



**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 | 2 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
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| M | M |
| 0 | 2 |

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| D | D |
| 2 | 8 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>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>9</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 9 |  | 128019.81 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 0                                 | 9 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 137263.57               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 14570.00                | 26457.00                          |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 151833.57               | 154476.81                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 11526.07                | 14169.31                          |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 140307.50               | 140307.50                         |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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 | 2 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 2 |

|   |   |
|---|---|
| D | D |
| 2 | 8 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 10775.00                      | 17531.00                          |
| (i) Itemized (use Schedule A) .....  | 3795.00                       | 8926.00                           |
| (ii) Unitemized .....  | 14570.00                      | 26457.00                          |
| (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) .....     | 14570.00                      | 26457.00                          |
| 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)) .....                          | 14570.00                      | 26457.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 14570.00                      | 26457.00                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal<br>Activity (from Schedule H4)  |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating<br>Expenditures.....   | 326.07                                | 469.31                                    |
| (c) Total Operating Expenditures<br>(add 21(a)(i), (a)(ii) and (b))..... ▶                           | 326.07                                | 469.31                                    |
| 22. Transfers to Affiliated/Other Party<br>Committees.....   | 0.00                                  | 0.00                                      |
| 23. Contributions to<br>Federal Candidates/Committees.....<br>and Other Political Committees.....    | 11000.00                              | 13500.00                                  |
| 24. Independent Expenditure<br>(use Schedule E) .....  | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party<br>Committees (2 U.S.C. 441a(d))<br>(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<br>Than Political Committees .....                                     | 200.00                                | 200.00                                    |
| (b) Political Party Committees   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees<br>(such as PACs) .....   | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds<br>(add Lines 28(a), (b), and (c)) .....                              | 200.00                                | 200.00                                    |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared Federal Election Activity<br>(from Schedule H6)   |                                       |   |
| (i) Federal Share .....  | 0.00                                  | 0.00                                      |
| (ii) "Levin" Share .....   | 0.00                                  | 0.00                                      |
| (b) Federal Election Activity Paid Entirely<br>With Federal Funds .....                              | 0.00                                  | 0.00                                      |
| (c) Total Federal Election Activity (add<br>Lines 30(a)(i), 30(a)(ii) and 30(b))....                 | 0.00                                  | 0.00                                      |
| 31. Total Disbursements (add Lines 21(c), 22,<br>23, 24, 25, 26, 27, 28(d), 29 and 30(c))..          | 11526.07                              | 14169.31                                  |
| 32. Total Federal Disbursements<br>(subtract Line 21(a)(ii) and Line 30(a)(ii)<br>from Line 31)..... | 11526.07                              | 14169.31                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3 .....         | 14570.00                      | 26457.00                          |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 200.00                        | 200.00                            |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 14370.00                      | 26257.00                          |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 326.07                        | 469.31                            |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 326.07                        | 469.31                            |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

|   |                              |
|---|------------------------------|
| FOR LINE NUMBER:                        | PAGE 6 / 17                  |
| (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             |                              |

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

|   |   |                                  |   |
|---|---|----------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Stephen J Butler         |                                  | Date of Receipt   |
|   | Mailing Address 2300 Contra Costs Blvd, Suite 400                   |                                  | <input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2009"/> |
|   | City  | State                            | Zip Code  |
|   | Pleasant Hill   | CA                               | 94523-3955  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                  | Transaction ID: SA11AI.8785   |
| Name of Employer<br>Pension Dynamics Corporat-<br>ion   |   | Occupation<br>Pension consultant | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼         | <input type="text" value="1000.00"/>  |
|   |   |                                  | contribution  |

|   |   |                                  |   |
|---|---|----------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Pamela J Constantino     |                                  | Date of Receipt   |
|   | Mailing Address 2999 Douglas Blvd, Suite 155                        |                                  | <input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2009"/> |
|   | City  | State                            | Zip Code  |
|   | Roseville   | CA                               | 95661-3840  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                  | Transaction ID: SA11AI.8720   |
| Name of Employer<br>Polycomp Administrative<br>Services, Inc  |   | Occupation<br>Pension consultant | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼         | <input type="text" value="500.00"/>   |
|   |   |                                  | contribution  |

|   |   |                                  |   |
|---|---|----------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>James H Gordon           |                                  | Date of Receipt   |
|   | Mailing Address 2700 N 3rd Street<br>Suite 2000                     |                                  | <input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2009"/> |
|   | City  | State                            | Zip Code  |
|   | Phoenix   | AZ                               | 85004-1129  |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                  | Transaction ID: SA11AI.8764   |
| Name of Employer<br>GPW & Associates, Inc   |   | Occupation<br>Pension consultant | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼         | <input type="text" value="250.00"/>   |
|   |   |                                  | contribution  |

|  |                                      |
|--|--------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="1750.00"/> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <input type="text"/>                 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17  
(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)  
James H Gordon

Mailing Address 2700 N 3rd Street  
Suite 2000

City Phoenix State AZ Zip Code 85004-1129

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

Name of Employer GPW & Associates, Inc Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: SA11AI.8781

Amount of Each Receipt this Period  
250.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth T Hallam

Mailing Address 1290 Avenue of the Americas  
Ste 13F

City New York State NY Zip Code 10104-0101

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

Name of Employer AXA Equitable Insurance Compan Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2009

Transaction ID: SA11AI.8711

Amount of Each Receipt this Period  
1000.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Jim Hudson

Mailing Address P.O. Box 2208

City Waco State TX Zip Code 76703

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

Name of Employer July Business Services Occupation TPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: SA11AI.8782

Amount of Each Receipt this Period  
1000.00

contribution

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

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

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

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

FOR LINE NUMBER: PAGE 8 / 17  
(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)  
R. Bradford Huss

Mailing Address 120 Montgomery St  
23rd Floor

City State Zip Code  
San Francisco CA 94104-4303

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

Name of Employer Occupation  
Trucker Huss Pension consultant

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

**Transaction ID:** SA11AI.8751

Amount of Each Receipt this Period  
500.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
James L Jordan

Mailing Address 100 Stony Point Road, Suite 216

City State Zip Code  
Santa Rosa CA 95401-4117

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

Name of Employer Occupation  
Jordan & Andrews Pension consultant

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

**Transaction ID:** SA11AI.8741

Amount of Each Receipt this Period  
500.00

contribution

**C.** Full Name (Last, First, Middle Initial)  
David Kobrine

Mailing Address 17748 Sky Park Cir  
Suite 240

City State Zip Code  
Irvine CA 92614-6420

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

Name of Employer Occupation  
Pension Benefits Unlimited, In VICE PRESIDENT

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** SA11AI.8724

Amount of Each Receipt this Period  
250.00

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)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 9 / 17                  |
|   | <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

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>Daniel G Kravitz   | Date of Receipt<br>MM / DD / YYYY<br>02 / 04 / 2009 |
|           | Mailing Address 15760 Ventura Blvd, Suite 910   | <b>Transaction ID:</b> SA11AI.8727                  |
|           | City State Zip Code<br>Encino CA 91436-3000   | Amount of Each Receipt this Period<br>250.00        |
|           | FEC ID number of contributing federal political committee.<br>C   | contribution  |
|           | Name of Employer Occupation<br>Louis Kravitz & Associates, In Pension consultant<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>250.00 |   |

|           |   |   |
|-----------|---|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>Steven J Levine  | Date of Receipt<br>MM / DD / YYYY<br>02 / 04 / 2009 |
|           | Mailing Address 67 Brook Farm Road  | <b>Transaction ID:</b> SA11AI.8758                  |
|           | City State Zip Code<br>Bedford NY 10506   | Amount of Each Receipt this Period<br>500.00        |
|           | FEC ID number of contributing federal political committee.<br>C   | contribution  |
|           | Name of Employer Occupation<br>Steven J Levine, LLC Pension consultant<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>500.00 |   |

|           |   |   |
|-----------|---|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>Terry L Liebowitz  | Date of Receipt<br>MM / DD / YYYY<br>02 / 04 / 2009 |
|           | Mailing Address 3115 Edinburgh Drive  | <b>Transaction ID:</b> SA11AI.8765                  |
|           | City State Zip Code<br>Augusta GA 30909   | Amount of Each Receipt this Period<br>250.00        |
|           | FEC ID number of contributing federal political committee.<br>C   | contribution  |
|           | Name of Employer Occupation<br>David C Crews, CPA, PC Pension consultant<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>250.00 |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 1000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 / 17                 |
|   | <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)  
David Lipkin

Mailing Address 4900 Perry Highway, Suite 100

City State Zip Code  
Pittsburgh PA 15229-2223

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

Name of Employer Metro Benefits, Inc Occupation Pension consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  /  /   
**Transaction ID:** SA11AI.8750

Amount of Each Receipt this Period  
250.00

contribution

**B.** Full Name (Last, First, Middle Initial)  
Mark D Ray

Mailing Address 1231 I Street Suite 301

City State Zip Code  
Sacramento CA 95814

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

Name of Employer Praxis Consulting Occupation CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  /  /   
**Transaction ID:** SA11AI.8738

Amount of Each Receipt this Period  
250.00

contribution

**C.** 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  /  /   
**Transaction ID:** SA11AI.8733

Amount of Each Receipt this Period  
1000.00

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 11 / 17

(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)  
John M Sciarra

Mailing Address 3030 Old Ranch Parkway, Suite 400

City State Zip Code  
Seal Beach CA 90740

FEC ID number of contributing federal political committee. C

Name of Employer National Retirement Services, Inc  
Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 04 / 2009

**Transaction ID:** SA11AI.8746

Amount of Each Receipt this Period  
500.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Ralph W Shaw

Mailing Address 6400 S Fiddlers Green Circle Suite 500

City State Zip Code  
Englewood CO 80111-4950

FEC ID number of contributing federal political committee. C

Name of Employer REPTTECH Corp  
Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 04 / 2009

**Transaction ID:** SA11AI.8740

Amount of Each Receipt this Period  
500.00

contribution

**C.**

Full Name (Last, First, Middle Initial)  
Peter R Stephan

Mailing Address 23046 Avenida de la Carlota

City State Zip Code  
Laguna Hills CA 92653-1548

FEC ID number of contributing federal political committee. C

Name of Employer The Pension Group, Inc  
Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
02 / 11 / 2009

**Transaction ID:** SA11AI.8716

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: (check only one)       | PAGE 12 / 17                 |
|   | <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

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Peter K Swisher                  | Date of Receipt<br>MM / DD / YYYY<br>02 / 09 / 2009 |
|   | Mailing Address 2353 Alexandria Drive, Suite 100                            | <b>Transaction ID:</b> SA11AI.8723                  |
|   | City State Zip Code<br>Lexington KY 40504-3208                              | Amount of Each Receipt this Period<br>500.00        |
|   | FEC ID number of contributing federal political committee.<br>C             | contribution  |
|   | Name of Employer Occupation<br>Unified Trust Company, NA Pension consultant |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>500.00  |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Nan Underhill                        | Date of Receipt<br>MM / DD / YYYY<br>02 / 04 / 2009 |
|   | Mailing Address 2203 N Lois Ave, Suite M-350                                    | <b>Transaction ID:</b> SA11AI.8757                  |
|   | City State Zip Code<br>Tampa FL 33607-2370                                      | Amount of Each Receipt this Period<br>250.00        |
|   | FEC ID number of contributing federal political committee.<br>C                 | contribution  |
|   | Name of Employer Occupation<br>Retirement Plan Services, Inc Pension consultant |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00  |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Emily Urbano                   | Date of Receipt<br>MM / DD / YYYY<br>02 / 10 / 2009 |
|   | Mailing Address 1150 S Olive St Suite T-09-07                             | <b>Transaction ID:</b> SA11AI.8717                  |
|   | City State Zip Code<br>Los Angeles CA 90015-2211                          | Amount of Each Receipt this Period<br>150.00        |
|   | FEC ID number of contributing federal political committee.<br>C           | contribution  |
|   | Name of Employer Occupation<br>Transamerica Life Companies Vice President |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00  |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 900.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... |        |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 17  
(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)  
Karen E Wright

Mailing Address 961 Laurel Street  
Suite 200

City San Carlos State CA Zip Code 94070-3916

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

Name of Employer Karen Wright, QPA Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: SA11AI.8768

Amount of Each Receipt this Period  
250.00

contribution

**B.**

Full Name (Last, First, Middle Initial)  
Nelson K Yeung

Mailing Address 17870 Castleton Street  
Suite 395

City City of Industry State CA Zip Code 91748-1755

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

Name of Employer Allied Consultants, Inc Occupation Pension consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: SA11AI.8789

Amount of Each Receipt this Period  
250.00

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2009

Transaction ID: SA11AI.8777

Amount of Each Receipt this Period  
125.00

contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **625.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **10775.00**

**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 / 17

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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)  
SunTrust Bank

Transaction ID: SB21B.8812  
Date of Disbursement

Mailing Address Post Office Box 85024

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 0 |   | 2 | 0 | 0 | 9 |

City State Zip Code  
Richmond VA 23285-5024

Amount of Each Disbursement this Period

|        |
|--------|
| 260.34 |
|--------|

Purpose of Disbursement

|                   |
|-------------------|
| 001               |
| Category/<br>Type |

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

|        |
|--------|
| 260.34 |
|--------|

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

|        |
|--------|
| 260.34 |
|--------|

**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: SB23.8802  
Date of Disbursement

Mailing Address Post Office Box 65056

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 2 | 0 |   | 2 | 0 | 0 | 9 |

City Baltimore State MD Zip Code 21209

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement contribution

|     |
|-----|
| 011 |
|-----|

Category/Type

Candidate Name  
BENJAMIN L CARDIN

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: MD District: 03

B.

Full Name (Last, First, Middle Initial)  
CITIZENS FOR HARKIN

Transaction ID: SB23.8794  
Date of Disbursement

Mailing Address P O BOX 811

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

City DES MOINES State IA Zip Code 50304

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement contribution

|     |
|-----|
| 011 |
|-----|

Category/Type

Candidate Name  
TOM HARKIN

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District: 00

C.

Full Name (Last, First, Middle Initial)  
Glacier PAC

Transaction ID: SB23.8806  
Date of Disbursement

Mailing Address 818 Connecticut Ave. NW Suite 1100

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 0 | 2 |   | 2 | 0 | 0 | 9 |

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

|         |
|---------|
| 5000.00 |
|---------|

Purpose of Disbursement contribution

|     |
|-----|
| 011 |
|-----|

Category/Type

Candidate Name  
Max Baucus

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: MT District: 00

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

|         |
|---------|
| 7000.00 |
|---------|

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

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)<br>Pomeroy for Congress   | Transaction ID: SB23.8801<br>Date of Disbursement  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Mailing Address PO Box 75214  | <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>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 3 |  | 2 | 0 | 0 |
| M       | M   | /  | D       | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 0       | 2   |  | 0       | 3 |   | 2 | 0 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |
|         | City Washington State DC Zip Code 20013   | Amount of Each Disbursement this Period  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Purpose of Disbursement contribution  | <table border="1"><tr><td>1000.00</td></tr></table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 1000.00 |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Candidate Name Earl Ralph Pomeroy   | <table border="1"><tr><td>011</td></tr></table> Category/Type  | 011     |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 011     |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: ND District: 00 | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|         |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|---------|---|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| B.      | Full Name (Last, First, Middle Initial)<br>RYAN FOR CONGRESS  | Transaction ID: SB23.8807<br>Date of Disbursement  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Mailing Address P. O. Box 1919<br>P. O. Box 1919  | <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>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 2 |  | 2 | 0 | 0 |
| M       | M   | /  | D       | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 0       | 2   |  | 0       | 2 |   | 2 | 0 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |
|         | City Janesville State WI Zip Code 53547   | Amount of Each Disbursement this Period  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Purpose of Disbursement contribution  | <table border="1"><tr><td>1000.00</td></tr></table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 1000.00 |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Candidate Name PAUL D RYAN  | <table border="1"><tr><td>011</td></tr></table> Category/Type  | 011     |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 011     |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WI District: 01 | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|         |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|---------|---|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| C.      | Full Name (Last, First, Middle Initial)<br>Scott Garret for Congress  | Transaction ID: SB23.8803<br>Date of Disbursement  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Mailing Address 100 POND SCHOOL ROAD  | <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>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 1 | 9 |  | 2 | 0 | 0 |
| M       | M   | /  | D       | D | / | Y | Y | Y | Y |   |   |   |   |   |  |   |   |  |   |   |   |
| 0       | 2   |  | 1       | 9 |   | 2 | 0 | 0 | 9 |   |   |   |   |   |  |   |   |  |   |   |   |
|         | City SUSSEX State NJ Zip Code 07461   | Amount of Each Disbursement this Period  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Purpose of Disbursement contribution  | <table border="1"><tr><td>1000.00</td></tr></table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 1000.00 |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Candidate Name SCOTT GARRETT  | <table border="1"><tr><td>011</td></tr></table> Category/Type  | 011     |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
| 011     |   |  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |
|         | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NJ District: 05 | Disbursement For: 2010<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |

|  |   |         |
|--|---|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | <table border="1"><tr><td>3000.00</td></tr></table> | 3000.00 |
| 3000.00  |   |         |
| <b>TOTAL</b> 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 17 / 17

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)  
WYDEN FOR SENATE

Transaction ID: SB23.8797

Date of Disbursement

Mailing Address PO BOX 3498

|                |                |   |                |                |   |                |                |                |                |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|
| <sup>M</sup> 0 | <sup>M</sup> 2 | / | <sup>D</sup> 1 | <sup>D</sup> 7 | / | <sup>Y</sup> 2 | <sup>Y</sup> 0 | <sup>Y</sup> 0 | <sup>Y</sup> 9 |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|

City PORTLAND State OR Zip Code 97208

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement contribution

|                   |
|-------------------|
| 011               |
| Category/<br>Type |

Candidate Name  
RONALD LEE WYDEN

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OR District: 00

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

|         |
|---------|
| 1000.00 |
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TOTAL This Period (last page this line number only) ..... ▶

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| 11000.00 |
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