

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 09 01 2006 through 09 30 2006

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 10 12 2006

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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		172110.89
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	140278.29									
(c) Total Receipts (from Line 19)	11096.67	52082.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	151374.96	224193.58								
7. Total Disbursements (from Line 31)	6174.98	78993.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	145199.98	145199.98								
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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	7941.67	38775.01
(i) Itemized (use Schedule A)	3155.00	13307.68
(ii) Unitemized	11096.67	52082.69
(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)	11096.67	52082.69
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))	11096.67	52082.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11096.67	52082.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	174.98	2079.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	174.98	2079.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	76414.60
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	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))..	6174.98	78993.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	6174.98	78993.60

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)	11096.67	52082.69
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11096.67	51582.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	174.98	2079.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	174.98	2079.00

**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 / 13
	<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

A. Full Name (Last, First, Middle Initial)
Donna Brewster

Mailing Address 7575 Tyler Blvd, Suite A-4

City State Zip Code
Mentor OH 44060-4882

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

Name of Employer Occupation
Brewster & Brewster, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 291.69

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2006

Transaction ID: SA11A1.7154

Amount of Each Receipt this Period
41.67

B. Full Name (Last, First, Middle Initial)
Jeffrey A Brown

Mailing Address 67 Jefferson Blvd

City State Zip Code
Warwick RI 02888-1053

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

Name of Employer Occupation
Compensation Planning Inc. 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 Y
09 / 21 / 2006

Transaction ID: SA11A1.7120

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Robert C Burleigh

Mailing Address 465 Jack Kramer Dr Suite 2

City State Zip Code
Memphis TN 38117-4358

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

Name of Employer Occupation
Burleigh Consulting Group 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 Y
09 / 01 / 2006

Transaction ID: SA11A1.7129

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **791.67**

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 7 / 13
	<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)
Michael E Callahan

Mailing Address 72 Queen Street

City State Zip Code
Southington CT 06489

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

Name of Employer Occupation
PenTec, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 18 / 2006

Transaction ID: SA11A1.7161

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Rebecca L Cardillo

Mailing Address 2707 W Azelee Street, Suite 200

City State Zip Code
Tampa FL 33609-5601

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

Name of Employer Occupation
Southern Pension Services 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 Y
09 / 21 / 2006

Transaction ID: SA11A1.7118

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
James Comer

Mailing Address 5250 77 Center Drive

City State Zip Code
Charlotte NC 28217-0709

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

Name of Employer Occupation
CBH Pensions, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2006

Transaction ID: SA11A1.7141

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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 / 13
	<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)
American Society of Pension Professionals & Actuaries PAC

A. Full Name (Last, First, Middle Initial)
Pamela J Constantino

Mailing Address 2999 Douglas Blvd, Suite 155

City State Zip Code
Roseville CA 95661-3840

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

Name of Employer Polycomp Administrative Services, Inc
Occupation 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 Y
09 / 21 / 2006

Transaction ID: SA11A1.7117

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
F Michael Donahue

Mailing Address 2435 Route 6

City State Zip Code
Brewster NY 10509-2537

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

Name of Employer National Pension Consultants, LLC
Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2006

Transaction ID: SA11A1.7102

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Thomas B Fecteau

Mailing Address 21 Agnes Street

City State Zip Code
East Providence RI 02914-3601

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

Name of Employer Fecteau Benefits Group, Inc
Occupation 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 Y
09 / 11 / 2006

Transaction ID: SA11A1.7138

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 / 13
	<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)
Barbara A Kollman

Mailing Address 600 W Ray Road, Suite B-3

City State Zip Code
Chandler AZ 85225-7263

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

Name of Employer: Kollman & Associates, Ltd
Occupation: Pension consulstant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2006

Transaction ID: SA11A1.7136

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Miriam G Matrangola

Mailing Address 120 W Street Road

City State Zip Code
Kennett Square PA 19348-1614

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

Name of Employer: Atlantic Pension Services, Inc
Occupation: 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 Y
09 / 22 / 2006

Transaction ID: SA11A1.7115

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Charles N McLeod

Mailing Address 10777 Westeimer Road, Suite 220

City State Zip Code
Houston TX 77042-3455

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

Name of Employer: National Actuarial Pension Services
Occupation: 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 Y
09 / 11 / 2006

Transaction ID: SA11A1.7146

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
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 10 / 13
	<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)
Robert Paglione

Mailing Address Post Office Box 405

City State Zip Code
Riverton NJ 08077-0405

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

Name of Employer Benefit Consultants Group Occupation 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 Y
09 / 11 / 2006

Transaction ID: SA11A1.7148

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
C Frederick Reish

Mailing Address 11755 Wilshire Blvd, 10th Floor

City State Zip Code
Los Angeles CA 90025-1506

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

Name of Employer Reish Luftman McDaniel & Reicher Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 01 / 2006

Transaction ID: SA11A1.7130

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Donna L Teat

Mailing Address 3939 Hollywood Blvd Suite 1A

City State Zip Code
Hollywood FL 33021-6749

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

Name of Employer Pension Investors Corporation Occupation 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 Y
09 / 21 / 2006

Transaction ID: SA11A1.7121

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
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:	PAGE 11 / 13
	(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)
American Society of Pension Professionals & Actuaries PAC

A. Full Name (Last, First, Middle Initial)
Edward J Vigneau

Mailing Address 35 Pinelawn Road, Suite 103E

City State Zip Code
Melville NY 11747-3121

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

Name of Employer
TLC Pension Consulting, Inc

Occupation
Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2006

Transaction ID: SA11A1.7170

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lynn M Young

Mailing Address 2415 E Cambelback Road
Suite 960

City State Zip Code
Phoenix AZ 85016-4209

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

Name of Employer
Coble Pension Group, LLC

Occupation
Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2006

Transaction ID: SA11A1.7128

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	7941.67

**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 12 / 13

<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. American Express		Transaction ID: SB21B.7186	
Mailing Address Post Office Box 53852		Date of Disbursement MM / DD / YYYY 09 / 05 / 2006	
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period 17.46
Purpose of Disbursement Credit card service fees		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. SunTrust Bank		Transaction ID: SB21B.7187	
Mailing Address Post Office Box 85024		Date of Disbursement MM / DD / YYYY 09 / 11 / 2006	
City Richmond	State VA	Zip Code 23285-5024	Amount of Each Disbursement this Period 157.52
Purpose of Disbursement Credit card service fees		Category/ Type	
Candidate Name			
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:			

SUBTOTAL of Disbursements This Page (optional) ►

174.98

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

174.98

**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: SB23.7185 Date of Disbursement
Mailing Address 215 Fourth Avenue Suite 200		<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2006"/>
City Haddon Heights	State NJ	Zip Code 08035
Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>	
Candidate Name Robert E Andrews	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 01	

Full Name (Last, First, Middle Initial) B. Committee for the Preservation of Capitalizam (CPC), The		Transaction ID: SB23.7184 Date of Disbursement
Mailing Address Post Office Box 65314		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Contribution	<input type="text" value="5000.00"/>	
Candidate Name	Category/ Type	
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:	

SUBTOTAL of Disbursements This Page (optional) ►

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