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

Minnesota Life Insurance Company PAC

ADDRESS (number and street) ▼ 400 Robert Street North

Check if different than previously reported. (ACC)

St Paul | MN | 55101

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ STATE ▲ ZIPCODE ▲

C00120006

3. IS THIS REPORT — X 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)
- X 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 11 23 2004 through 12 31 2004

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 Allen Peterson

Signature of Treasurer Electronically Filed by Allen Peterson Date 01 03 2005

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							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
Minnesota Life Insurance Company PAC

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2004		19265.44
(b) Cash on Hand at Begining of Reporting Period	10300.44	
(c) Total Receipts (from Line 19)	2490.00	16025.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12790.44	35290.44
7. Total Disbursements (from Line 31)	0.00	22500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12790.44	12790.44
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	

X 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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Minnesota Life Insurance Company PAC

Report Covering the Period: From: 11 23 2004 To: 12 31 2004

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)	2470.00	
(ii) Unitemized	20.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	2490.00	16025.00
(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) ..... ▶	2490.00	16025.00
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))	2490.00	16025.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2490.00	16025.00

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	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	0.00	22500.00
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))	0.00	22500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	0.00	22500.00

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)	2490.00	16025.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2490.00	16025.00
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) or each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 18
(check only one)
[X] 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)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Paul Anderson
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5222
Amount of Each Receipt this Period: 60.00
monthly payroll deduction $30.00

B.
Full Name (Last, First, Middle Initial): Barbara Baumann
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5223
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

C.
Full Name (Last, First, Middle Initial): Gary Christensen
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Senior Counsel
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5225
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

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

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 18
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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
George Connolly
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5228
Amount of Each Receipt this Period: 100.00
monthly payroll deduction $50.00

B.
Full Name (Last, First, Middle Initial)
Jeneen Cordon
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5227
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial)
Guy deLambert
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5228
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 260.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 18
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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Jean Delaney Nelson
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5229
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

B.
Full Name (Last, First, Middle Initial)
Sue Ebertz
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5230
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial)
George Fremder
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5231
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **240.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Craig Frisvold
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5232
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

B.
Full Name (Last, First, Middle Initial)
Vincent Giordano
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Pension Sales Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5233
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial)
Thomas Goodwin
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Regional Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5234
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 160.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 18
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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Mark Green
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Manager
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5235
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

B.
Full Name (Last, First, Middle Initial)
Thomas Gustafson
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5236
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

C.
Full Name (Last, First, Middle Initial)
Greg Hammerly
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5237
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 18
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Paul Hirschbeck
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Actuary
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5238
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

B.
Full Name (Last, First, Middle Initial)
Jaymes Hubbel
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00

Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5239
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial)
David Igo
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Regional Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00

Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5240
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **160.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Gary Kleist
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5241
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

B.
Full Name (Last, First, Middle Initial): Richard Lee
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5242
Amount of Each Receipt this Period: 100.00
monthly payroll deduction $50.00

C.
Full Name (Last, First, Middle Initial): Dave LePlavy
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President & Controller
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5243
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **220.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 18
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Richard Menke
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5244
Amount of Each Receipt this Period: 20.00
monthly payroll deduction $10.00

B.
Full Name (Last, First, Middle Initial): Catherine McCarty
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Manager
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5245
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial): David McClafferty, Jr.
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: District Manager
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5246
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 180.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 18
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Fran Meters
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Regional Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5247
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

B.
Full Name (Last, First, Middle Initial)
Lynne Mills
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5248
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial)
Kristi Nelson
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Associate Actuary
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5249
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 200.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 18
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Robert Olafson
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5250
Amount of Each Receipt this Period: 100.00
monthly payroll deduction $50.00

B.
Full Name (Last, First, Middle Initial): Dianne Orbison
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Senior Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5251
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial): Charles Peterson
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Regional Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5252
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 260.00

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 18
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[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Kathy Pinkett
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5253
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

B.
Full Name (Last, First, Middle Initial)
Jeff Rasmussen
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Sales Executive
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5254
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

C.
Full Name (Last, First, Middle Initial)
Paul Rudeen
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Actuary
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5255
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial)
Bruce Shey
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5256
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

B.
Full Name (Last, First, Middle Initial)
Mary Anne Smith
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Director
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5257
Amount of Each Receipt this Period: 50.00
monthly payroll deduction $25.00

C.
Full Name (Last, First, Middle Initial)
Anthony Thomas
Mailing Address 400 Robert Street North
City: St Paul State: MN Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5258
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **210.00**

TOTAL This Period (last page this line number only) ..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Minnesota Life Insurance Company PAC

A.
Full Name (Last, First, Middle Initial): Mark Thomas
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Sales Executive
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5259
Amount of Each Receipt this Period: 40.00
monthly payroll deduction $20.00

B.
Full Name (Last, First, Middle Initial): David Underdale
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Regional Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5260
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

C.
Full Name (Last, First, Middle Initial): Nancy Winter
Mailing Address: 400 Robert Street North
City: St Paul | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: Minnesota Life Insurance Company
Occupation: Second Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 12 31 2004
Transaction ID: SA11A1.5261
Amount of Each Receipt this Period: 80.00
monthly payroll deduction $40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **200.00**

TOTAL This Period (last page this line number only) ..... ▶ **2470.00**