FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	
Section 16 Form 4 or Form 5	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

									a) of the Secu Investment C			.934		ll.	per res	erage burde ponse:	n 0.5
						2. Issuer Name and Ticker or Trading Symbol Anchor Funding Services, Inc. ["AFNG"]						(Ch	eck all applica	X		10% O	wner
(Last) (First) (Middle) C/O ANCHOR FUNDING SERVICES, INC. 10801 JOHNSTON ROAD SUITE 210						3. Date of Earliest Transaction (Month/Day/Year) 03/23/2009							Officer (below)	give title Pre	e X Other below resident		specify
(Street) CHARLOTTE NC 28226				4.	If Ame	endment, C	Date o	of Original File	ed (Month/Da	ay/Year)	Line	Form fil	ed by One	e Repor	(Check Ap ting Perso One Repo	n	
(City)	(8	State)	(Zip)	Doriv	/ativ	vo S	curitio	. ^ ^	auired Di	enosed o	of or Re	neficially	v Owned				
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)			sactio	action 2A. Deemed Execution Date,		Code (Instr.		ed (A) or etr. 3, 4 and	5. Amount Securities Beneficiall Owned Fol		Form:	Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									uired, Dis , options,				Owned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, Tr	4. Transaction Code (Instr.		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and of Securiti Underlying Derivative (Instr. 3 and	d Amount ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported	e Ow s Fo ally Dir or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				C	ode	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transact (Instr. 4)	ion(s)		
Common Stock	\$0.62	03/23/2009			A		250,000		03/23/2009	03/23/2019	Common Stock	250,000	(1)	1,200,0	000	D	
Bernste (Last) C/O AN	ein Brad I	f Reporting Person* Mitchell (First) NDING SERVIC ROAD SUITE 2	(Middle	e)													
(Street)	ОТТЕ	NC	28226	5													
(City)		(State)	(Zip)														
	nd Address of	f Reporting Person*	,														

Explanation of Responses:

(First)

C/O ANCHOR FUNDING SERVICES, INC., 10801 JOHNSTON ROAD SUITE 210

NC

(State)

1. Not applicable.

(Last)

(Street) CHARLOTTE,

(City)

03/25/2009 /s/ Brad Bernstein 03/25/2009 /s/ Ilissa Bernstein

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

(Middle)

28226

(Zip)

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.