FEC FORM 3X

2015-12-15-03-00034988

Use

Only

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER

2015 DEC 15 AM 11: 54

Office Use Only

Rev. 12/2004

1. NAME (COMMI	OF ITEE (in full)	TYPE OR P	RINT ▼	Example: If over the line	typing, type es.	12FE4	M5]	
[H _i A _i N _i S _i	ON PROI	FESSI	ONALS	,E,R,V,I,C,E	SINC	PAC		111	
سسا		1111			0.7.0.5.1				
ADDRESS (number and street)	1525	SOUTH	I SIXTH	STRE	E I			
tha	eck if different n previously orted. (ACC)	SPR	INGFIEL	.D			6270)3]-[
2. FEC ID	ENTIFICATION N	UMBER ▼	СП	YA		STATE A	Z	ZIP CODE	A
CO	0406124			S THIS REPORT N	NEW (N) OR		AMENDED (A)	·	
4. TYPE (Choose	OF REPORT	(b) Mont Repo		20 (M2)	May 20 (M5	5)	Aug 20 (M8)	(N	lov 20 (M11) lon-Election ear Only)
(a) Qu	arterly Reports:	Due	On: Mar	20 (M3)	Jun 20 (M6	;)	Sep 20 (M9)	X D	lec 20 (M12) lon-Election ear Only)
П	April 15		Apr	20 (M4)	Jul 20 (M7)		Oct 20 (M10)		an 31 (YE)
	Quarterly Report (6 July 15	(c)	12-Day PRE-Election	Primary	(12P)	Gene	eral (12G)	Ru	unoff (12R)
	Quarterly Report (October 15		Report for the:	Conven	tion (12C)	Spec	cial (12S)		
	Quarterly Report (January 31 Year-End Report (Election	on on	, , ,	Y . Y . Y		in the State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	(d)	30-Day POST-Election Report for the:	General	(30G)	Runo	off (30R)	s _l	pecial (30S)
	Termination Report (TER)	t	Election Election	on on] ′ 🔭 ′	VIV		in the State of	
5. Coverin	g Period 1	1 01	201	Š throu	ıgh 11	30	2.0	1 5	
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 Prir	nt Name of Treasure	er <u>JC</u>	D ELLEN KE	IIVI					
Signature of	Treasurer (SA	ente			Date	12 0	9 ′ <u>°</u>	<u>0</u> 1 5
	nission of false, error	neous, or inco	omplete informatio	n may subject the	e person signing	this Report	to the penaltie	s of 2 U.S	S.C. §437g.
0	ffice		-				FEC	FORM	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name HANSON PROFESSIONAL SERVICES INC. PAC 3.0 Report Covering the Period: From: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2 0 1 5 1,265 January 1, (b) Cash on Hand at 3,565 0 0 Beginning of Reporting Period..... 0.0 9,050 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 3565 10315 00 6(a) and 6(c) for Column B) 1000 0 0 7750 Total Disbursements (from Line 31)..... Cash on Hand at Close of Reporting Period 2565 00 2565 (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 00 Schedule C and/or Schedule D) 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

FE6AN026

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00034989

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Report Covering the Period: From:	11 ' 01 ' 2015 To:	11 / 30 / 2015
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	00	9050 00
(i) Itemized (use Schedule A)		
(ii) Unitemized		
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	0.0	9050 00
(b) Political Party Committees		
(c) Other Political Committees	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		0.050
Totals to Line 33, page 5)▶	0.0	9050 00
12. Transfers From Affiliated/Other		
Party Committees		
13. All Loans Received		
 Loan Repayments Received		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	00	9050 00
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19) ▶	00	9050 00

FE6AN026

FEC Form 3X (Rev. 02/2003)

Page 4

		II. Disbursements	COLUMN A	COLUMN B
	21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Year-to-Date
		(i) Federal Share		
		(ii) Non Foderal Chara		
		(ii) Non-Federal Share(b) Other Federal Operating		
		Expenditures		
		(c) Total Operating Expenditures		
		(add 21(a)(i), (a)(ii), and (b))▶	0.0	0.0
	22.	Transfers to Affiliated/Other Party		
	23	Committees Contributions to		
2	20.	Federal Candidates/Committees	1,0,0,0,0,0	7750 00
2 0 1 5	24	and Other Political CommitteesIndependent Expenditures		
1		· ·		
- 1	25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
2	26.	Loan Repayments Made		
ļ	27.	Loans Made		
5	28.	Refunds of Contributions To: (a) Individuals/Persons Other		
		Than Political Committees		
<u>0</u>		Î		
-		(b) Political Party Committees		
Q		(c) Other Political Committees		* * * * * * * * * * * * * * * * * * * *
ğ		(such as PACs)		
2		(d) Total Contribution Refunds		
Ž		(add Lines 28(a), (b), and (c))▶		
9		·		
0000040001	29.	Other Disbursements		
Ţ	30	Federal Election Activity (2 U.S.C. §431(20))		
	00.	(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))	1,000,00	7,750 00
	32	Total Federal Disbursements		
	JZ.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
		from Line 31)	1000,00	7750 00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	00	9050 00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	00	9,050,00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	00	00
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.0	00

Use separate schedule(s) (check only one) ITEMIZED RECEIPTS for each category of the X 11a 12 **Detailed Summary Page** 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) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) C. Date of Receipt Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation HANSON PROFESSIONAL SERVICES INC. Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) 00 SUBTOTAL of Receipts This Page (optional).....

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

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SCHEDULE A (FEC Form 3X)

OF 1

1

PAGE

FOR LINE NUMBER:

S	SCHEDULE B (FEC Form 3X)					JUMBER	R:		l P	AGE	1 0	OF 1
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			k only	/ one)						
		Detailed Summary Page		Н	21b 27	22 28a	X	23 28b	24	,	25 29	26 30b
	ny information copied from such Reports and Statem r for commercial purposes, other than using the name										ions	
	NAME OF COMMITTEE (In Full)	NED (1050 INIO DAG										
V	HANSON PROFESSIONAL S	SERVICES INC. PAC	,									
_	Full Name (Last, First, Middle Initial)					Data	۰ŧ D:	aha				
A	FRIENDS OF CHERI BUSTOS					Date	וט וס	sburse	ement	V 14 V		∀
	Mailing Address					1	1	0	6	2	01	5
	1050 17TH ST NW, SUITE 590 City S	State Zip Code										
	WASHINGTON DC Purpose of Disbursement	20036		.,	_							
	CONTRIBUTION TO FEDERAL CAND	DIDATE	_	1		Amou	nt of	Each	Disburs	emen	t this f	Period
) 1	CHERI BUSTOS		Cate	egor ype	y/	250 0				00		
,	Office Sought: X House Disbursen											
		Primary General Other (specify) ▼										
_	State: IL District:17	• • • • •									•	
В	Full Name (Last, First, Middle Initial)					Date	of Di	sburse	ement			
	FRIENDS OF DICK DURBIN				M M / D D / TY				7 9 9			
•	Mailing Address PO BOX 1949					1	IJ	0	9	20	15	_
	City	State Zip Code										
) 	SPRINGFIELD II Purpose of Disbursement	_ 62705										
	CONTRIBUTION TO FEDERAL CAI	NDIDATE	0 1 1 Category/ Type		<u>.</u>	Amount of Each Disbursement this Period						
Ì	Candidate Name RICHARD DURBIN				y/			~ •		2 5	0	00
	Office Sought: House Disbursen	nent For:		ypc	\dashv			4);	, 1			
) [لما ا لما	Primary General										
î	State: IL District: 00	Other (specify) ▼			1							
_	Full Name (Last, First, Middle Initial)					D .	-4.5:	-t-·				
С	. LAHOOD FOR CONGRESS					∪ate	οτ Di	sburse		V = 0		V .
	Mailing Address					1	<u>֚֚֚֚֚֚֚֚֚֚֚֚֓֞֞֞</u>	3	ŎĹ	2	01	5
	PO BOX 10735	State Zip Code			_					-		
	PEORIA IL 61612 Purpose of Disbursement											
	CONTRIBUTION TO FEDERAL CANDIDATE Candidate Name					Amou	nt of	Each	Disburs	_	•	Period
	DARIN LAHOOD Office Sought: W House Disbursement For:			Category/ Type				63_4		5 (0_0	0.0
	- LAI	Primary General Other (specify) ▼										
٠.	State: IL District: 18											
	SUBTOTAL of Disbursements This Page (optional)				<u> </u>			47_4	1	0 0	Ö.	00

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

SCHEDULE C (FEC Form 3X) LOANS

LOAN SOURCE Full Name (Last, First, Middle Initial)

State

NAME OF COMMITTEE (In Full)

Original Amount of Loan

Mailing Address

Mailing Address

Mailing Address

City

City

Date Incurred

1. Full Name (Last, First, Middle Initial)

2. Full Name (Last, First, Middle Initial)

3. Full Name (Last, First, Middle Initial)

4. Full Name (Last, First, Middle Initial)

List All Endorsers or Guarantors (if any) to Loan Source

State

State

State

ZIP Code

ZIP Code

ZIP Code

Mailing Address

City

TERMS

PAGE OF Use separate schedule(s) for each category of the FOR LINE 13 OF FORM 3X **Detailed Summary Page** HANSON PROFESSIONAL SERVICES INC. PAC Election: Primary General Other (specify) -ZIP Code Cumulative Payment To Date Balance Outstanding at Close of This Period Date Due Interest Rate Secured: Yes Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation

Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period	d This Page (optional)		>	00
TOTALS This Period (las	st page in this line only))		0.0
Carry outstanding balan	ce only to LINE 3, Scho	edule D, for this lin	ne. If no Schedule D, ca	rry forward to appropriate line of Summary.

Amount

Guaranteed

Outstanding:

Name of Employer

SCHEDULE D (FEC Form 3X)

(Use separate schedule(s)

PAGE 1 OF FOR LINE NUMBER:

X	9
	10

Excluding Loans	for each numbered line)	(check only one) X 9				
NAME OF COMMITTEE (In Full) HANSON PROFESSIONAL SER	VICES INC. PAC					
A. Full Name (Last, First, Middle Initial) of Debtor of	Nature of	Nature of Debt (Purpose):				
Mailing Address						
City State	Zip Code					
Outstanding Balance Beginning This Period		1				
Amount Incurred This Period	Payment This Period	Outstand	ding Balance at Close of This Period			
B. Full Name (Last, First, Middle Initial) of Debtor o	Creditor	Nature of	Debt (Purpose):			
Mailing Address			·			
City State	Zip Code					
Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period	Outstand	ling Balance at Close of This Period			
		نا لنا				
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	Outstand	ting Balance at Close of This Period			
1) SUBTOTALS This Period This Page (optional)			00			
2) TOTALS This Period (last page this line number of	nly)	>	00			
3) TOTAL OUTSTANDING LOANS from Schedule C	(last page only)	>	0.0			

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) >

00115011150 7550 5 000					
SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 1 OF 1		
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:		
Excluding Loans		for each numbered line)	(check only one) 9		
NAME OF COMMITTEE (In Full)		nambered into)	X 10		
HANSON PROFESSIONAL SE	RVICES INC. PAC				
A. Full Name (Last, First, Middle Initial) of Debto	r or Creditor	Nature of [Debt (Purpose):		
Mailing Address					
City State	Zip Code				
Outstanding Balance Beginning This Period		1			
Amount Incurred This Period	Payment This Perio	d Outstand	ing Balance at Close of This Period		
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of I	Debt (Purpose):		
Mailing Address					
Mailing Address					
City State	Zip Code				
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Payment This Perio	d Outstand	ing Balance at Close of This Period		
		نا لنہ			
C. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of I	Debt (Purpose):		
Mailing Address					
City	State Zip Code				
Cony	State Zip Code				
Outstanding Balance Beginning This Period					
Amount Incurred This Period	Payment This Perio	d Outstand	ing Balance at Close of This Period		
			4)		
SUBTOTALS This Period This Page (optional)		.	0.0		
2) TOTALS This Period (last page this line number	only)		00		
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		00		

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) >

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RETURN RECEIPT REQUESTED

X-RAYED BY FEC SECURITY

S7.57

HANSON Engineering I Planning I Alied Services

1525 S. Sixth St. | Springfield, IL 62703

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

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 Date of Receipt Postmarked **USPS 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):

(3/2015)