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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

A M E R I C A N B E N E F I T S C O U N C I L

P O L I T I C A L A C T I O N C O M M I T T E E

ADDRESS (number and street) 1 1 2 1 2 N E W Y O R K A V E N W S U I T E 1 1 2 1 5 1 0

Check if different than previously reported. (ACC)

W A S H I N G T O N D C 2 1 0 0 0 5 - b a 8 1 7

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 0 0 1 5 3 1 7 1

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11)
<small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12)
<small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [] [] [] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [] [] [] in the State of []

5. Covering Period 0 7 / 0 1 / 2 0 0 6 through 0 9 / 3 0 / 2 0 0 6

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 James A. Klein

Signature of Treasurer *James A. Klein* Date 1 0 / 1 0 / 2 0 0 6

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

Office Use Only									
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FEC FORM 3X
(Rev. 02/2003)

26039203463

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Benefits Council Political Action Committee

Report Covering the Period:

From:

07 / 01 / 2006

To:

09 / 30 / 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2006		996505
(b) Cash on Hand at Beginning of Reporting Period.....	860050	
(c) Total Receipts (from Line 19).....	5760	567979
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	865810	1564484
7. Total Disbursements (from Line 31).....	750000	1448674
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	115810	115810
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		



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

26939203464

**DETAILED SUMMARY PAGE
of Receipts**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

American Benefits Council Political Action Committee

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).....		
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		5 5 0 0 . 0 0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶		5 5 0 0 . 0 0
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, interest, etc.).....	5 7 6 . 0	1 7 9 . 7 9
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	5 7 6 0	5 6 7 9 . 7 9
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5 7 6 0	5 6 7 9 . 7 9

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,500.00	1,447,743
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements taxes		931
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7,500.00	1,448,674
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7,500.00	1,448,674

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)		5,500.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 33 from Line 32)		5,500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 36 from Line 35)		

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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 1	OF 1
	<input 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 checked="" 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 Benefits Council Political Action Committee

A. Full Name (Last, First, Middle Initial) **Wachovia Bank (interest)**

Mailing Address **P.O. Box 13327**

City **Roanoke** State **VA** Zip Code **24040-7314**

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

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date **1,797.9**

Date of Receipt **09 / 30 / 2006**

Amount of Each Receipt this Period **576.0**

B. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

C. Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date _____

Date of Receipt _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional) **576.0**

TOTAL This Period (last page this line number only) **576.0**

26039203468

**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 1 OF 3
	<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 Benefits Council Political Action Committee

A. Volunteers for Shimkus

Full Name (Last, First, Middle Initial):
Volunteers for Shimkus

Date of Disbursement: 07 / 05 / 2006

Mailing Address: P.O. Box 2776

City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement: Political Fundraiser Contribution

Candidate Name: John M. Shimkus

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: IL District: 19

Category/Type: 0,1,1

Amount of Each Disbursement this Period: 5,000.00

B. Chocola for Congress

Full Name (Last, First, Middle Initial):
Chocola for Congress

Date of Disbursement: 07 / 05 / 2006

Mailing Address: P.O. Box 2776

City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement: Campaign Contribution

Candidate Name: Chris Chocola

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: IN District: 2

Category/Type: 0,1,1

Amount of Each Disbursement this Period: 5,000.00

C. Kline for Congress

Full Name (Last, First, Middle Initial):
Kline for Congress

Date of Disbursement: 08 / 02 / 2006

Mailing Address: 101 West Burnette Parkway

City: Burnsville State: MN Zip Code: 55337

Purpose of Disbursement: Campaign Contribution

Candidate Name: John Kline

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MN District: 2

Category/Type: 0,1,1

Amount of Each Disbursement this Period: 1,000.00

SUBTOTAL of Disbursements This Page (optional): 2,000.00

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

26039203469

**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 Benefits Council Political Action Committee

Full Name (Last, First, Middle Initial)

A. Johnson for Congress Committee

Date of Disbursement

09 / 19 / 2006

Mailing Address

2875 Towerview Road, Suite 1000

City State Zip Code

Herndon VA 20171

Purpose of Disbursement

General Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

1 0 0 0 0 0

Candidate Name

Nancy L. Johnson

Office Sought:

House
 Senate
 President
District: 5

Disbursement For:

Primary General
 Other (specify) ▼

State: CT

Full Name (Last, First, Middle Initial)

B. Andrews for Congress

Date of Disbursement

09 / 19 / 2006

Mailing Address

P.O. Box 295

City State Zip Code

Oaklyn NJ 06107

Purpose of Disbursement

PAC Fundraiser Contribution

0 1 1

Amount of Each Disbursement this Period

1 0 0 0 0 0

Candidate Name

Robert E. Andrews

Office Sought:

House
 Senate
 President
District: 1

Disbursement For:

Primary General
 Other (specify) ▼

State: NJ

Full Name (Last, First, Middle Initial)

C. Hoyer for Congress

Date of Disbursement

09 / 19 / 2006

Mailing Address

7905 Malcolm Road, Suite 102

City State Zip Code

Clinton MD 20735

Purpose of Disbursement

Campaign Contribution

0 1 1

Amount of Each Disbursement this Period

1 0 0 0 0 0

Candidate Name

Steny H. Hoyer

Office Sought:

House
 Senate
 President
District: 5

Disbursement For:

Primary General
 Other (specify) ▼

State: MD

SUBTOTAL of Disbursements This Page (optional)

3 0 0 0 0 0

TOTAL This Period (last page this line number only)

26039203470

**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 3 OF 3

<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 Benefits Council Political Action Committee

Full Name (Last, First, Middle Initial)

A. David Wu for Congress

Date of Disbursement

09 / 19 / 2006

Mailing Address

499 South Capitol Street, S.W. Suite 412

City

Washington

State

DC

Zip Code

20003

Purpose of Disbursement

PAC Fundraiser Contribution

0 1 1

Candidate Name

David Wu

Category/
Type

Amount of Each Disbursement this Period

1 0 0 0 0 0

Office Sought:

House

Senate

President

State:

OR

District:

1

Disbursement For:

Primary

Other (specify) ▼

General

Full Name (Last, First, Middle Initial)

B. Friends of John Boehner

Date of Disbursement

09 / 19 / 2006

Mailing Address

7908 Cincinnati-Dayton Road, Suite 1

City

West Chester

State

OH

Zip Code

45069

Purpose of Disbursement

Campaign Contribution

0 1 1

Candidate Name

John A. Boehner

Category/
Type

Amount of Each Disbursement this Period

1 5 0 0 0 0

Office Sought:

House

Senate

President

State:

OH

District:

8

Disbursement For:

Primary

Other (specify) ▼

General

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

0 0 0 0 0 0

Office Sought:

House

Senate

President

State:

District:

Disbursement For:

Primary

Other (specify) ▼

General

SUBTOTAL of Disbursements This Page (optional)

2 5 0 0 0 0

TOTAL This Period (last page this line number only)

7 5 0 0 0 0

26039203471

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
10/11/06

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark


Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 10/11/06
PREPARER **DATE PREPARED**

26039203472