

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
National Structured Settlement Trade Association Political Action Committee

ADDRESS (number and street) 2025 M Street NW  
Suite 800  
 Check if different than previously reported. (ACC)  
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00219444  
**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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2008 through 05 31 2008

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 Mr. Joseph Ricci

Signature of Treasurer Electronically Filed by Mr. Joseph Ricci Date 06 16 2008

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									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
National Structured Settlement Trade Association Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		48550.93
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	69035.37									
(c) Total Receipts (from Line 19) .....	9222.76	46443.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	78258.13	94994.92								
7. Total Disbursements (from Line 31) .....	4310.97	21047.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	73947.16	73947.16								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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**

Write or Type Committee Name

National Structured Settlement Trade Association Political Action Committee

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	8126.24	43174.65
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1096.52	2222.22
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9222.76	45396.87
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9222.76	45396.87
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	13.15
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	33.97
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9222.76	46443.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9222.76	46443.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	310.97	2231.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	310.97	2231.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	4000.00	18000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	500.00
29. Other Disbursements.....	0.00	316.50
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4310.97	21047.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4310.97	21047.76

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	9222.76	45396.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9222.76	44896.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	310.97	2231.26
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	13.15
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	310.97	2218.11

# 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 6 / 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Lynn DeMauro Clark	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 100 Roscommon Drive, Suite 300	<b>Transaction ID:</b> SA11AI.6115
	City Middletown State CT Zip Code 06457	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer EPS Settlements Group	Occupation Settlement Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas J. Dolny	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 10201 Lee Highway	<b>Transaction ID:</b> SA11AI.6118
	City Fairfax State VA Zip Code 22030	Amount of Each Receipt this Period 190.48
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer EPS Settlements Group	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 690.48	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms Christine M. Garascia	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 7011 Orchard Lake Rd.	<b>Transaction ID:</b> SA11AI.6112
	City W. Bloomfield State MI Zip Code 48322	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer James E. Logan & Associates	Occupation Corporate Secretary & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1590.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**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 7 / 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Raymond Giorgetti	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 80 Burton Lane	<b>Transaction ID:</b> SA11AI.6114
	City State Zip Code Commack NY 11725	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer SFA	Occupation consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul A. Hathaway	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address PO Box 806117	<b>Transaction ID:</b> SA11AI.6121
	City State Zip Code St. Clair Shores MI 48080	Amount of Each Receipt this Period 190.48
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer EPS Settlements Group	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Glen O. Houghton	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 6053 S. Quebec St.	<b>Transaction ID:</b> SA11AI.6113
	City State Zip Code Centennial CO 80111	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	contribution
Name of Employer Bridge Settlement Corporation	Occupation Structured Settlement Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2190.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 16
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Jeffrey Low		Date of Receipt
	Mailing Address 73 Fortuna Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 14 / 2008
	City	State	Zip Code
	San Francisco	CA	94115
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6122
Name of Employer EPS Settlements Group		Occupation Settlement Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 142.88
			contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Greg S. Lukens		Date of Receipt
	Mailing Address 3109 Hennepin Ave. S.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 14 / 2008
	City	State	Zip Code
	Minneapolis	MN	55408
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6123
Name of Employer EPS Settlements Group		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 190.48
			contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel C. Miller		Date of Receipt
	Mailing Address 7100 E. Belleview Ave. Suite 300		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 14 / 2008
	City	State	Zip Code
	Greenwood Village	CO	80111
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6124
Name of Employer EPS Settlements Group		Occupation Settlement Consultant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 190.48
			contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 523.84
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 16  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Brian Milosh

Mailing Address 103 Pine Hill Road

City State Zip Code  
Southborough MA 01772

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

Name of Employer Summit Settlement Services Occupation Insurance Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.6081

Amount of Each Receipt this Period  
1000.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Richard E. Naylon

Mailing Address 360 Delaware Ave.

City State Zip Code  
Buffalo NY 14202

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

Name of Employer Designed Set. Svcs. Occupation Structured Settlement Broker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.6110

Amount of Each Receipt this Period  
1000.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Ryan H. Philyaw

Mailing Address 513 NE Brushbrook Dr.

City State Zip Code  
Lee's Summit MO 64064

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

Name of Employer EPS Settlements Group Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.6126

Amount of Each Receipt this Period  
250.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

# 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 10 / 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas A. Quintero	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 545 Sansome St. Suite 875	Transaction ID: SA11AI.6127
	City State Zip Code San Francisco CA 94111	Amount of Each Receipt this Period 190.48
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer EPS Settlements Group	Occupation Settlement Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 533.32	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Daniel Schmittgens	Date of Receipt MM / DD / YYYY 05 / 14 / 2008
	Mailing Address 22 W. Chicago Ave. Suite 205	Transaction ID: SA11AI.6129
	City State Zip Code Naperville IL 60540	Amount of Each Receipt this Period 190.48
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer EPS Settlement Group	Occupation Settlement Consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.94	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Donald B. Suss	Date of Receipt MM / DD / YYYY 05 / 22 / 2008
	Mailing Address PO Box 880	Transaction ID: SA11AI.6109
	City State Zip Code Frazer PA 19355	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Assured Structured Settlements	Occupation Structured Settlement Consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1380.96
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 16	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Toni M. Warbington		Date of Receipt																					
	Mailing Address 7100 E. Belleview Ave.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>8</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	8	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	4		2	0	8															
	City State Zip Code Greenwood Village CO 80111		<b>Transaction ID:</b> SA11AI.6133																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 190.48																					
Name of Employer EPS Settlements Group		Occupation Consultant																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 421.24																						

contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	190.48
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8126.24

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address P.O. Box 622227 City Orlando State FL Zip Code 32862 Purpose of Disbursement credit card processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6084 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8	Amount of Each Disbursement this Period 1.75
<b>B.</b>	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address P.O. Box 622227 City Orlando State FL Zip Code 32862 Purpose of Disbursement credit card processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6085 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8	Amount of Each Disbursement this Period 13.20
<b>C.</b>	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address P.O. Box 622227 City Orlando State FL Zip Code 32862 Purpose of Disbursement credit card processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.6086 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 8	Amount of Each Disbursement this Period 16.16

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	31.11
<b>TOTAL</b> This Period (last page this line number only) .....	

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank</p> <p>Mailing Address P.O. Box 622227</p> <p>City Orlando State FL Zip Code 32862</p> <p>Purpose of Disbursement credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6087</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 33.00</p> <p>003 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank</p> <p>Mailing Address P.O. Box 622227</p> <p>City Orlando State FL Zip Code 32862</p> <p>Purpose of Disbursement credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6088</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 51.13</p> <p>003 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Bank</p> <p>Mailing Address P.O. Box 622227</p> <p>City Orlando State FL Zip Code 32862</p> <p>Purpose of Disbursement credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.6089</p> <p>Date of Disbursement 05 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 71.73</p> <p>003 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

155.86

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

**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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

National Structured Settlement Trade Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) SunTrust Bank			Transaction ID: SB21B.6090 Date of Disbursement																					
	Mailing Address P.O. Box 622227			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>			M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y																
0	5		1	2		2	0	0	8																
	City Orlando	State FL	Zip Code 32862	Amount of Each Disbursement this Period																					
	Purpose of Disbursement credit card processing fees			<table border="1"> <tr> <td>124.00</td> </tr> </table>			124.00																		
124.00																									
	Candidate Name			<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type			003																		
003																									
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
	State: District:																								

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	124.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	310.97

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
National Structured Settlement Trade Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) <b>ALLYSON SCHWARTZ FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6092
	Mailing Address P.O. Box 2232	Date of Disbursement 05 / 27 / 2008
	City Jenkintown State PA Zip Code 19046	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement contribution Candidate Name <b>SCHWARTZ, ALLYSON</b>	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>HAWKEYE PAC, THE</b>	<b>Transaction ID:</b> SB23.6095
	Mailing Address PO Box 7255	Date of Disbursement 05 / 27 / 2008
	City Des Moines State IA Zip Code 50309	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement contribution Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>PASCHELL FOR CONGRESS INC.</b>	<b>Transaction ID:</b> SB23.6096
	Mailing Address POB 640	Date of Disbursement 05 / 27 / 2008
	City Totowa State NJ Zip Code 07511	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement contribution Candidate Name <b>WILLIAM J HON. JR. PASCHELL</b>	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

National Structured Settlement Trade Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
SENSENBRENNER COMMITTEE

Mailing Address PO BOX 575

City State Zip Code  
BROOKFIELD WI 53008

Purpose of Disbursement  
contribution

Candidate Name  
F JAMES JR SENSENBRENNER

Office Sought:  House  
 Senate  
 President

State: WI District: 05

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.6093

Date of Disbursement

05 / 27 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

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

4000.00