FEC FORM 3X

Office

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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

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2017 JUL 18 PM 12: 02
Office Use Only

FEC FORM 3X

Rev. 05/2016

	NAME OF COMMITTEE		PE OR PR	RINT ▼		Example: If ty over the lines		12FE	E4M5		
L H /	HANSON PROFESSIONAL SERVICES INC PAC										
Ш	1111	11111	1 1 1				1 1 1 1 1				
ADD	RESS (numbe	er and street)	1,525 ₁ S	3OUTH	ŞIXŢ	H ŞT _İ RE	<u> </u>				لنب
	Check if than pre reported		SPRIN	IGFIEL	.p	<u> </u>			6270	3_]-	
	FEC IDENT	IFICATION NUME	BER ▼		CITY A			STATE A	<u> </u>	ZIP COD	DE A
9 7 1	C 0, 0.	4.0.6.1.2.4		;	3. IS THI REPO		NEW (N) OR		AMENDED (A)		
	TYPE OF (Choose One)		(b) Month Repor	t	Feb 20 (I		May 20 (Ms		Aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
	Qua July Qua Oct	il 15 arterly Report (Q1) / 15 arterly Report (Q2) ober 15 arterly Report (Q3)	'	12-Day PRE-Electio Report for the		Primary (1		Ge	Oct 20 (M10) neral (12G) ecial (12S)	<u> </u>	Jan 31 (YE): Runoff (12R)
8	Jan	uary 31 r-End Report (YE)		E	lection on	N H	/ 0 0 /	7	* • •	in the State of	
	Rep Yea	y 31 Mid-Year port (Non-election pr Only) (MY)		30-Day POST -Electi Report for tl		General (30G)	Ru	noff (30R)		Special (30S)
	L (TE	mination Report R)		E	Election on	М М	/ 0 • 0	Y	Y • Y	in the State of	
5. Covering Period 0.6 '0.1 '2017 through 0.6 '3.0 '2017											
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer JO ELLEN KEIM											
	Signature of Treasurer Date 07 111 2017										

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

HANSON PROFESSIONAL SERVICES INC PAC

Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2615 January 1, (b) Cash on Hand at 6,065 Beginning of Reporting Period..... 600 0.0 6.3.00.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 1 8 6(c) for Column A and Lines 1.6.665 6(a) and 6(c) for Column B) Total Disbursements (from Line 31)..... ₿8. Cash on Hand at Close of Reporting Period 1,6,6,6,5 0.0 16665. (subtract Line 7 from Line 6(d))..... 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 0.0 Schedule C and/or Schedule D)

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

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 05/2016) Write or Type Committee Name

— B∈	eport Covering the Period: From: 0.6	/ 8 6 / Y Y Y Y Y Y	0.6 3.0 2017		
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
11. 2017	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	6.00 0.00 	16,300.00 16,300.00 16,300.00		
_12. 0 3	Totals to Line 33, page 5) Transfers From Affiliated/Other Party Committees	50000			
515. 4 9	Loan Repayments Received		77 - 475 - 475		
	Other Federal Receipts (Dividends, Interest, etc.)				
	(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))▶		16,300.00		
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	60000	16300 00		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 **COLUMN A COLUMN B** II. Disbursements **Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) Federal Share (ii) Non-Federal Share..... (b) Other Federal Operating Expenditures (c) Total Operating Expenditures 22. Transfers to Affiliated/Other Party Committees..... Contributions to Federal Candidates/Committees and Other Political Committees. Independent Expenditures (use Schedule E)
Coordinated Party Expenditures
(52 U.S.C. § 30116(d))
(use Schedule F)..... Loan Repayments Made..... (b) Political Party Committees -00 16 4 9₂₉. Other Political Committees (such as PACs)..... (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))...... Other Disbursements (Including Non-Federal Donations)..... 30. Federal Election Activity (52 U.S.C. § 30101(20)) (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)) 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

3 32011/ 07 - 18 - 03 - 00164912

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 6300 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d)) 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 1 (check only one)
Any information copied from such Reports and Statements nor for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SER	address of any political committee	
Full Name of Individual (Last, First, Middle Initial) or Full A. BOWEN, JEFFERY L Mailing Address 13761 CHATSWORTH LN City JACKSONVILLE FEC ID number of contributing federal political committee. Name of Employer (for Individual) HANSON PROFESSIONAL SERVICES INC.		Date of Receipt 0.6 / 2.6 / 2.017 Amount of Each Receipt this Period Memo Item
Desire Far	Organization Name Zip Code ccupation (for Individual) te Year-to-Date ▼	Amount of Each Receipt this Period Memo Item
Descript See	Organization Name Zip Code ccupation (for Individual) te Year-to-Date ▼	Date of Receipt Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only)		6,0,0,0,0

	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page						
	ny information copied from such Reports and Statem			d by any perso	on for the purpose of soliciting contributions			
or	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)							
$ \rangle$	HANSON PROFESSIONAL SERVICES INC PAC							
\angle	Full Name (Last, First, Middle Initial)							
A.	The state (2007) and the state of the state	Date of Disbursement						
	Mailing Address							
	City		FEC Identification Number					
2	Purpose of Disbursement	C						
2 0 1 7	Candidate Name	Q 1_1 Category/ Type	Amount of Each Disbursement this Period					
-	Office Sought: House Disbursen	nent For:		Type				
<u>0</u> 7		Primary	General .					
<i>'</i>	State: District:	Other (spec	⁄⊪y) ▼		Memo Item			
<u>Г</u> 8в.	Full Name (Last, First, Middle Initial)				Date of Disbursement			
- 0 3	Mailing Address							
	City	State	Zip Code		FEC Identification Number			
Ö	Purpose of Disbursement		C					
ļ	Candidate Name			011	Amount of Each Disbursement this Period			
4	Candidate Name	Candidate Name Category/ Type						
00164914	Office Sought: House Disbursen		-					
	State: President State:	Other (spec	city)		Memo Item			
-	Full Name (Last, First, Middle Initial)							
J.					Mam / Dad / Andadad			
	Mailing Address		السبالسالسا					
	City	State	Zip Code		FEC Identification Number			
	Purpose of Disbursement			011				
	Candidate Name	Amount of Each Disbursement this Period						
	· 🔛 ·				77 - 79 - 47			
	Senate President State: District:	Primary Other (spec	☐ General		Memo Item			
Ţ	SUBTOTAL of Disbursements This Page (optional)							
F	TOTAL This Period (last page this line number only)				0.0			

SCHEDULE C (FEC Form 3X) PAGE 1 Use separate schedule(s) LOANS for each category of the **Detailed Summary Page** FOR LINE 13 OF FORM 3X NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SERVICES INC PAC Election: ☐ Memo Item LOAN SOURCE Full Name (Last, First, Middle Initial) Primary General Mailing Address Other (specify) ▼ City State ZIP Code Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 517 **TERMS** Date Due Interest Rate Date Incurred Secured: <u>0</u> Yes No % (apr) List All Endorsers or Guaranters (II any) to Loan Source 8 1. Full Name (Last, First, Middle Initial) Name of Employer Occupation Mailing Address 03 City State ZIP Code Amount Guaranteed 00164915 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 City Amount Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation ZIP Code State City **Amount** Guaranteed Outstanding: SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only).....

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**

0 7

1 8

03-00164916

(Use separate schedule(s) for each

PAGE 1 FOR LINE NUMBER: (check only one)

X 9

OF

Excluding Loans numbered line) 10 NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SERVICES INC PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address State City Zip Code Outstanding Balance Beginning This Period Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period B. 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 Outstanding Balance at Close of This Period Amount Incurred This Period Payment 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 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Pericd 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) 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) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

2017-07-18-03-00164917

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

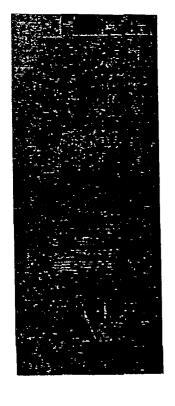
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X	10

OF 1

NAME OF COMMITTEE (In Full)

HANSON PROFESSIONAL	SERVIC	ES INC PAC					
A. Full Name (Last, First, Middle Initial) of Debt	Nature of Debt (Purpose):						
Mailing Address							
,							
City							
Outstanding Balance Beginning This Period	•						
7 7			•				
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period				
	372						
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of Debt (Purpose):				
Mailing Address							
City	State	Zip Code					
Outstanding Balance Beginning This Period	•						
77 77 77							
Amount Incurred 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							
Amount Incurred This Period Payment This Period Outstanding Balance at Close of This							
Amount Incurred This Period	Outstanding Balance at Close of This Period						
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) SUBTOTALS This Period This Page (ontional)			0.0				
1) SUBTOTALS This Period This Page (optional)							
t) TOTALS This Period (last page this line number							
TOTAL OUTSTANDING LOANS from Schedule	C (last page	only)	·				
ADD 2) and 3) and carry forward to appropriat	e line of Sumn	nary Page (last page only	0.0				

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RECEIVED FEC MAIL CENTER RETURN REDEIPT REQUESTED 2017 JUL 18 PM 12: 02

HANSON Engineering | Planning | Allied Services

1525 S. Sixth St. | Springfield, IL 62703

FEDERAL ELECTION COMMISSION 999 E STREET N.W. WASHINGTON D.C. 20463

AETURM RECEIPT BEOUESTED

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 **UŞPS First Class Mail** Postmarked (R/C) USPS Registered/Certified 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

(3/2015)

7 (18/17 DATE PREPAREI