

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 2009 through 09 30 2009

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 20 2009

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
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	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		127769.81
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	85187.68									
(c) Total Receipts (from Line 19)	9361.00	49961.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	94548.68	177730.83								
7. Total Disbursements (from Line 31)	2705.28	85887.43								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	91843.40	91843.40								
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

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	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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		
(i) Itemized (use Schedule A)	7975.00	36681.00
(ii) Unitemized	1386.00	13280.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9361.00	49961.02
(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)	9361.00	49961.02
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))	9361.00	49961.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9361.00	49961.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	80.28	1223.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	80.28	1223.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	84339.13
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	125.00	325.00
(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))	125.00	325.00
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))..	2705.28	85887.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2705.28	85887.43

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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	9361.00	49961.02
34. Total Contribution Refunds (from Line 28(d))	125.00	325.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9236.00	49636.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	80.28	1223.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	80.28	1223.30

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

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

FOR LINE NUMBER: PAGE 6 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Lucian Acuff

Mailing Address 210 Westwood Pl
Ste 100

City State Zip Code
Brentwood TN 37027-7554

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

Name of Employer: Acuff & Associates, Inc. Occupation: PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 14 / 2009
Transaction ID: SA11AI.9005
Amount of Each Receipt this Period: 1000.00
contribution

B. Full Name (Last, First, Middle Initial)
Mr. Michael L Bain

Mailing Address 647 W Broadway

City State Zip Code
Glendale CA 91204-1007

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

Name of Employer: CMC Occupation: Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 09 / 23 / 2009
Transaction ID: SA11AI.9024
Amount of Each Receipt this Period: 400.00
contribution

C. Full Name (Last, First, Middle Initial)
Mark Davis

Mailing Address 15760 Ventuar Blvd
Suite 910

City State Zip Code
Encino CA 91436-3000

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

Name of Employer: Kravits Davis Sansome Occupation: Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 23 / 2009
Transaction ID: SA11AI.9026
Amount of Each Receipt this Period: 500.00
contribution

SUBTOTAL of Receipts This Page (optional) ► 1900.00

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: PAGE 7 / 15
(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) Thomas H Gellman		Date of Receipt MM / DD / YYYY 09 / 25 / 2009
Mailing Address 1125 NE 125th Street Suite 250		Transaction ID: SA11AI.9012
City North Miami	State FL	Zip Code 33161-5014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ERISA Pension Systems	Occupation Pension consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) John P Gingas		Date of Receipt MM / DD / YYYY 09 / 14 / 2009
Mailing Address 1500 Abbott Road, Suite 150		Transaction ID: SA11AI.9009
City East Lansing	State MI	Zip Code 48823-1222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Financial Technology, Inc	Occupation Pension consultant	contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Craig P Hoffman		Date of Receipt MM / DD / YYYY 09 / 17 / 2009
Mailing Address 1660 Prudential Drive Suite 400		Transaction ID: SA11AI.9008
City Jacksonville	State FL	Zip Code 32207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SunGard Corbel	Occupation Pension consultant	contribution
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)	▶	1000.00
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 8 / 15
	<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) Andrew C Hoskins	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 735 North Cass Avenue	Transaction ID: SA11AI.8992
	City State Zip Code Westmont IL 60559-1100	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer DATAIR Employee Benefit Systems Occupation Pension consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Hester E Inouye	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 1299 S Beretania Street Suite 315	Transaction ID: SA11AI.8991
	City State Zip Code Honolulu HI 96814-1518	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer Suemori & Inouye, Inc Occupation Pension consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

C.	Full Name (Last, First, Middle Initial) Daniel G Kravitz	Date of Receipt MM / DD / YYYY 09 / 23 / 2009
	Mailing Address 15760 Ventura Blvd, Suite 910	Transaction ID: SA11AI.9025
	City State Zip Code Encino CA 91436-3000	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	contribution
	Name of Employer Louis Kravitz & Associates, In 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)	950.00
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: PAGE 9 / 15
(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)
A Michael Marx

Mailing Address 301 E Main Street

City Lexington State KY Zip Code 40507-1548

FEC ID number of contributing federal political committee. C

Name of Employer ERAS, LLC Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2009

Transaction ID: SA11AI.9034

Amount of Each Receipt this Period 250.00

contribution

B.

Full Name (Last, First, Middle Initial)
Timothy McCutcheon

Mailing Address 306 N Milwaukee Street

City Milwaukee State WI Zip Code 53202-5832

FEC ID number of contributing federal political committee. C

Name of Employer Fort William LLC Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009

Transaction ID: SA11AI.9030

Amount of Each Receipt this Period 500.00

contribution

C.

Full Name (Last, First, Middle Initial)
Patricia M Monju

Mailing Address 400 Poydras Street Suite 1840

City New Orleans State LA Zip Code 70130-3245

FEC ID number of contributing federal political committee. C

Name of Employer Horne Business Services, LLC Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2009

Transaction ID: SA11AI.8993

Amount of Each Receipt this Period 50.00

contribution

SUBTOTAL of Receipts This Page (optional) 800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Society of Pension Professionals & Actuaries PAC

A. Full Name (Last, First, Middle Initial)
Patricia M Monju

Mailing Address 400 Poydras Street
Suite 1840

City State Zip Code
New Orleans LA 70130-3245

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

Name of Employer Occupation
Horne Business Services, Pension consultant
LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.8994

Amount of Each Receipt this Period
50.00

contribution

B. Full Name (Last, First, Middle Initial)
Patricia M Monju

Mailing Address 400 Poydras Street
Suite 1840

City State Zip Code
New Orleans LA 70130-3245

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

Name of Employer Occupation
Horne Business Services, Pension consultant
LLC

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2009

Transaction ID: SA11AI.8995

Amount of Each Receipt this Period
50.00

contribution

C. Full Name (Last, First, Middle Initial)
George M Morrison

Mailing Address 95 Connecticut Drive

City State Zip Code
Burlington NJ 08016-4180

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

Name of Employer Occupation
Continental Benefits Group Pension consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 23 / 2009

Transaction ID: SA11AI.9032

Amount of Each Receipt this Period
1000.00

contribution

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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: PAGE 11 / 15
(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"/>		<input type="checkbox"/>		<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)
Steve J Persons

Mailing Address 6910 Treeline Drive, Suite D

City Brecksville State OH Zip Code 44141-3366

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

Name of Employer Creative Benefit Strategies, Inc Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 23 / 2009

Transaction ID: SA11AI.9031

Amount of Each Receipt this Period 250.00

contribution

B.

Full Name (Last, First, Middle Initial)
Adam Pozek

Mailing Address 5901 Peachtree Dunwoody Road NE Suite B-170

City Atlanta State GA Zip Code 30328-5382

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

Name of Employer Swerdlin & Company Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2009

Transaction ID: SA11AI.9037

Amount of Each Receipt this Period 500.00

contribution

C.

Full Name (Last, First, Middle Initial)
Philip D Price

Mailing Address 5151 N Palm Ave Ste 920

City Fresno State CA Zip Code 93704-2208

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

Name of Employer The Price Company Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 14 / 2009

Transaction ID: SA11AI.9007

Amount of Each Receipt this Period 400.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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: PAGE 12 / 15
(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)
Kevin P Reynolds

Mailing Address 9050 Pines Blvd, Suite 310

City State Zip Code
Pembroke Pines FL 33024-6455

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

Name of Employer Occupation
EJ Reynolds, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2009

Transaction ID: SA11AI.9002

Amount of Each Receipt this Period
250.00

contribution

B.

Full Name (Last, First, Middle Initial)
Christine M Stroud

Mailing Address 8952 SW 212th Terrace

City State Zip Code
Miami FL 33189-3866

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

Name of Employer Occupation
Stroud Consulting Services, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2009

Transaction ID: SA11AI.9033

Amount of Each Receipt this Period
150.00

contribution

C.

Full Name (Last, First, Middle Initial)
Mikel R Uchitel

Mailing Address 25B Vreeland Road, Suite 209

City State Zip Code
Florham Park NJ 07932-1900

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

Name of Employer Occupation
ABAR Pension Services, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2009

Transaction ID: SA11AI.9035

Amount of Each Receipt this Period
300.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **700.00**

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Society of Pension Professionals & Actuaries PAC

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

Mailing Address 2415 E Cambelback Road
Suite 960

City Phoenix State AZ Zip Code 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 ▼ 750.00

Date of Receipt 09 / 21 / 2009
Transaction ID: SA11AI.8996
Amount of Each Receipt this Period 125.00
contribution

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

Mailing Address 2415 E Cambelback Road
Suite 960

City Phoenix State AZ Zip Code 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 ▼ 875.00

Date of Receipt 09 / 21 / 2009
Transaction ID: SA11AI.8997
Amount of Each Receipt this Period 125.00
contribution

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

Mailing Address 2415 E Cambelback Road
Suite 960

City Phoenix State AZ Zip Code 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 ▼ 1000.00

Date of Receipt 09 / 21 / 2009
Transaction ID: SA11AI.8998
Amount of Each Receipt this Period 125.00
contribution

SUBTOTAL of Receipts This Page (optional) ► 375.00

TOTAL This Period (last page this line number only) ► 7975.00

**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 14 / 15

<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

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) American Express	Transaction ID: SB21B.8988 Date of Disbursement
	Mailing Address Post Office Box 53852	<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="7.95"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼

B.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: SB21B.8987 Date of Disbursement
	Mailing Address Post Office Box 85024	<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Richmond State VA Zip Code 23285-5024	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="72.33"/>
	Candidate Name	<input type="text" value="001"/> 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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="80.28"/>
TOTAL This Period (last page this line number only)	<input type="text" value="80.28"/>

**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 15 / 15

<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

A.

Full Name (Last, First, Middle Initial)
PORTMAN FOR SENATE COMMITTEE

Transaction ID: SB23.8985

Date of Disbursement

Mailing Address 8331 LITTLE HARBOR DRIVE

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	0	9

City State Zip Code
CINCINNATI OH 45244

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
contribution

011
Category/ Type

Candidate Name
ROB PORTMAN

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: OH District: 00

SUBTOTAL of Disbursements This Page (optional) ►

2500.00

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

2500.00
