DC 20463 1050 First Street NE Federal Election Commission



2019: 10: 10: 0M: 002069-6

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCO The FEC added this page to the end of this filing to income	MING DOCUMENTS
	Date of Receipt
Hand Delivered	
Postmarked USPS First Class Mail	Date of Receipt
	Postmarked (R/C)
USPS Registered/Certified	10-4-19
	Postmarked
USPS Priority Mail	
	Postmarked
USPS Priority Mail Express	
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bu	usiness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	e of Receipt or Postmarked
al	10-10-19
PREPARER	DATE PREPARED
(3/2015)	