

# 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 Ave. NW Ste 816W  
 Check if different than previously reported. (ACC)  
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00414474  
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 04 01 2006 through 06 30 2006

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 Denise Ferguson  
Signature of Treasurer Electronically Filed by Denise Ferguson Date 07 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Ameriprise Financial Inc. PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		3737.27
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	7440.69									
(c) Total Receipts (from Line 19) .....	24829.69	28555.37								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	32270.38	32292.64								
7. Total Disbursements (from Line 31) .....	10500.58	10522.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21769.80	21769.80								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name  
Ameriprise Financial Inc. PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	22883.41	23338.41
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1946.28	5216.96
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	24829.69	28555.37
(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) .....	24829.69	28555.37
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)) .....	24829.69	28555.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	24829.69	28555.37

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	0.58	22.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.58	22.84
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	10500.00
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))..	10500.58	10522.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	10500.58	10522.84

**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) .....	24829.69	28555.37
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24829.69	28555.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.58	22.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.58	22.84

**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 / 22
	<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)  
Ameriprise Financial Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
James M Cracchiolo

Mailing Address 50642 Ameriprise Fin Ctr

City State Zip Code  
Minneapolis MN 55474

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

Name of Employer: Ameriprise Financial Inc. Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2006

**Transaction ID:** A2006-973432

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
BRIAN M HEATH

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: SVP-Advisor Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
211.53

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 26 / 2006

**Transaction ID:** A2006-928179

Amount of Each Receipt this Period  
19.23

**C.** Full Name (Last, First, Middle Initial)  
BRIAN M HEATH

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: SVP-Advisor Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.76

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 09 / 2006

**Transaction ID:** A2006-941934

Amount of Each Receipt this Period  
19.23

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>5038.46</b>
<b>TOTAL</b> 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: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. BRIAN M HEATH</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2006	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-973542</b>	
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Advisor Group		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99		

Full Name (Last, First, Middle Initial) <b>B. Kelli A Hunter</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 18 / 2006	
Mailing Address 1319 Wentworth Ct.		<b>Transaction ID: A2006-789915</b>	
City State Zip Code Houston TX 77055	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation EVP Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. JOHN C JUNEK</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2006	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-862388</b>	
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	10019.23
<b>TOTAL</b> 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: (check only one)	PAGE 8 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-709880</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation Sr. Business Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928119</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation Sr. Business Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928189</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation Sr. Business Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> 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: (check only one)	PAGE 9 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-941944</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation Sr. Business Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-973552</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation Sr. Business Systems Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS A LENNICK</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-709782</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation EVP-Private Client Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	90.00
<b>TOTAL</b> 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: (check only one)	PAGE 10 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. DOUGLAS A LENNICK</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-709854</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation EVP-Private Client Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS A LENNICK</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928093</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation EVP-Private Client Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS A LENNICK</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928164</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation EVP-Private Client Group	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	120.00
<b>TOTAL</b> 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: (check only one)	PAGE 11 / 22
	<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)  
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 ▼ 480.00

Date of Receipt  
06 / 09 / 2006

Transaction ID: A2006-941919

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 ▼ 520.00

Date of Receipt  
06 / 23 / 2006

Transaction ID: A2006-973527

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
PAULA R MEYER

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: SVP and GM Mutual Fund Prod

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
05 / 26 / 2006

Transaction ID: A2006-928178

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.00

**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: (check only one)	PAGE 12 / 22
	<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)  
Ameriprise Financial Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) PAULA R MEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID:</b> A2006-941933
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP and GM Mutual Fund Prod	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>B.</b> Full Name (Last, First, Middle Initial) PAULA R MEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID:</b> A2006-973541
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP and GM Mutual Fund Prod	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>C.</b> Full Name (Last, First, Middle Initial) REBECCA K ROLOFF		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID:</b> A2006-928190
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP -GFS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	59.23
<b>TOTAL</b> 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: (check only one)	PAGE 13 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. REBECCA K ROLOFF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-941945</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation SVP -GFS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) <b>B. REBECCA K ROLOFF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-973553</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation SVP -GFS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) <b>C. Glen Salow</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 6 / 2 0 0 6	
Mailing Address 92 Constitution Way		<b>Transaction ID: A2006-928199</b>	
City State Zip Code Jersey City NM 07305		Amount of Each Receipt this Period 312.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.		Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.96
<b>TOTAL</b> 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 / 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2006-941954
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 312.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2006-973562
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 312.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation EVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 937.50	

Full Name (Last, First, Middle Initial) <b>C.</b> MARK E SCHWARZMANN		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 4 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID:</b> A2006-709811
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Insurance and Annuities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> 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: (check only one)	PAGE 15 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-709882</b>
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Insurance and Annuities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928121</b>
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Insurance and Annuities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928191</b>
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Insurance and Annuities	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> 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: (check only one)	PAGE 16 / 22
	<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)  
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: Ameriprise Financial Inc. Occupation: SVP-Insurance and Annuites

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2006

Transaction ID: A2006-941946

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: Ameriprise Financial Inc. Occupation: SVP-Insurance and Annuites

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2006

Transaction ID: A2006-973554

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
KIM SHARAN

Mailing Address 200 Vesey Street

City State Zip Code  
New York NY 10285

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

Name of Employer: Ameriprise Financial Inc. Occupation: SVP and Chief Marketing Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 491.58

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2006

Transaction ID: A2006-928129

Amount of Each Receipt this Period  
299.28

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>449.28</b>
<b>TOTAL</b> 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: (check only one)	PAGE 17 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 200 Vesey Street		<b>Transaction ID: A2006-941884</b>
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 299.28	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP and Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 790.86	

Full Name (Last, First, Middle Initial) <b>B. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 200 Vesey Street		<b>Transaction ID: A2006-973492</b>
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 299.28	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP and Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1090.14	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM F TRUSCOTT</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-789914</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Chief Investment Officer-AEFA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5598.56
<b>TOTAL</b> 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: (check only one)	PAGE 18 / 22
	<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. WILLIAM J WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-928130</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP/Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM J WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-941885</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP/Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM J WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2006-973493</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP/Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	57.69
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	22883.41

**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 19 / 22

<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of Hillary</b>		Transaction ID: B140762 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 6
Mailing Address 1717 K Street N.W. Suite 309-A		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20036	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate NY		
Candidate Name Hillary R Clinton		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Team Sununu</b>		Transaction ID: B141805 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 1331 H Street N.W. 12th Floor		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20005	011 Category/ Type	
Purpose of Disbursement G-2008 U.S. Senate NH		
Candidate Name John Sununu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Pennsylvanians for Kanjorski</b>		Transaction ID: B141806 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 0 6
Mailing Address 126 S. Franklin Street		Amount of Each Disbursement this Period 1000.00
City Wilkes-Barre State PA Zip Code 18701	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 11 PA		
Candidate Name Paul E Kanjorski		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 20 / 22

<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Friends of John Tanner</b>		Transaction ID: B141941 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 236 Massachusetts Avenue N.E. Suit		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 08 TN		
Candidate Name John S Tanner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jim Ramstad Volunteer Committee</b>		Transaction ID: B141942 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 6
Mailing Address 1809 Plymouth Road South #310		Amount of Each Disbursement this Period 1000.00
City Minnetonka State MN Zip Code 55305	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 03 MN		
Candidate Name Jim Ramstad		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Crowley for Congress</b>		Transaction ID: B143217 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address 426 C Street N.E.		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. House 07 NY		
Candidate Name Joseph Crowley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**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)

<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)  
Ameriprise Financial Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Ryan for Congress</b>		Transaction ID: B143218 Date of Disbursement 06 / 20 / 2006	
Mailing Address P.O. Box 1919		Amount of Each Disbursement this Period 1000.00	
City Janesville	State WI	Zip Code 53547	
Purpose of Disbursement G-2006 U.S. House 01 WI		011 Category/ Type	
Candidate Name Paul D Ryan			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WI District: 01			

Full Name (Last, First, Middle Initial) <b>B. Trent Lott for Mississippi</b>		Transaction ID: B143219 Date of Disbursement 06 / 20 / 2006	
Mailing Address P.O. Box 22824		Amount of Each Disbursement this Period 1000.00	
City Jackson	State MS	Zip Code 39225	
Purpose of Disbursement G-2006 U.S. Senate MS		011 Category/ Type	
Candidate Name Trent Lott			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MS District:			

Full Name (Last, First, Middle Initial) <b>C. Dreier for Congress</b>		Transaction ID: B143220 Date of Disbursement 06 / 20 / 2006	
Mailing Address P.O. Box 505		Amount of Each Disbursement this Period 1500.00	
City Upland	State CA	Zip Code 91785	
Purpose of Disbursement G-2006 U.S. House 26 CA		011 Category/ Type	
Candidate Name David Dreier			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 26			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	10500.00

Image# 26940238161

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.

\*\*\*\*\*