

# 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 Enterprise Mutual Holding Company PAC

ADDRESS (number and street) 601 6th Avenue  
 Check if different than previously reported. (ACC)  
Des Moines IA 50334

2. **FEC IDENTIFICATION NUMBER** C00367524  
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 07 01 2008 through 09 30 2008

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 Barbara L Waymire

Signature of Treasurer Electronically Filed by Barbara L Waymire Date 10 11 2008

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. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
American Enterprise Mutual Holding Company PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		15620.02
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	16368.10									
(c) Total Receipts (from Line 19) .....	2938.12	8686.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	19306.22	24306.22								
7. Total Disbursements (from Line 31) .....	2750.00	7750.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	16556.22	16556.22								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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 Enterprise Mutual Holding Company PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	1015.00	1395.00
(i) Itemized (use Schedule A) .....	1923.12	7291.20
(ii) Unitemized .....	2938.12	8686.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2938.12	8686.20
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)) .....	2938.12	8686.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2938.12	8686.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2750.00	7750.00
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))..	2750.00	7750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2750.00	7750.00

**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) .....	2938.12	8686.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2938.12	8686.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# 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 6 / 14
	<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 Enterprise Mutual Holding Company PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Chris Aasland	Date of Receipt MM / DD / YYYY 07 / 17 / 2008
	Mailing Address 3507 SW Timberline Dr	<b>Transaction ID:</b> SA11AI.15716
	City State Zip Code Ankeny IA 50023	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$15
Name of Employer American Enterprise	Occupation VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Chris Aasland	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 3507 SW Timberline Dr	<b>Transaction ID:</b> SA11AI.15781
	City State Zip Code Ankeny IA 50023	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$15
Name of Employer American Enterprise	Occupation VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Chris Aasland	Date of Receipt MM / DD / YYYY 09 / 25 / 2008
	Mailing Address 3507 SW Timberline Dr	<b>Transaction ID:</b> SA11AI.15838
	City State Zip Code Ankeny IA 50023	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$15
Name of Employer American Enterprise	Occupation VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>105.00</b>
<b>TOTAL</b> 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 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Enterprise Mutual Holding Company PAC

**A.** Full Name (Last, First, Middle Initial)  
Anthony Albano  
Mailing Address 2255 Cairnwell Drive  
City Belvidere State IL Zip Code 61008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer American Republic Insurance Company  
Occupation Agency Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 07 / 17 / 2008  
Transaction ID: SA11AI.15718  
Amount of Each Receipt this Period 30.00  
Semi-Monthly Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Anthony Albano  
Mailing Address 2255 Cairnwell Drive  
City Belvidere State IL Zip Code 61008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer American Republic Insurance Company  
Occupation Agency Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00  
Date of Receipt 08 / 28 / 2008  
Transaction ID: SA11AI.15783  
Amount of Each Receipt this Period 45.00  
Semi-Monthly Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Anthony Albano  
Mailing Address 2255 Cairnwell Drive  
City Belvidere State IL Zip Code 61008  
FEC ID number of contributing federal political committee. **C**  
Name of Employer American Republic Insurance Company  
Occupation Agency Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 09 / 25 / 2008  
Transaction ID: SA11AI.15840  
Amount of Each Receipt this Period 30.00  
Semi-Monthly Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 105.00  
**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 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Enterprise Mutual Holding Company PAC

**A.** Full Name (Last, First, Middle Initial)  
Eric Lindgren  
 Mailing Address 2609 Linda Drive  
 City State Zip Code  
 Urbandale IA 50322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Republic Insurance Company  
 Occupation Agency Sales Manager  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00  
 Date of Receipt 07 / 17 / 2008  
**Transaction ID:** SA11AI.15747  
 Amount of Each Receipt this Period 30.00  
 Semi-Monthly Payroll Deduction \$15

**B.** Full Name (Last, First, Middle Initial)  
Eric Lindgren  
 Mailing Address 2609 Linda Drive  
 City State Zip Code  
 Urbandale IA 50322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Republic Insurance Company  
 Occupation Agency Sales Manager  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00  
 Date of Receipt 08 / 28 / 2008  
**Transaction ID:** SA11AI.15808  
 Amount of Each Receipt this Period 45.00  
 Semi-Monthly Payroll Deduction \$15

**C.** Full Name (Last, First, Middle Initial)  
Eric Lindgren  
 Mailing Address 2609 Linda Drive  
 City State Zip Code  
 Urbandale IA 50322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer American Republic Insurance Company  
 Occupation Agency Sales Manager  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00  
 Date of Receipt 09 / 25 / 2008  
**Transaction ID:** SA11AI.15865  
 Amount of Each Receipt this Period 30.00  
 Semi-Monthly Payroll Deduction \$15

**SUBTOTAL** of Receipts This Page (optional) ..... ► 105.00  
**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 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Enterprise Mutual Holding Company PAC

**A.** Full Name (Last, First, Middle Initial)  
Daniel Peebles

Mailing Address N 5559 Co Road U

City State Zip Code  
Shawano WI 54166

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

Name of Employer American Republic Insurance Company  
Occupation Agency Sales Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 17 / 2008

**Transaction ID:** SA11AI.15755

Amount of Each Receipt this Period 30.00

Semi-Monthly Payroll Deduction \$15

**B.** Full Name (Last, First, Middle Initial)  
Daniel Peebles

Mailing Address N 5559 Co Road U

City State Zip Code  
Shawano WI 54166

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

Name of Employer American Republic Insurance Company  
Occupation Agency Sales Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 28 / 2008

**Transaction ID:** SA11AI.15816

Amount of Each Receipt this Period 45.00

Semi-Monthly Payroll Deduction \$15

**C.** Full Name (Last, First, Middle Initial)  
Daniel Peebles

Mailing Address N 5559 Co Road U

City State Zip Code  
Shawano WI 54166

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

Name of Employer American Republic Insurance Company  
Occupation Agency Sales Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2008

**Transaction ID:** SA11AI.15873

Amount of Each Receipt this Period 30.00

Semi-Monthly Payroll Deduction \$15

**SUBTOTAL** of Receipts This Page (optional) ..... ► 105.00

**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: (check only one)	PAGE 10 / 14
	<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 Enterprise Mutual Holding Company PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Thomas Peterson	Date of Receipt MM / DD / YYYY 07 / 17 / 2008
	Mailing Address 9821 Oakwood Drive	<b>Transaction ID:</b> SA11AI.15756
	City Urbandale State IA Zip Code 50322	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$25.00
Name of Employer American Republic Insurance Company	Occupation Senior Vice President Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Thomas Peterson	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 9821 Oakwood Drive	<b>Transaction ID:</b> SA11AI.15817
	City Urbandale State IA Zip Code 50322	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$25.00
Name of Employer American Republic Insurance Company	Occupation Senior Vice President Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas Peterson	Date of Receipt MM / DD / YYYY 09 / 25 / 2008
	Mailing Address 9821 Oakwood Drive	<b>Transaction ID:</b> SA11AI.15874
	City Urbandale State IA Zip Code 50322	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	Bi-weekly Payroll Deduction \$25.00
Name of Employer American Republic Insurance Company	Occupation Senior Vice President Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>175.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 11 / 14
	<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 Enterprise Mutual Holding Company PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Elizabeth A Powell		Date of Receipt MM / DD / YYYY 07 / 17 / 2008
	Mailing Address 9881 S 161st Street		<b>Transaction ID:</b> SA11AI.15760
	City Omaha	State NE	Zip Code 68136
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer World Insurance Company	Occupation Vice President and Director	Bi-weekly Payroll Deduction \$20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Elizabeth A Powell		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 9881 S 161st Street		<b>Transaction ID:</b> SA11AI.15821
	City Omaha	State NE	Zip Code 68136
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75.00
	Name of Employer World Insurance Company	Occupation Vice President and Director	Bi-weekly Payroll Deduction \$20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth A Powell		Date of Receipt MM / DD / YYYY 09 / 25 / 2008
	Mailing Address 9881 S 161st Street		<b>Transaction ID:</b> SA11AI.15878
	City Omaha	State NE	Zip Code 68136
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
	Name of Employer World Insurance Company	Occupation Vice President and Director	Bi-weekly Payroll Deduction \$20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	175.00
<b>TOTAL</b> 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 12 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Enterprise Mutual Holding Company PAC

**A.** Full Name (Last, First, Middle Initial)  
Kevin P Prendergast  
Mailing Address 455 NW 60th Avenue

City State Zip Code  
Des Moines IA 50313

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

Name of Employer American Enterprise Occupation VP & Chief Marketing Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt: MM / DD / YYYY  
07 / 17 / 2008  
Transaction ID: SA11AI.15761  
Amount of Each Receipt this Period: 30.00  
Bi-weekly Payroll Deduction \$15.00

**B.** Full Name (Last, First, Middle Initial)  
Kevin P Prendergast  
Mailing Address 455 NW 60th Avenue

City State Zip Code  
Des Moines IA 50313

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

Name of Employer American Enterprise Occupation VP & Chief Marketing Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt: MM / DD / YYYY  
08 / 28 / 2008  
Transaction ID: SA11AI.15822  
Amount of Each Receipt this Period: 45.00  
Bi-weekly Payroll Deduction \$15.00

**C.** Full Name (Last, First, Middle Initial)  
Kevin P Prendergast  
Mailing Address 455 NW 60th Avenue

City State Zip Code  
Des Moines IA 50313

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

Name of Employer American Enterprise Occupation VP & Chief Marketing Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY  
09 / 25 / 2008  
Transaction ID: SA11AI.15879  
Amount of Each Receipt this Period: 30.00  
Bi-weekly Payroll Deduction \$15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 105.00

**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 13 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Enterprise Mutual Holding Company PAC

**A.** Full Name (Last, First, Middle Initial)  
Edgar Swaringim

Mailing Address 288 N Tanglewood

City State Zip Code  
Ozark MO 65721

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

Name of Employer American Republic Insurance Company  
Occupation Agency Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 17 / 2008

**Transaction ID:** SA11AI.15771

Amount of Each Receipt this Period 40.00

Semi-Monthly Payroll Deduction \$20

**B.** Full Name (Last, First, Middle Initial)  
Edgar Swaringim

Mailing Address 288 N Tanglewood

City State Zip Code  
Ozark MO 65721

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

Name of Employer American Republic Insurance Company  
Occupation Agency Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 28 / 2008

**Transaction ID:** SA11AI.15829

Amount of Each Receipt this Period 60.00

Semi-Monthly Payroll Deduction \$20

**C.** Full Name (Last, First, Middle Initial)  
Edgar Swaringim

Mailing Address 288 N Tanglewood

City State Zip Code  
Ozark MO 65721

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

Name of Employer American Republic Insurance Company  
Occupation Agency Vice President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2008

**Transaction ID:** SA11AI.15886

Amount of Each Receipt this Period 40.00

Semi-Monthly Payroll Deduction \$20

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

**TOTAL** This Period (last page this line number only) ..... ► 1015.00

**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)

PAGE 14 / 14

<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 Enterprise Mutual Holding Company PAC

<b>A.</b> Full Name (Last, First, Middle Initial) BOSWELL FOR CONGRESS <hr/> Mailing Address PO Box 6220 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Contribution Candidate Name BOSWELL FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.15895 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Federation of Iowa Insurers PAC <hr/> Mailing Address 317 6th Avenue, Suite 740 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.15715 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2750.00