

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEDERAL CENTER  
2010 MAR 24 11:10:49

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

HANSON, PROFESSIONAL SERVICES, INC, PAC

ADDRESS (number and street)

1525 SOUTH SIXTH ST

Check if different than previously reported. (ACC)

SPRINGFIELD, ILL. 61270-3

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00406124

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- |                                     |             |                          |             |                          |              |                          |  |
|-------------------------------------|-------------|--------------------------|-------------|--------------------------|--------------|--------------------------|--|
| <input type="checkbox"/>            | Feb 20 (M2) | <input type="checkbox"/> | May 20 (M5) | <input type="checkbox"/> | Aug 20 (M8)  | <input type="checkbox"/> | Nov 20 (M11)<br>(Non-Election Year Only) |
| <input checked="" type="checkbox"/> | Mar 20 (M3) | <input type="checkbox"/> | Jun 20 (M6) | <input type="checkbox"/> | Sep 20 (M9)  | <input type="checkbox"/> | Dec 20 (M12)<br>(Non-Election Year Only) |
| <input type="checkbox"/>            | Apr 20 (M4) | <input type="checkbox"/> | Jul 20 (M7) | <input type="checkbox"/> | Oct 20 (M10) | <input type="checkbox"/> | Jan 31 (YE)                              |

(c) 12-Day PRE-Election Report for the:

- |                          |                  |                          |               |                          |              |
|--------------------------|------------------|--------------------------|---------------|--------------------------|--------------|
| <input type="checkbox"/> | Primary (12P)    | <input type="checkbox"/> | General (12G) | <input type="checkbox"/> | Runoff (12R) |
| <input type="checkbox"/> | Convention (12C) | <input type="checkbox"/> | Special (12S) |                          |              |
- Election on M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

- |                          |               |                          |              |                          |               |
|--------------------------|---------------|--------------------------|--------------|--------------------------|---------------|
| <input type="checkbox"/> | General (30G) | <input type="checkbox"/> | Runoff (30R) | <input type="checkbox"/> | Special (30S) |
|--------------------------|---------------|--------------------------|--------------|--------------------------|---------------|
- Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 02 01 2010 through 02 28 2010

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 *Jo Ellen Keim*

Date 03 19 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**HANSON PROFESSIONAL SERVICES INC. PAC**

Report Covering the Period: From: **02 01 2010** To: **02 28 2010**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2010</b>		<b>1006500</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>906500</b>	
(c) Total Receipts (from Line 19) .....	<b>000</b>	<b>000</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>906500</b>	<b>1006500</b>
7. Total Disbursements (from Line 31).....	<b>150000</b>	<b>250000</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>756500</b>	<b>756500</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	<b>0</b>	

10030272977

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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**HANSON PROFESSIONAL SERVICES INC. PAC**

Report Covering the Period: From: 11/01/07 To: 10/31/08

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		
(i) Itemized (use Schedule A).....	0	0
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0	0
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	0	0
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)).....▶	0	0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0	0

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**DETAILED SUMMARY PAGE  
of Disbursements**

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal 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)) .....	0	0
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000	250000
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(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)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(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))..	150000	250000
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	150000	250000

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

**III. Net Contributions/Operating Ex-  
penditures**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

- 33. Total Contributions (other than loans)  
(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).....▶
- 38. Net Operating Expenditures  
(subtract Line 37 from Line 36) .....▶

1500.00

1500.00

0

0

2500.00

2500.00

00

00

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**SCHEDULE A (FEC Form 3X)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE / OF /	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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 SERVICES INC. PAC**

**A.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

21b  22  23  24  25  26  
 27  28a  28b  28c  29  30b

PAGE / OF /

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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 SERVICES INC. PAC**

Full Name (Last, First, Middle Initial)

A. **VOLUNTEERS FOR SHIMIKUS**

Date of Disbursement

02 01 2010

Mailing Address

PO Box 5458

City State Zip Code

Springfield IL 62705

Purpose of Disbursement  
Contribution to federal candidate

011  
Category/  
Type

Amount of Each Disbursement this Period

500.00

Candidate Name  
John Shimikus

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: IL District: 19

Full Name (Last, First, Middle Initial)

B. **VOLUNTEERS FOR SHIMIKUS**

Date of Disbursement

02 22 2010

Mailing Address

PO Box 5458

City State Zip Code

Springfield IL 62705

Purpose of Disbursement  
Contribution to federal candidate

011  
Category/  
Type

Amount of Each Disbursement this Period

500.00

Candidate Name  
John Shimikus

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: IL District: 19

Full Name (Last, First, Middle Initial)

C. **Robert Mendez for Congress**

Date of Disbursement

02 27 2010

Mailing Address

ONE Gateway Center Suite 520

City State Zip Code

Newark NJ 07102

Purpose of Disbursement  
Contribution to federal candidate

011  
Category/  
Type

Amount of Each Disbursement this Period

500.00

Candidate Name  
Robert Mendez

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: NJ District:

SUBTOTAL of Disbursements This Page (optional)

1,500.00

TOTAL This Period (last page this line number only)

1,500.00

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**SCHEDULE C (FEC Form 3X)**  
**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE / OF /
	FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
**HANSON PROFESSIONAL SERVICES INC. PAC**

LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address	
City State ZIP Code	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	MM/DD/YYYY	MM/DD/YYYY	% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to 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
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:

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**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**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE / OF
	FOR LINE NUMBER: (check only one)
	<input checked="" type="checkbox"/> 9 <input type="checkbox"/> 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	
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 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
---	-----------------------------	---------------------	---

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 Period
---	-----------------------------	---------------------	---

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) ▶	

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

NAME OF COMMITTEE (In Full)  
**HANSON PROFESSIONAL SERVICES INC. PAC**

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b>	<b>Nature of Debt (Purpose):</b>
<b>Mailing Address</b>	
<b>City State Zip Code</b>	

<b>Outstanding Balance Beginning This Period</b>	<b>Payment This Period</b>	<b>Outstanding Balance at Close of This Period</b>
<b>Amount Incurred This Period</b>		

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b>	<b>Nature of Debt (Purpose):</b>
<b>Mailing Address</b>	
<b>City State Zip Code</b>	

<b>Outstanding Balance Beginning This Period</b>	<b>Payment This Period</b>	<b>Outstanding Balance at Close of This Period</b>
<b>Amount Incurred This Period</b>		

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b>	<b>Nature of Debt (Purpose):</b>
<b>Mailing Address</b>	
<b>City State Zip Code</b>	

<b>Outstanding Balance Beginning This Period</b>	<b>Payment This Period</b>	<b>Outstanding Balance at Close of This Period</b>
<b>Amount Incurred This Period</b>		

<b>1) SUBTOTALS This Period This Page (optional).....</b>	
<b>2) TOTALS This Period (last page this line number only).....</b>	
<b>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....</b>	
<b>4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶</b>	

10030272003

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 3/15/10
<input type="checkbox"/> USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify): Next Business Day Delivery <input type="checkbox"/>	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*JMS*  
PREPARER  
(3/2005)

3/24/10  
DATE PREPARED

10030272986