FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO\	/AL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses) 1. Name and Address of Reporting Person + HANSON PAUL N				2. Issuer Name and Ticker or Trading Symbol COMMUNICATIONS SYSTEMS INC [JCS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last) (First) (Middle) 213 S MAIN ST, PO BOX 777				3. Date of Earliest Transaction (Month/Day/Year) 12/20/2004						X Officer (give title below) Other (specify below) VP Finance, Secy, Treas								
(Street) HECTOR, MN 55342			4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting PersonForm filed by More than One Reporting Person								
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqu						uired, I	uired, Disposed of, or Beneficially Owned								
1.Title of Se (Instr. 3)	Title of Security 2. Transaction Date (Month/Day/Year		2A. Deemed Execution Date, i e) any (Month/Day/Year		if ((Instr. 8)		4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)				Followin tion(s)			6. Ownership Form: Direct (D)	rship Indi Ben (D) Ow	eficial nership	
							Coc	le V	Amount	(A) or (D)	Price					or Ind (I) (Instr.		tr. 4)
Common	Stock											73,874	1			D		
Common	Stock											1,411					ouse mership	
Common	Common Stock									11,6	11,661	,661.94			I	*ESC	SOP (1)	
	Report on a so	eparate line for each	class of securities b	eneficial	ly owne	d dir	rectly	Perso in thi	ns wh		equir	ed to re	espond	f informat unless the umber.		tained	SEC 14	174 (9-02)
	Report on a so	eparate line for each		Derivat	ive Secu	ıritie	es Acc	Perso in thi displ	ons wh s form ays a c	are not rurrently	equiro valid eficiall	ed to re OMB c	espond ontrol n	unless the		tained	SEC 14	174 (9-02)
Reminder: F	2. Conversion	3. Transaction		Derivat (e.g., pu 4. Transac Code	ive Sect ts, calls 5. ction of De Scion See Ad (A Di of (Ir	ıritie , waı	es Acc rrant aber tive ies ed	Perso in thi displ	ons when some some some some some some some some	are not rurrently f, or Beneible secure and	equire valid (strictly) ficially ities) 7. Till of U Secu	ed to re OMB c	espond on trol not declared. Amount ag	unless the	form 9. Numb	per of ve es ially ng d	10. Ownershi Form of Derivative Security: Direct (D) or Indirec	Benefic Owners (Instr. 4
Reminder: F	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 3A. Deemed Execution Date, if any	Derivat (e.g., pu 4. Transac Code	ive Secuts, calls 5. ction of De (A Di of (Ir an	Num Num erivat equire (D) or spose (D) sstr. 3	es Acc rrant aber tive ies ed	Person in thin display display the property of	posed of converting the converting to the converting the convertin	are not r urrently f, or Bene ible secur e and	equire valid (strictly) ficially ities) 7. Till of U Secu	ed to recOMB co	espond on trol not declared. Amount ag	8. Price of Derivative Security	9. Numb Derivati Securitie Benefici Owned Followin Reported Transact	per of ve es ially ng d	10. Ownershi Form of Derivative Security: Direct (D) or Indirec (I)	11. Nat of India Benefic Owners (Instr. 4

D (1 0 N	,		Relationships		
Reporting Owner Nar Address	ne /	Director	10% Owner	Officer	Other
HANSON PAUL N 213 S MAIN ST PO BOX 777 HECTOR, MN 55342				VP Finance, Secy, Treas	

Signatures

/s/ Paul N. Hanson	03/09/2005
Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Acquired pursuant to Communications Systems Inc Employee Stock Ownership Plan & Trust

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.