

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 03 01 2011 through 03 31 2011

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 04 20 2011

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	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		110819.47
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	116473.49									
(c) Total Receipts (from Line 19)	24275.00	37825.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	140748.49	148644.47								
7. Total Disbursements (from Line 31)	11693.01	19588.99								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	129055.48	129055.48								
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	3

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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)	20075.00	33200.00
(ii) Unitemized	4200.00	4625.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	24275.00	37825.00
(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)	24275.00	37825.00
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))	24275.00	37825.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24275.00	37825.00

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.....	193.01	588.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	193.01	588.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	11500.00	19000.00
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	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))..	11693.01	19588.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11693.01	19588.99

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)	24275.00	37825.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24275.00	37825.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	193.01	588.99
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	193.01	588.99

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 19
(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)
Burl V Bachman

Mailing Address 1503 Santa Rosa Road
Suite 120

City Richmond State VA Zip Code 23229-5015

FEC ID number of contributing federal political committee. C

Name of Employer RPAS, Ltd Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 28 / 2011
Transaction ID: SA11AI.10059
Amount of Each Receipt this Period 1000.00
Contribution

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

Mailing Address 5250 77 Center Drive

City Charlotte State NC Zip Code 28217-0709

FEC ID number of contributing federal political committee. C

Name of Employer CBH Pensions, Inc Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 18 / 2011
Transaction ID: SA11AI.9987
Amount of Each Receipt this Period 1000.00
Contribution

C. Full Name (Last, First, Middle Initial)
Kim A. Cooley

Mailing Address 221 Trumbull St Apt 609

City Hartford State CT Zip Code 06103

FEC ID number of contributing federal political committee. C

Name of Employer Prudential Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2011
Transaction ID: SA11AI.10033
Amount of Each Receipt this Period 500.00
Contribution

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 19
(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
							17

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

A.

Full Name (Last, First, Middle Initial) Mark Davis		Date of Receipt MM / DD / YYYY 03 / 07 / 2011
Mailing Address 15760 Ventuar Blvd Suite 910		Transaction ID: SA11AI.9994
City Encino	State CA	Zip Code 91436-3000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Kravits Davis Sansome	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	

B.

Full Name (Last, First, Middle Initial) Edward T Dillon		Date of Receipt MM / DD / YYYY 03 / 08 / 2011
Mailing Address 2999 Douglas Blvd, Suite 155		Transaction ID: SA11AI.10008
City Roseville	State CA	Zip Code 95661-3840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer Polycomp Administrative Service	Occupation Pension consultant	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

C.

Full Name (Last, First, Middle Initial) Thomas J Finnegan		Date of Receipt MM / DD / YYYY 03 / 07 / 2011
Mailing Address 1845 Walnut Street, Suite 1400		Transaction ID: SA11AI.9995
City Philadelphia	State PA	Zip Code 19103-4708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Savitz Organization, Inc	Occupation Pension consultant	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2700.00
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 8 / 19
(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) Mr. Michael W. Freedman		Date of Receipt MM / DD / YYYY 03 / 24 / 2011
Mailing Address 30400 Telegraph Rd Suite 435		Transaction ID: SA11AI.10047
City Bingham Farms	State MI	Zip Code 48025-4537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Glass Freedman Company	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) Thomas H Gellman		Date of Receipt MM / DD / YYYY 03 / 21 / 2011
Mailing Address 1125 NE 125th Street Suite 250		Transaction ID: SA11AI.10030
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	

C.

Full Name (Last, First, Middle Initial) Kathleen Gnash		Date of Receipt MM / DD / YYYY 03 / 17 / 2011
Mailing Address 991 US Highway 22		Transaction ID: SA11AI.10021
City Bridgewater	State NJ	Zip Code 08807-2956
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Preferred Pension Planning	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	

SUBTOTAL of Receipts This Page (optional)	650.00
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 9 / 19
	<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)
John G. Hopkins

Mailing Address 12 Chelton Circle

City State Zip Code
Camp Hill PA 17011

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

Name of Employer Occupation
Alliance Benefit Group Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 08 / 2011

Transaction ID: SA11AI.10006

Amount of Each Receipt this Period: 500.00

Contribution

B. Full Name (Last, First, Middle Initial)
James M Izett

Mailing Address 912 Killian Hill Road SW

City State Zip Code
Lilburn GA 30047-3138

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

Name of Employer Occupation
AXA Advisors, LLC Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 07 / 2011

Transaction ID: SA11AI.9992

Amount of Each Receipt this Period: 500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Douglas E Jones

Mailing Address 2699 White Road Suite 251

City State Zip Code
Irvine CA 92614-6258

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

Name of Employer Occupation
TriEqua Pension Services, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 25 / 2011

Transaction ID: SA11AI.10055

Amount of Each Receipt this Period: 500.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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 10 / 19
(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) Phyllis Klein		Date of Receipt MM / DD / YYYY 03 / 08 / 2011
Mailing Address 4208 Six Forks Road		Transaction ID: SA11AI.10004
City Raleigh	State NC	Zip Code 27609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CAPTRUST Financial Advisors	Occupation Senior Director	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) Barbara A Kollman		Date of Receipt MM / DD / YYYY 03 / 28 / 2011
Mailing Address 600 W Ray Road, Suite B-3		Transaction ID: SA11AI.10060
City Chandler	State AZ	Zip Code 85225-7263
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kollman & Associates, Ltd	Occupation Pension consulstant	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) Yannis Koumantaros		Date of Receipt MM / DD / YYYY 03 / 07 / 2011
Mailing Address 6402 19th Street W		Transaction ID: SA11AI.9993
City Tacoma	State WA	Zip Code 98466-6130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Spectrum Pension Consultants	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 11 / 19
	<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) David Lipkin	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
Mailing Address 4900 Perry Highway, Suite 100	Transaction ID: SA11AI.9986
City State Zip Code Pittsburgh PA 15229-2223	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Metro Benefits, 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

B.

Full Name (Last, First, Middle Initial) A Michael Marx	Date of Receipt MM / DD / YYYY 03 / 23 / 2011
Mailing Address 301 E Main Street	Transaction ID: SA11AI.10032
City State Zip Code Lexington KY 40507-1548	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Contribution
Name of Employer ERAS, LLC Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.

Full Name (Last, First, Middle Initial) Timothy McCutcheon	Date of Receipt MM / DD / YYYY 03 / 28 / 2011
Mailing Address 306 N Milwaukee Street	Transaction ID: SA11AI.10061
City State Zip Code Milwaukee WI 53202-5832	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Contribution
Name of Employer Fort William LLC 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)	1500.00
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 12 / 19
(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)
Beverly Olivier

Mailing Address 5818 E Night Glow Cir

City State Zip Code
Scottsdale AZ 85266-5257

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

Name of Employer Charles Schwab Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2011

Transaction ID: SA11AI.10057

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Chad Parks

Mailing Address 530 Bush St Fl 9

City State Zip Code
San Francisco CA 94108-3637

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

Name of Employer The Online 401(k) Occupation
PRESIDENT & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2011

Transaction ID: SA11AI.9988

Amount of Each Receipt this Period
500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Susan Perry

Mailing Address 7098 E Cochise Road

City State Zip Code
Scottsdale AZ 85253-4517

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

Name of Employer Boyce & Associates, Inc Occupation
Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2011

Transaction ID: SA11AI.9991

Amount of Each Receipt this Period
250.00

Contribution

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: PAGE 13 / 19
(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)
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 03 / 07 / 2011
Transaction ID: SA11AI.9996
Amount of Each Receipt this Period 500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Peter E Preovolos

Mailing Address 8580 La Mesa Blvd
Suite 100

City La Mesa State CA Zip Code 91941-3939

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

Name of Employer PenChecks, Inc Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 08 / 2011
Transaction ID: SA11AI.10009
Amount of Each Receipt this Period 350.00
Contribution

C. Full Name (Last, First, Middle Initial)
Dale C Rogers

Mailing Address 7004 Mira Vista Blvd

City Fort Worth State TX Zip Code 76132-4507

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

Name of Employer Rogers & Associates Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 08 / 2011
Transaction ID: SA11AI.10002
Amount of Each Receipt this Period 5000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ▶ 5850.00

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 14 / 19
(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)
Ruth Roper

Mailing Address 1111 Buckridge Rd

City State Zip Code
Wetumpka AL 36093-2325

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

Name of Employer Corporate Financial Services. Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt / /
Transaction ID: SA11AI.10017

Amount of Each Receipt this Period 250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Edna H. Russo

Mailing Address 500 Plaza Drive, 7th Floor

City State Zip Code
Secaucus NJ 07726

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

Name of Employer AXA Equitable Life Insurance. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt / /
Transaction ID: SA11AI.10018

Amount of Each Receipt this Period 500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Richard A. Shulman

Mailing Address 10777 Westheimer Road

City State Zip Code
Houston TX 77042

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

Name of Employer National Actuarial Pension Ser. Occupation President & Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt / /
Transaction ID: SA11AI.10039

Amount of Each Receipt this Period 250.00

Contribution

SUBTOTAL of Receipts This Page (optional) ►

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 15 / 19
(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)
Sarah E Simoneaux
 Mailing Address 160 Lochmere Drive
 City State Zip Code
Mandeville LA 70471-1112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Actuarial Systems Corpora- Pension consultant
tion
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 26 / 2011
Transaction ID: SA11AI.10056
 Amount of Each Receipt this Period
 500.00
 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 Service- Pension consultant
s, Inc
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 07 / 2011
Transaction ID: SA11AI.9990
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Scott A Westgate
 Mailing Address 755 W Big Beaver Road
Suite 1250
 City State Zip Code
Troy MI 48084-4900
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Michigan Benefit Consulti- Pension consultant
ng
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 18 / 2011
Transaction ID: SA11AI.9989
 Amount of Each Receipt this Period
 500.00
 Contribution

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) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 19
	(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) Lynn M Young		Date of Receipt
Mailing Address 2415 E Cambelback Road Suite 960		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
City	State	Zip Code
Phoenix	AZ	85016-4209
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.9985
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="125.00"/>
Name of Employer Coble Pension Group, LLC		Contribution
Occupation Pension consultant		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Lawrence Zeller		Date of Receipt
Mailing Address 991 US Highway 22		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2011"/>
City	State	Zip Code
Bridgewater	NJ	08807-2956
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.10037
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer Preferred Pension Planning		Contribution
Occupation Pension consultant		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1125.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="20075.00"/>

**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 17 / 19

<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

A. Full Name (Last, First, Middle Initial) American Express Mailing Address Post Office Box 53852 City Phoenix State AZ Zip Code 85072-3852 Purpose of Disbursement 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) ▼	Transaction ID: SB21B.10078 Date of Disbursement MM / DD / YYYY 03 / 03 / 2011
	Amount of Each Disbursement this Period 7.95 Category/Type 001
B. Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address Post Office Box 85024 City Richmond State VA Zip Code 23285-5024 Purpose of Disbursement 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) ▼	Transaction ID: SB21B.10079 Date of Disbursement MM / DD / YYYY 03 / 10 / 2011
	Amount of Each Disbursement this Period 185.06 Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ►

193.01

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

193.01

**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

A.	Full Name (Last, First, Middle Initial) Ben Cardin for Senate	Transaction ID: SB23.10067 Date of Disbursement																			
	Mailing Address Post Office Box 65056	<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>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
	City Baltimore State MD Zip Code 21209	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																		
1500.00																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	011 Category/ Type																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

B.	Full Name (Last, First, Middle Initial) BERG FOR CONGRESS	Transaction ID: SB23.10075 Date of Disbursement																			
	Mailing Address PO BOX 9394	<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>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	1		2	0	1	1												
	City FARGO State ND Zip Code 58106	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

C.	Full Name (Last, First, Middle Initial) GERLACH, JIM	Transaction ID: SB23.10070 Date of Disbursement																			
	Mailing Address 649 DEEP HOLLOW LANE	<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>3</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	7		2	0	1	1												
	City CHESTER SPRINGS State PA Zip Code 19425	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00																		
1500.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type																			
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4000.00</td></tr></table>	4000.00
4000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 19 / 19

<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) LEGPAC Mailing Address 38 Ivy St. SE City Washington State DC Zip Code 20003 Purpose of Disbursement Contribution 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) ▼	Transaction ID: SB23.10068 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011
	Amount of Each Disbursement this Period 5000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) TFP-FOJB COMMITTEE Mailing Address 631-B PENNSYLVANIA AVENUE SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Contribution 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) ▼	Transaction ID: SB23.10076 Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2011
	Amount of Each Disbursement this Period 2500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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

11500.00