

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 10 01 2007 through 10 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Brian H. Graff, Esq.

Signature of Treasurer Electronically Filed by Mr. Brian H. Graff, Esq. Date 12 20 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		160628.20
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	152174.59									
(c) Total Receipts (from Line 19)	20865.67	72344.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	173040.26	232972.23								
7. Total Disbursements (from Line 31)	10633.83	70565.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	162406.43	162406.43								
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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	17716.67	56933.35
(i) Itemized (use Schedule A)	3149.00	15410.68
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	20865.67	72344.03
(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)	20865.67	72344.03
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))	20865.67	72344.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20865.67	72344.03

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	133.83	1416.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	133.83	1416.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	69149.08
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))..	10633.83	70565.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10633.83	70565.80

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	20865.67	72344.03
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20865.67	72344.03
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	133.83	1416.72
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	133.83	1416.72

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial) A. Donna Brewster		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
Mailing Address 7575 Tyler Blvd, Suite A-4		Transaction ID: SA11A1.7890
City State Zip Code Mentor OH 44060-4882	Amount of Each Receipt this Period 41.67	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Brewster & Brewster, Inc	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.03	

Full Name (Last, First, Middle Initial) B. Alex M Brucker		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
Mailing Address 10880 Wilshire Blvd, Suite 2210		Transaction ID: SA11A1.7899
City State Zip Code Los Angeles CA 90024-4101	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Brucker Morra, APC	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Michael E Callahan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 72 Queen Street		Transaction ID: SA11A1.7861
City State Zip Code Southington CT 06489	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer PenTec, Inc	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 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

Full Name (Last, First, Middle Initial) A. Ms Heidi J. Cook		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 3300 North A Street Suite 7-270		Transaction ID: SA11A1.7908	
City State Zip Code Midland TX 79705	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer InWest Retirement Solutions, I Occupation retirement	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Steven D Cooper		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7	
Mailing Address 18682 Beach Blvd, Suite 250		Transaction ID: SA11A1.7871	
City State Zip Code Huntington Beach CA 92648-2048	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer SDCooper Company Occupation Pension consultant	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Stephen L Dobrow		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 875 Mahler Road, Suite 105		Transaction ID: SA11A1.7898	
City State Zip Code Burlingame CA 94010-1615	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		contribution	
Name of Employer Primark Benefits Occupation Pension consultant	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 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) Mark K Dunbar Mailing Address 437 Grant Street, Suite 1100 City State Zip Code Pittsburgh PA 15219-6002 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.7883 Amount of Each Receipt this Period 500.00 contribution
Name of Employer Occupation Dunbar, Bender & Zapf, Inc Pension consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

B. Full Name (Last, First, Middle Initial) James E Farley Mailing Address 90 Hudson St City State Zip Code Jersey City NJ 07302-3900 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7 Transaction ID: SA11A1.7863 Amount of Each Receipt this Period 500.00 contribution
Name of Employer Occupation Lord, Abbett & Company Pension Consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		

C. Full Name (Last, First, Middle Initial) James R Feutz Mailing Address PO Box 82040 City State Zip Code Tampa FL 33682-2040 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7 Transaction ID: SA11A1.7875 Amount of Each Receipt this Period 2000.00 contribution
Name of Employer Occupation Suncoast Pension & Benefit Group, Inc Pension consultant Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 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

Full Name (Last, First, Middle Initial) A. Gerald F Foran, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 7
Mailing Address 60 W Broad Street Suite 302		Transaction ID: SA11A1.7886
City State Zip Code Bethlehem PA 18018-5701	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Occupation GF Pension Corporation Pension consultant	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Karen L Franklin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 6 / 2 0 0 7
Mailing Address 18682 Beach Blvd, Suite 200		Transaction ID: SA11A1.7872
City State Zip Code Huntington Beach CA 92648-2048	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Occupation SDCooper Company Pension consultant	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas H Gellman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 7
Mailing Address 1125 NE 125th Street Suite 250		Transaction ID: SA11A1.7921
City State Zip Code North Miami FL 33161-5014	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Occupation ERISA Pension Systems Pension consultant	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 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

Full Name (Last, First, Middle Initial) A. W. David Hand		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7
Mailing Address 5700 Northwest Central Drive Suite 400		Transaction ID: SA11A1.7879
City State Zip Code Houston TX 77092-2092	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Hand Benefits & Trust, 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	

Full Name (Last, First, Middle Initial) B. Richard A Hochman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7
Mailing Address Post Office Box 196		Transaction ID: SA11A1.7916
City State Zip Code Butler NJ 07405-1370	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer McKay Hochman Company, Inc	Occupation Pension consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Karen A Jordan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7
Mailing Address 400 D Street Suite 300		Transaction ID: SA11A1.7885
City State Zip Code Anchorage AK 99501-2342	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		contribution
Name of Employer Alaska Pension Services, Ltd	Occupation Pension consultant	
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) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 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

Full Name (Last, First, Middle Initial) A. Petros P Koumantaros		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 6402 19th St W		Transaction ID: SA11A1.7913	
City Tacoma	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98466-6130		contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Spectrum Pension Consultants	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Yannis Koumantaros		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	
Mailing Address 6402 19th Street W		Transaction ID: SA11A1.7912	
City Tacoma	State WA	Amount of Each Receipt this Period 100.00	
Zip Code 98466-6130		contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Spectrum Pension Consultants	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) C. Barry S Kublin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7	
Mailing Address 6 Rhoads Drive, Suite 7		Transaction ID: SA11A1.7876	
City Utica	State NY	Amount of Each Receipt this Period 250.00	
Zip Code 13502-6317		contribution	
FEC ID number of contributing federal political committee. C			
Name of Employer Benefit Plans Administrators	Occupation Pension consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 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"/>	<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)
Richard D Landsberg

Mailing Address 1 Nationwide Plaza
Suite 01-10-05

City Columbus State OH Zip Code 43125-2239

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

Name of Employer Nationwide Financial Services Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7887

Amount of Each Receipt this Period
350.00

contribution

B. Full Name (Last, First, Middle Initial)
Theresa Lensander

Mailing Address 136 W Canon Perdido Street

City Santa Barbara State CA Zip Code 93101-3242

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

Name of Employer The American Pension Company Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7882

Amount of Each Receipt this Period
250.00

contribution

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

Mailing Address 120 W Street Road

City Kennett Square State PA Zip Code 19348-1614

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

Name of Employer Atlantic Pension Services, Inc Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.7910

Amount of Each Receipt this Period
250.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 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)
Dale C Rogers

Mailing Address 7004 Mira Vista Blvd

City State Zip Code
Fort Worth TX 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 ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.7920

Amount of Each Receipt this Period
2000.00

contribution

B. Full Name (Last, First, Middle Initial)
Sheldon H Smith

Mailing Address 555 17th Street, Suite 3200

City State Zip Code
Denver CO 80202-3950

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

Name of Employer Holland & Hart, LLP Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.7924

Amount of Each Receipt this Period
1000.00

contribution

C. Full Name (Last, First, Middle Initial)
Valeri Stevens

Mailing Address 3838 W Carson Street Suite 112

City State Zip Code
Torrance CA 90503-6708

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

Name of Employer Main Street Benefits, Inc Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7888

Amount of Each Receipt this Period
500.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 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"/>	<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)
George J Taylor

Mailing Address Post Office Box 1318

City State Zip Code
State College PA 16801-7097

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

Name of Employer Occupation
ARIS Corporation of America Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7881

Amount of Each Receipt this Period
500.00

contribution

B. Full Name (Last, First, Middle Initial)
Sal L Tripodi

Mailing Address 9457 S University Blvd
PMB 120

City State Zip Code
Highlands Ranch CO 80126-4976

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

Name of Employer Occupation
TRI Pension Services Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.7902

Amount of Each Receipt this Period
1000.00

contribution

C. Full Name (Last, First, Middle Initial)
Nan Underhill

Mailing Address 2203 N Lois Ave, Suite M-350

City State Zip Code
Tampa FL 33607-2370

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

Name of Employer Occupation
Retirement Plan Services, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.7880

Amount of Each Receipt this Period
250.00

contribution

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 / 19
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Full Name (Last, First, Middle Initial)
Nicholas J White

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 ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.7862

Amount of Each Receipt this Period
500.00

contribution

B. Full Name (Last, First, Middle Initial)
Mr. Richard M. White

Mailing Address 605 Lake Placid Drive

City State Zip Code
Sequin TX 78155

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

Name of Employer: The Benefit Shop LLC
Occupation: retirement professional

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 0 7

Transaction ID: SA11A1.7906

Amount of Each Receipt this Period
500.00

contribution

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

Mailing Address 2415 E Cambelback Road Suite 960

City State Zip Code
Phoenix AZ 85016-4209

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

Name of Employer: Coble Pension Group, LLC
Occupation: Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: SA11A1.7857

Amount of Each Receipt this Period
125.00

contribution

SUBTOTAL of Receipts This Page (optional)	▶	1125.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 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"/> 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)
Lawrence Zeller

Mailing Address 991 US Highway 22

City State Zip Code
Bridgewater NJ 08807-2956

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

Name of Employer Occupation
Preferred Pension Planning Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	9	/	2	0	0	7

Transaction ID: SA11A1.7901

Amount of Each Receipt this Period
500.00

contribution

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	17716.67

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.7925	
Mailing Address Post Office Box 53852		Date of Disbursement 10 / 03 / 2007	
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period 5.95
Purpose of Disbursement	001 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B.7926	
Mailing Address Post Office Box 53852		Date of Disbursement 10 / 05 / 2007	
City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period 49.66
Purpose of Disbursement	001 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. SunTrust Bank		Transaction ID: SB21B.7927	
Mailing Address Post Office Box 85024		Date of Disbursement 10 / 10 / 2007	
City Richmond	State VA	Zip Code 23285-5024	Amount of Each Disbursement this Period 78.22
Purpose of Disbursement	001 Category/Type		
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	133.83
TOTAL This Period (last page this line number only)	133.83

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. BENJAMIN L CARDIN		Transaction ID: SB23.7939 Date of Disbursement 10 / 02 / 2007
Mailing Address PO BOX 21093		Amount of Each Disbursement this Period 1000.00
City CATONSVILLE	State MD	
Zip Code 21228	Purpose of Disbursement contribution 011 Category/Type	
Candidate Name Cardin, Benjamin L		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 03	

Full Name (Last, First, Middle Initial) B. BENJAMIN L CARDIN		Transaction ID: SB23.7941 Date of Disbursement 10 / 02 / 2007
Mailing Address PO BOX 21093		Amount of Each Disbursement this Period 1000.00
City CATONSVILLE	State MD	
Zip Code 21228	Purpose of Disbursement contribution 011 Category/Type	
Candidate Name Cardin, Benjamin L		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD	District: 03	

Full Name (Last, First, Middle Initial) C. STEPHANIE TUBBS JONES		Transaction ID: SB23.7931 Date of Disbursement 10 / 15 / 2007
Mailing Address 11301 WADE PARK		Amount of Each Disbursement this Period 1000.00
City CLEVELAND	State OH	
Zip Code 44106	Purpose of Disbursement contribution 011 Category/Type	
Candidate Name STEPHANIE TUBBS JONES		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 11	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

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

Full Name (Last, First, Middle Initial) A. NODAK PAC		Transaction ID: SB23.7934 Date of Disbursement																					
Mailing Address Post Office Box 9336		<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>1</td><td>0</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	3		2	0	0	7														
City Fargo	State ND	Zip Code 58106	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution			5000.00																				
Candidate Name Earl Ralph Pomeroy			011 Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: ND	District: 00																						

Full Name (Last, First, Middle Initial) B. PROSPERITY HELPS INSPIRE LIBERTY POLITICAL ACTION COMMITTEE (PHILPAC)		Transaction ID: SB23.7935 Date of Disbursement																					
Mailing Address PO BOX 26366		<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>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	9		2	0	0	7														
City ALEXANDRIA	State VA	Zip Code 22313	Amount of Each Disbursement this Period																				
Purpose of Disbursement contribution			2500.00																				
Candidate Name PHILIP S. ENGLISH			011 Category/ Type																				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: PA	District: 03																						

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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

10500.00