

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
American Society of Pension Professionals & Actuaries PAC

ADDRESS (number and street) 4245 N Fairfax Drive
Suite 750
 Check if different than previously reported. (ACC)
Arlington VA 22203-1637

2. **FEC IDENTIFICATION NUMBER** C00333104
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 2007 through 05 31 2007

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. Brian H. Graff, Esq.

Signature of Treasurer Electronically Filed by Mr. Brian H. Graff, Esq. Date 06 15 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Society of Pension Professionals & Actuaries PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		160628.20
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	156641.72									
(c) Total Receipts (from Line 19)	6191.67	33210.35								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	162833.39	193838.55								
7. Total Disbursements (from Line 31)	10874.27	41879.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	151959.12	151959.12								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

American Society of Pension Professionals & Actuaries PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	4516.67	25041.67
(i) Itemized (use Schedule A)	1675.00	8168.68
(ii) Unitemized	6191.67	33210.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(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)	6191.67	33210.35
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	6191.67	33210.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6191.67	33210.35

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	374.27	888.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	374.27	888.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	40991.13
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	0.00
(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	0.00
29. Other Disbursements.....	0.00	0.00
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))..	10874.27	41879.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10874.27	41879.43

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)	6191.67	33210.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6191.67	33210.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	374.27	888.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	374.27	888.30

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<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)
American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial) A. Donna Brewster		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address 7575 Tyler Blvd, Suite A-4		Transaction ID: SA11A1.7665	
City State Zip Code Mentor OH 44060-4882	Amount of Each Receipt this Period 41.67		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Brewster & Brewster, Inc	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.35		

Full Name (Last, First, Middle Initial) B. Michael C Brown		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 28124 Orchard Lake Road Suite 110		Transaction ID: SA11A1.7659	
City State Zip Code Farmington Hills MI 48334-3760	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Pension Consultants, Inc	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Susan J Chambers		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
Mailing Address 5051 Journal Center Blvd Suite 320		Transaction ID: SA11A1.7652	
City State Zip Code Albuquerque NM 87109-5907	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Chambers Benefit Group, PC	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1541.67
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<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)
American Society of Pension Professionals & Actuaries PAC

A. Full Name (Last, First, Middle Initial)
Craig P Hoffman

Mailing Address 1660 Prudential Drive
Suite 400

City State Zip Code
Jacksonville FL 32207

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

Name of Employer Occupation
SunGard Corbel Pension consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.7660

Amount of Each Receipt this Period
500.00

contribution

B. Full Name (Last, First, Middle Initial)
Petros P Koumantaros

Mailing Address 6402 19th St W

City State Zip Code
Tacoma WA 98466-6130

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

Name of Employer Occupation
Spectrum Pension Consultants Pension consultant

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.7667

Amount of Each Receipt this Period
100.00

contribution

C. Full Name (Last, First, Middle Initial)
Stephanie Kouretsos

Mailing Address 3001 Louisiana Blvd E

City State Zip Code
Albuquerque NM 87110-2734

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

Name of Employer Occupation
Retirement Consultants, Ltd. Pension 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 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.7661

Amount of Each Receipt this Period
250.00

contribution

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<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)
American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial) A. C Frederick Reish		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address 11755 Wilshire Blvd, 10th Floor		Transaction ID: SA11A1.7656
City State Zip Code Los Angeles CA 90025-1506	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Reish Luftman McDaniel & Reicher	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. John M Sciarra		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 3030 Old Ranch Parkway, Suite 400		Transaction ID: SA11A1.7672
City State Zip Code Seal Beach CA 90740	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer National Retirement Services, Inc	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Susan Fischer Trost		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 4 / 2 0 0 7
Mailing Address 6435 N Palm Avenue, Suite 101		Transaction ID: SA11A1.7679
City State Zip Code Fresno CA 93704-1086	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Retirement Plan Consultants	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<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)
American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial) A. Nelson K Yeung		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2007	
Mailing Address 17870 Castleton Street Suite 395		Transaction ID: SA11A1.7658	
City State Zip Code City of Industry CA 91748-1755	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Allied Consultants, Inc	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Lynn M Young		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2007	
Mailing Address 2415 E Cambelback Road Suite 960		Transaction ID: SA11A1.7650	
City State Zip Code Phoenix AZ 85016-4209	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Coble Pension Group, LLC	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional)	▶	375.00
TOTAL This Period (last page this line number only)	▶	4516.67

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)

PAGE 10 / 12

<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)

American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address Post Office Box 85024

City Richmond State VA Zip Code 23285-5024

Purpose of Disbursement fees

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.7689

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

310.11

SUBTOTAL of Disbursements This Page (optional)

310.11

TOTAL This Period (last page this line number only)

310.11

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 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)
American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial) A. Andrews for Congress Committee		Transaction ID: SB23.7680 Date of Disbursement
Mailing Address 215 Fourth Avenue Suite 200		<input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Haddon Heights	State NJ	Zip Code 08035
Purpose of Disbursement	<input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/>	
Candidate Name Robert E Andrews	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 01	
		Amount of Each Disbursement this Period <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>

Full Name (Last, First, Middle Initial) B. A WHOLE LOT OF PEOPLE FOR GRIJALVA CONGRESSIONAL COMMITTEE		Transaction ID: SB23.7685 Date of Disbursement
Mailing Address PO Box 1242		<input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Tucson	State AZ	Zip Code 85702
Purpose of Disbursement	<input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/>	
Candidate Name RAUL M MR. GRIJALVA	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ	District: 7	
		Amount of Each Disbursement this Period <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>

Full Name (Last, First, Middle Initial) C. Earle Pomeroy for Congress		Transaction ID: SB23.7681 Date of Disbursement
Mailing Address Post Office Box 746		<input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Bismark	State ND	Zip Code 58502
Purpose of Disbursement	<input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="2"/>	
Candidate Name Earl Ralph Pomeroy	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ND	District: 00	
		Amount of Each Disbursement this Period <input type="text" value="2"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5"/> <input type="text" value="5"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="0"/>

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)

PAGE 12 / 12

<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)
American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial)

A. Impact America

Mailing Address 228 W. Washington Stree, Suite 340

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

012
Category/
Type

Candidate Name
Gordon Harold Smith

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: OR District: 00

Transaction ID: SB23.7684

Date of Disbursement

05 / 03 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

10500.00