

AmerUs Group
699 Walnut Street
Des Moines, IA 50309-3948
Mailing Address:
P.O. Box 1555
Des Moines, IA 50306-1555
515/362-3600

AmerUs Group
Political Action Committee

FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 31 9 50 AM '99

AMERUS
Group

CERTIFIED MAIL/RETURN RECEIPT

July 28, 1999

Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

RE: AmerUs Group Political Action Committee

Dear Sir or Madam:

Enclosed is the AmerUs Group Political Action Committee's July 31 Mid Year Report for the reporting period January 1, 1999 through June 30, 1999.

If you have any questions, please contact our office. Thank you.

Sincerely,



Jeananne M. Calender
Assistant Secretary

Enclosure (1)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 31 9 51 AM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (SEE 11)		2. FEC IDENTIFICATION NUMBER
COO180901 060499 P 275 JAMES A. SMALLENBERGER AMERUS GROUP POLITICAL ACTION COMMITTEE 411 FIFTH AVENUE DES MOINES IA 50309		COO180901
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 01/01/99 through 06/30/99		
6. (a) Cash on Hand January 1, 19 99		\$ 15,402.76
(b) Cash on Hand at Beginning of Reporting Period	\$ 15,402.76	
(c) Total Receipts (from Line 19)	\$ 5,710.06	\$ 5,710.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 21,112.82	\$ 21,112.82
7. Total Disbursements (from Line 30)	\$ 500.00	\$ 500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 20,612.82	\$ 20,612.82
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)	\$ ---	
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. Smallenberger		
Signature of Treasurer <i>James A. Smallenberger by ime</i>		Date 7-28-1999

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-634-1100

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X
(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
America Group Political Action Committee		FROM 01/01/99	TO: 06/30/99	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	4,170.06	4,170.06	11(a)(1)
ii.	Unitemized	1,540.00	1,540.00	11(a)(2)
iii.	Total (add i and ii) >	5,710.06	5,710.06	11(a)(3)
b.	Political Party Committees	---	---	11(b)
c.	Other Political Committees (such as PACs)	---	---	11(c)
d.	Total Contributions (add a ii, b and c) >	5,710.06	5,710.06	11(d)
12.	Transfers From Affiliated/Other Party Committees	---	---	12
13.	All Loans Received	---	---	13
14.	Loan Repayments Received	---	---	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	---	---	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	---	---	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	---	---	17
18.	Transfers from Nonfederal Account for Joint Activity	---	---	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	5,710.06	5,710.06	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	5,710.06	5,710.06	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	---	---	21(a)(1)
ii.	Non-Federal Share	---	---	21(a)(2)
b.	Other Federal Operating Expenditures	---	---	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	---	---	21(c)
22.	Transfers to Affiliated/Other Party Committees	---	---	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	(500.00)	(500.00)	23
24.	Independent Expenditures (use Schedule E)	---	---	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	---	---	25
26.	Loan Repayments Made	---	---	26
27.	Loans Made	---	---	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	---	---	28(a)
b.	Political Party Committees	---	---	28(b)
c.	Other Political Committees (such as PACs)	---	---	28(c)
d.	Total Contribution Refunds (add a, b and c) >	---	---	28(d)
29.	Other Disbursements	1,000.00	1,000.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	500.00	500.00	30
31.	Total Federal Disbursements (subtract line 21 a i from line 30) >	500.00	500.00	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	5,710.06	5,710.06	32
33.	Total Contribution Refunds (from line 28d)	---	---	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	5,710.06	5,710.06	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	---	---	35
36.	Offsets to Operating Expenditures (from line 15)	---	---	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	---	---	37

SCHEDULE A

ITEMIZED RECEIPTS

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)
 AmerUs Group Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brooks, Roger K. 300 Walnut, #183 Des Moines, IA 50309	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$900.00 (\$150 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman, President & CEO Aggregate Year-to-Date > \$ 900.00		
Daley, Victor N. 4131 Plumwood Drive West Des Moines, IA 50265	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$300.00 (\$50 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP, Chief Admin & HR Officer Aggregate Year-to-Date > \$ 300.00		
Davis, Phyllis A. 9104 Indian Hills Drive Des Moines, IA 50325	AmerUs Life Insurance 611 5th Avenue Des Moines, IA 50309	Payroll Deduction	\$210.00 (1 @ \$120.00 3 @ \$30 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP - Financial Actuary Aggregate Year-to-Date > \$ 210.00		
Fraizer, Michael G. 5566 Little Leaf Trail West Des Moines, IA 50266	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$250.02 (\$41.67 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP & Chief Financial Officer Aggregate Year-to-Date > \$ 250.02		
Gillasky, Thomas C. 1515 South 42nd Street West Des Moines, IA 50265	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$600.00 (\$100 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP & Chief Investment Officer Aggregate Year-to-Date > \$ 600.00		
Haggerty, Joseph K. 601 S. 33rd Street West Des Moines, IA 50265	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$250.02 (\$41.67 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP and General Counsel Aggregate Year-to-Date > \$ 250.02		
Hanson, Marcia S. 760 Walnut Ridge Drive Waukee, IA 50263	AmerUs Group Co. 699 Walnut Street Des Moines, IA	Payroll Deduction	\$510.00 (\$85.00 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SVP Corporate Development Aggregate Year-to-Date > \$ 510.00		

SUBTOTAL of Receipts This Page (optional)	\$3,020.04
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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)

AmerUs Group Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kalainov, Sam C. 681 50th Street Des Moines, IA 50312	AmerUs Group Co 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$600.00 (\$100 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman Emeritus Aggregate Year-to-Date > \$ 600.00		
B. Full Name, Mailing Address and ZIP Code La Touche, Jenna 2011 Ashworth Road West Des Moines, IA 50265	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$300.00 (\$50 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SVP-Communications Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Strallenberger, James A. 12906 NW 107th Street Des Moines, IA 50323	AmerUs Life Holdings, Inc. 699 Walnut Street Des Moines, IA 50309	Payroll Deduction	\$250.02 (\$41.67 monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SVP and Secretary Aggregate Year-to-Date > \$ 250.02		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$1,150.02

TOTAL This Period (last page this line number only) \$4,170.06

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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)

Aneris Group Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nussle for Congress Committee PO Box 324 Manchester, IA 52057	Reverse transaction: check issued 10/07/98; never cashed Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	4/23/99	(1,000.00)
Romney for Congress PO Box 746 Dismarck, ND 58502-0746	Contribution - North Dakota 500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000	6/21/99	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) (500.00)

TOTAL This Period (last page this line number only) (500.00)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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)

AmerUs Group Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Iowa Life Insurance Industry PAC c/o National Travelers Life Ins. Co. 5700 Westown Parkway West Des Moines, IA 50266	Contribution \$2,000.00 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Industry 1999	5/24/99	\$2,000.00
B. Full Name, Mailing Address and ZIP Code Iowans for Visack/Pedersen PO Box 958 Des Moines, IA 50304	Reverse Transaction: Check issued 12/10/98; never cashed Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	4/23/99	(1,000.00)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

\$1,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7-28-99
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SL</i> PREPARER	7-31-99 DATE PREPARED