FORM 4

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

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average	burden						
houre par raenones	0.5						

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 Typ	e Responses)																	
1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Tradi COMMUNICATIONS SYST					· .				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) 01/22/2007								X_Officer (give title below) Other (specify below) VP Finance						
HECTOR	c, MN 553	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (Instr. 8)	or Di		ecurities Acquired (A) isposed of (D) r. 3, 4 and 5)			(A) 5. Amount of Se Owned Followin Transaction(s) (Instr. 3 and 4)		ecurities Beneficially ng Reported			rship Inc	7. Nature of Indirect Beneficial Ownership		
				(WOHAT D	ay/10	carj	Code	V	Amor	unt	(A) or (D)	Price				or Ind (I) (Instr.	lirect (In	str. 4)	
Common	Stock		01/22/2007				M/K		12,000	0	A 3	\$ 8.48	88,433			D			
Common	Stock		01/22/2007				F/K		9,234		Α	\$ 11.02	79,199		D				
Common	Stock		01/24/2007				A		1,771.	.617	A 5	\$ 10.14	14,49	14,498.01			I		SOP (1)
Common	Stock												1,411			I	-	ouse vnership	
Reminder: F	Report on a s	eparate line for eac	h class of securities Table II	- Deriva	tive S	ecui	rities Acq	Pe in a c	rsons versions versions versions the contract of the contract	m are y val	e not re id OMB or Benef	equired contro	l to re ol nur	spond u nber.	information			SEC 1	474 (9-02)
1. Title of	2.	3. Transaction	3A. Deemed	(e.g., pt			warrants, umber						lo and	Amount	8. Price of	0 Numb	or of	10.	11. Natur
Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security (Month/Day/Yea		Execution Date, it	Transaction of D Code Secu (Instr. 8) Acquor D of (I			erivative urities uired (A) isposed D) rr. 3, 4,	Expira	te Exercisable and ation Date th/Day/Year)		of Un Securi	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	Derivative Securitie Beneficia Owned Followin Reported Transact	ve es ally eg l ion(s)	Ownersh Form of Derivativ Security: Direct (D or Indirect (I)	of Indirect Beneficia Ownershi (Instr. 4)		
				Code	V ((A)		Date Exerci	sable	Expir Date	ration	Title		Amount or Number of Shares		(Instr. 4)		(Instr. 4)	
Incentive Stock Option	\$ 8.48	01/22/2007		M/K			12,000	03/11	/2002	03/1	1/2007	Com Sto	mon	12,000	\$ 8.48	0		D	

Reporting Owners

D. C. O. N. /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
HANSON PAUL N								
213 S MAIN ST			VP Finance					
PO BOX 777								
HECTOR, MN 55342								

Signatures

/s/ Paul N. Hanson	01/25/2007
**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 2006 contribution

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.