

**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

Ameriprise Financial Inc. PAC

ADDRESS (number and street)

101 Constitution Avenue NW Ste 816

Check if different
than previously
reported. (ACC)

Washington

DC

20001

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00414474

3. IS THIS
REPORTNEW
(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

08

23

2005

through

12

31

2005

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

Brian Pietsch

Signature of Treasurer

Electronically Filed by Brian Pietsch

Date

04

14

2006

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)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Ameriprise Financial Inc. PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	2	3	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		.00
(b) Cash on Hand at Beginning of Reporting Period	.00	
(c) Total Receipts (from Line 19)	3822.08	3822.08
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3822.08	3822.08
7. Total Disbursements (from Line 31)	84.81	84.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3737.27	3737.27
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	.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

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Page 3

Write or Type Committee Name

Ameriprise Financial Inc. PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	8	2	3	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

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	455.00	455.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	3367.08	3367.08
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	3822.08	3822.08
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs)	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	3822.08	3822.08
12. Transfers From Affiliated/Other Party Committees	.00	.00
13. All Loans Received	.00	.00
14. Loan Repayments Received	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	.00	.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	.00	.00
(b) Levin Funds (from Schedule H5)	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3822.08	3822.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3822.08	3822.08

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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)	.00	.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	84.81	84.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	84.81	84.81
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	.00	.00
24. Independent Expenditure (use Schedule E)	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	.00	.00
(b) Political Party Committees	.00	.00
(c) Other Political Committees (such as PACs)	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	.00	.00
29. Other Disbursements.....	.00	.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	.00	.00
(ii) "Levin" Share	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	84.81	84.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	84.81	84.81

DETAILED SUMMARY PAGE

of Disbursements

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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)	3822.08	3822.08
34. Total Contribution Refunds (from Line 28(d))	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3822.08	3822.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	84.81	84.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	84.81	84.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 6 / 9

☒ 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)

Ameriprise Financial Inc. PAC

A. Full Name (Last, First, Middle Initial)

DOUGLAS A LENNICK

Mailing Address 172 AXP Financial Center

City State Zip Code
 Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameriprise Financial Inc.

Occupation
EVP-Private Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 9 / 2 0 0 5

Transaction ID: A2005-2334486

Amount of Each Receipt this Period

40.00

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

DOUGLAS A LENNICK

Mailing Address 172 AXP Financial Center

City State Zip Code
 Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ameriprise Financial Inc.

Occupation
EVP-Private Client Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 2 3 / 2 0 0 5

Transaction ID: A2005-2557942

Amount of Each Receipt this Period

40.00

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

MARK E SCHWARZMANN

Mailing Address 172 AXP Financial Center

City State Zip Code
 Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDS Life Insurance Co.

Occupation
SVP-Insurance and Annuities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 8 / 2 0 0 5

Transaction ID: A2005-2104529

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

155.00

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 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Ameriprise Financial Inc. PAC

A. Full Name (Last, First, Middle Initial)
MARK E SCHWARZMANN

Mailing Address 172 AXP Financial Center

City State Zip Code
Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDS Life Insurance Co.

Occupation
SVP-Insurance and Annuities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 1 / 2 0 0 5

Transaction ID: A2005-2189169

Amount of Each Receipt this Period

75.00

B. Full Name (Last, First, Middle Initial)
MARK E SCHWARZMANN

Mailing Address 172 AXP Financial Center

City State Zip Code
Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDS Life Insurance Co.

Occupation
SVP-Insurance and Annuities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 5 / 2 0 0 5

Transaction ID: A2005-2396569

Amount of Each Receipt this Period

75.00

C. Full Name (Last, First, Middle Initial)
MARK E SCHWARZMANN

Mailing Address 172 AXP Financial Center

City State Zip Code
Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDS Life Insurance Co.

Occupation
SVP-Insurance and Annuities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 9 / 2 0 0 5

Transaction ID: A2005-2334517

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

225.00

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 / 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Ameriprise Financial Inc. PAC

A. Full Name (Last, First, Middle Initial)
MARK E SCHWARZMANN

Mailing Address 172 AXP Financial Center

City State Zip Code
Minneapolis MN 55474

FEC ID number of contributing
federal political committee.

C

Name of Employer
IDS Life Insurance Co.

Occupation
SVP-Insurance and Annuities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 3 / 2 0 0 5

Transaction ID: A2005-2557973

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

455.00

Form/Schedule: **SA11A1**

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule: **SB23**

Transaction ID:

This amendment is filed to show a \$20 reduction in the unitemized receipt total for line 11(a)(ii) of the Detailed Summary Page, therefore, reducing total receipts and cash-on-hand at the end of the reporting period.