

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 Arlington VA 22203 1637 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 10 01 2009 through 10 31 2009

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

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

Signature of Treasurer Electronically Filed by Mr. Brian H. Graff, Esq. Date 11 12 2009

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

Table with 7 columns and 1 row for Office Use Only

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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" 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		127769.81
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	91843.40									
(c) Total Receipts (from Line 19)	3512.00	53473.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	95355.40	181242.83								
7. Total Disbursements (from Line 31)	8749.18	94636.61								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	86606.22	86606.22								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Write or Type Committee Name

American Society of Pension Professionals & Actuaries PAC

Report Covering the Period: From: To:

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)	3400.00	40081.00
(ii) Unitemized	112.00	13392.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3512.00	53473.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3512.00	53473.02
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3512.00	53473.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3512.00	53473.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	249.18	1472.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	249.18	1472.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	92839.13
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	325.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	325.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8749.18	94636.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8749.18	94636.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	3512.00	53473.02
34. Total Contribution Refunds (from Line 28(d))	0.00	325.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3512.00	53148.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	249.18	1472.48
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	249.18	1472.48

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

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

FOR LINE NUMBER: PAGE 6 / 11
(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)
Stephen L Dobrow

Mailing Address 875 Mahler Road, Suite 105

City State Zip Code
Burlingame CA 94010-1615

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

Name of Employer Occupation
Primark Benefits Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.9052

Amount of Each Receipt this Period
100.00

contribution

B. Full Name (Last, First, Middle Initial)
Saul F Feingold

Mailing Address 22 Elm Street

City State Zip Code
Worcester MA 01608-1713

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

Name of Employer Occupation
Feingold & Feingold Insurance Agency Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.9046

Amount of Each Receipt this Period
250.00

contribution

C. Full Name (Last, First, Middle Initial)
John P Gingas

Mailing Address 1500 Abbott Road, Suite 150

City State Zip Code
East Lansing MI 48823-1222

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

Name of Employer Occupation
Financial Technology, Inc Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.9051

Amount of Each Receipt this Period
50.00

contribution

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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 / 11

(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)
Carla J Kadavy

Mailing Address 5755 Granger Road, Suite 501

City Cleveland State OH Zip Code 44131-1442

FEC ID number of contributing federal political committee. C

Name of Employer Libman Ryder & Company, Inc
Occupation Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt M M / D D / Y Y Y Y
10 / 02 / 2009

Transaction ID: SA11AI.9042

Amount of Each Receipt this Period 800.00

contribution

B.

Full Name (Last, First, Middle Initial)
Kyla Marie Keck

Mailing Address Post Office Box 32999

City Knoxville State TN Zip Code 37919-4005

FEC ID number of contributing federal political committee. C

Name of Employer Retirement Plan Consultants
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
10 / 28 / 2009

Transaction ID: SA11AI.9058

Amount of Each Receipt this Period 250.00

contribution

C.

Full Name (Last, First, Middle Initial)
Michele C Kocak

Mailing Address 3030 Pebble Beach Drive

City Ellicott City State MD Zip Code 21042-2113

FEC ID number of contributing federal political committee. C

Name of Employer Michele C Kocak, CPC, QPA
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
10 / 19 / 2009

Transaction ID: SA11AI.9055

Amount of Each Receipt this Period 250.00

contribution

SUBTOTAL of Receipts This Page (optional) 1300.00

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 / 11
(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)
Terrance Power

Mailing Address 8483 W Linebaugh Ave

City Tampa State FL Zip Code 33625-3729

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

Name of Employer Plan Compliance Services, Inc. Occupation President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 22 / 2009
Transaction ID: SA11AI.9056
Amount of Each Receipt this Period 500.00
contribution

B. Full Name (Last, First, Middle Initial)
Stephen H Rosen

Mailing Address 89 N Haddon Avenue

City Haddonfield State NJ Zip Code 08033-2473

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

Name of Employer Stephen H Rosen & Associates Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 01 / 2009
Transaction ID: SA11AI.9040
Amount of Each Receipt this Period 250.00
contribution

C. Full Name (Last, First, Middle Initial)
Edward B Snyder

Mailing Address 1670 Whitehorse Hamilton Square Rd

City Hamilton State NJ Zip Code 08690-3541

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

Name of Employer MRP Plans, Inc Occupation Pension consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 06 / 2009
Transaction ID: SA11AI.9045
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 9 / 11
(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)
Melinda Thomas

Mailing Address 755 Santa Rosa Street

City State Zip Code
San Luis Obispo CA 93401

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Morgan Stanley Pension consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.9044

Amount of Each Receipt this Period
100.00

contribution

B. Full Name (Last, First, Middle Initial)
Connie M Toth

Mailing Address 8211 Post Oak Ct

City State Zip Code
Fort Wayne IN 46825-7103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
The Alliance Fort Wayne Allen

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 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.9039

Amount of Each Receipt this Period
100.00

contribution

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

Mailing Address 110 W. Berry Ste. 1809

City State Zip Code
Ft Wayne IN 46802

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Applied Pension Professionals

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 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.9047

Amount of Each Receipt this Period
500.00

contribution

SUBTOTAL of Receipts This Page (optional) ► 700.00

TOTAL This Period (last page this line number only) ► 3400.00

**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)

<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		Transaction ID: SB21B.9065	
	Mailing Address Post Office Box 53852		Date of Disbursement 10 / 05 / 2009	
	City Phoenix	State AZ	Zip Code 85072-3852	Amount of Each Disbursement this Period 46.30
	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:			

B.	Full Name (Last, First, Middle Initial) SunTrust Bank		Transaction ID: SB21B.9066	
	Mailing Address Post Office Box 85024		Date of Disbursement 10 / 13 / 2009	
	City Richmond	State VA	Zip Code 23285-5024	Amount of Each Disbursement this Period 202.88
	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) ►

249.18

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

249.18

**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) FRIENDS OF CONGRESSMAN GEORGE MILLER <hr/> Mailing Address P.O. Box 5864 <hr/> City Concord State CA Zip Code 94524 <hr/> Purpose of Disbursement <hr/> Candidate Name George Miller <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9059 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) LINC PAC <hr/> Mailing Address 124 W. Capitol Suite 1630 <hr/> City Little Rock State AR Zip Code 72201 <hr/> Purpose of Disbursement <hr/> Candidate Name Blanche Lambert Lincoln <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9060 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) SCHWARZ FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 2063 <hr/> City BATTLE CREEK State MI Zip Code 49016 <hr/> Purpose of Disbursement <hr/> Candidate Name ALLYSON Y SCHWARTZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.9063 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	8500.00