

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
Ameriprise Financial Inc. PAC (Ameriprise PAC)

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on // in the State of

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on // in the State of

5. Covering Period    through

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 Denise Ferguson [Electronically Filed] Date

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)

Write or Type Committee Name

**Ameriprise Financial Inc. PAC (Ameriprise PAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="63745.20"/>	<input type="text" value="63745.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="63745.20"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="20875.96"/>	<input type="text" value="20875.96"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="84621.16"/>	<input type="text" value="84621.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16592.35"/>	<input type="text" value="16592.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="68028.81"/>	<input type="text" value="68028.81"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**Ameriprise Financial Inc. PAC (Ameriprise PAC)**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14843.52	14843.52
(ii) Unitemized .....	6032.44	6032.44
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	20875.96	20875.96
(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) .....	20875.96	20875.96
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 Transfers (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))..... ▶	20875.96	20875.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20875.96	20875.96

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	92.35	92.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	92.35	92.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	16500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	16592.35	16592.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16592.35	16592.35

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	20875.96	20875.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20875.96	20875.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	92.35	92.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	92.35	92.35

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
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:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 34  
(check only one)  
 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 (Ameriprise PAC)**

**A. Walter S Berman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Ameriprise Financial Center  
 City State Zip Code  
 Minneapolis MN 55474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. CFO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 384.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 24 / 2014  
**Transaction ID : A2014-28462**  
 Amount of Each Receipt this Period  
 192.30

**B. Walter S Berman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Ameriprise Financial Center  
 City State Zip Code  
 Minneapolis MN 55474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. CFO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 576.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2014  
**Transaction ID : A2014-67625**  
 Amount of Each Receipt this Period  
 192.30

**C. Walter S Berman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Ameriprise Financial Center  
 City State Zip Code  
 Minneapolis MN 55474  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. CFO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 769.20

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : A2014-318152**  
 Amount of Each Receipt this Period  
 192.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 576.90  
**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 8 OF 34
<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 (Ameriprise PAC)**

**A. Walter S Berman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 110 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation CFO
---	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429047**

Amount of Each Receipt this Period  

192.30
--------

**B. Walter S Berman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 110 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation CFO
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559828**

Amount of Each Receipt this Period  

192.30
--------

**C. MICHAEL G BURTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 50601 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation Group Counsel
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559806**

Amount of Each Receipt this Period  

40.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>424.60</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 9 OF 34
	<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 (Ameriprise PAC)**

**A. Richard Bush**  
Full Name (Last, First, Middle Initial)

Mailing Address 1163 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP-Corporate Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67627**

Amount of Each Receipt this Period  

76.92
-------

**B. Richard Bush**  
Full Name (Last, First, Middle Initial)

Mailing Address 1163 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP-Corporate Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318154**

Amount of Each Receipt this Period  

76.92
-------

**C. Richard Bush**  
Full Name (Last, First, Middle Initial)

Mailing Address 1163 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP-Corporate Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429049**

Amount of Each Receipt this Period  

76.92
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.76</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 10 OF 34
<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

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 (Ameriprise PAC)**

**A. Richard Bush**  
Full Name (Last, First, Middle Initial)

Mailing Address 1163 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation SVP-Corporate Tax
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559830**

Amount of Each Receipt this Period  

76.92
-------

**B. RICHARD B DVORAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2525 Bay Area Boulevard

City Houston	State TX	Zip Code 77058
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation Financial Advisor
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429030**

Amount of Each Receipt this Period  

50.00
-------

**C. RICHARD B DVORAK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2525 Bay Area Boulevard

City Houston	State TX	Zip Code 77058
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation Financial Advisor
---	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559811**

Amount of Each Receipt this Period  

50.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>176.92</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 OF 34
	<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 (Ameriprise PAC)**

**A. Samuel Fox**  
Full Name (Last, First, Middle Initial)

Mailing Address 545 Long Wharf Drive

City New Haven State CT Zip Code 06511

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

Name of Employer Ameriprise Financial Inc. Occupation Financial Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

**Transaction ID : A2014-559841**

Amount of Each Receipt this Period  
**38.46**

**B. Donald E Froude**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 2048

City Dennis State MA Zip Code 02638

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

Name of Employer Ameriprise Financial Inc. Occupation President-U.S. Advisor Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 24 / 2014**

**Transaction ID : A2014-28470**

Amount of Each Receipt this Period  
**192.30**

**C. Donald E Froude**  
Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 2048

City Dennis State MA Zip Code 02638

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

Name of Employer Ameriprise Financial Inc. Occupation President-U.S. Advisor Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 07 / 2014**

**Transaction ID : A2014-67633**

Amount of Each Receipt this Period  
**192.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>423.06</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 12 OF 34
<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 (Ameriprise PAC)**

**A. Donald E Froude**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 2048

City Dennis	State MA	Zip Code 02638
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation President-U.S. Advisor Group
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318160**

Amount of Each Receipt this Period  

192.30
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**B. Donald E Froude**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 2048

City Dennis	State MA	Zip Code 02638
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation President-U.S. Advisor Group
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429055**

Amount of Each Receipt this Period  

192.30
--------

**C. Donald E Froude**  
Full Name (Last, First, Middle Initial)  
Mailing Address P. O. Box 2048

City Dennis	State MA	Zip Code 02638
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FEC ID number of contributing federal political committee. **C**

Name of Employer Ameriprise Financial Inc.	Occupation President-U.S. Advisor Group
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559836**

Amount of Each Receipt this Period  

192.30
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.90</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 13 OF 34
	<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 (Ameriprise PAC)**

**A. Steve Gathje**  
Full Name (Last, First, Middle Initial)

Mailing Address 707 Second Avenue South

City Minneapolis State MN Zip Code 55474

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

Name of Employer American Enterprise Inv. Svcs Occupation SVP / Chief Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 07 / 2014  
**Transaction ID : A2014-429062**

Amount of Each Receipt this Period 50.00

**B. Steve Gathje**  
Full Name (Last, First, Middle Initial)

Mailing Address 707 Second Avenue South

City Minneapolis State MN Zip Code 55474

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

Name of Employer American Enterprise Inv. Svcs Occupation SVP / Chief Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : A2014-559843**

Amount of Each Receipt this Period 50.00

**C. Rhonda P Hauter**  
Full Name (Last, First, Middle Initial)

Mailing Address 302 S 9TH ST STE 103

City Tacoma State WA Zip Code 98402-3699

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

Name of Employer American Enterprise Inv. Svcs Occupation Financial Advisor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2014  
**Transaction ID : A2014-503409**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 350.00

**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 14 OF 34  
(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 (Ameriprise PAC)**

**A. Kelli A Hunter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 World Trade Center  
 City State Zip Code  
 New York NY 10007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. EVP Human Resources  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 384.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2014  
**Transaction ID : A2014-28460**  
 Amount of Each Receipt this Period  
 192.30

**B. Kelli A Hunter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 World Trade Center  
 City State Zip Code  
 New York NY 10007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. EVP Human Resources  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 576.90

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 07 / 2014  
**Transaction ID : A2014-67623**  
 Amount of Each Receipt this Period  
 192.30

**C. Kelli A Hunter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 World Trade Center  
 City State Zip Code  
 New York NY 10007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Ameriprise Financial Inc. EVP Human Resources  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 769.20

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 21 / 2014  
**Transaction ID : A2014-318150**  
 Amount of Each Receipt this Period  
 192.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 576.90  
**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 15 OF 34
	<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 (Ameriprise PAC)**

**A. Kelli A Hunter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center  
City New York State NY Zip Code 10007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation EVP Human Resources  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 961.50

Date of Receipt 03 / 07 / 2014  
**Transaction ID : A2014-429045**  
Amount of Each Receipt this Period 192.30

**B. Kelli A Hunter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center  
City New York State NY Zip Code 10007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation EVP Human Resources  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1153.80

Date of Receipt 03 / 21 / 2014  
**Transaction ID : A2014-559826**  
Amount of Each Receipt this Period 192.30

**C. JENINNE MCGEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9504 Ameriprise Financial Center  
City Minneapolis State MN Zip Code 55474  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation Senior Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.76

Date of Receipt 02 / 07 / 2014  
**Transaction ID : A2014-67614**  
Amount of Each Receipt this Period 76.92

**SUBTOTAL** of Receipts This Page (optional).....▶ 461.52  
**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 16 OF 34
<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 (Ameriprise PAC)**

**A. JENINNE MCGEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9504 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Senior Vice President
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318141**

Amount of Each Receipt this Period  

76.92
-------

**B. JENINNE MCGEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9504 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Senior Vice President
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429036**

Amount of Each Receipt this Period  

76.92
-------

**C. JENINNE MCGEE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9504 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Senior Vice President
---	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559817**

Amount of Each Receipt this Period  

76.92
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.76</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 17 OF 34
	<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 (Ameriprise PAC)**

**A. Deirdre Davey N McGraw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Corp Comm & Community Rel
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2014

**Transaction ID : A2014-28458**

Amount of Each Receipt this Period  

192.30
--------

**B. Deirdre Davey N McGraw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Corp Comm & Community Rel
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67621**

Amount of Each Receipt this Period  

192.30
--------

**C. Deirdre Davey N McGraw**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Corp Comm & Community Rel
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318148**

Amount of Each Receipt this Period  

192.30
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.90</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 18 OF 34
	<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 (Ameriprise PAC)**

**A. Deirdre Davey N McGraw**  
Full Name (Last, First, Middle Initial)

Mailing Address 108 Ameriprise Financial Center

City Minneapolis State MN Zip Code 55474

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

Name of Employer Ameriprise Financial Inc. Occupation EVP-Corp Comm & Community Rel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt **03 / 07 / 2014**

**Transaction ID : A2014-429043**

Amount of Each Receipt this Period **192.30**

**B. Deirdre Davey N McGraw**  
Full Name (Last, First, Middle Initial)

Mailing Address 108 Ameriprise Financial Center

City Minneapolis State MN Zip Code 55474

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

Name of Employer Ameriprise Financial Inc. Occupation EVP-Corp Comm & Community Rel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt **03 / 21 / 2014**

**Transaction ID : A2014-559824**

Amount of Each Receipt this Period **192.30**

**C. Chuck McQuaid**  
Full Name (Last, First, Middle Initial)

Mailing Address 227 W Monroe Suite 3000

City Chicago State IL Zip Code 60606

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

Name of Employer Ameriprise Financial Inc. Occupation CWAM President & CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **03 / 19 / 2014**

**Transaction ID : A2014-503325**

Amount of Each Receipt this Period **1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1384.60</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 19 OF 34
<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 (Ameriprise PAC)**

**A. Thomas R Moore**  
Full Name (Last, First, Middle Initial)

Mailing Address 1098 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Corporate Secretary
---	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559831**

Amount of Each Receipt this Period  

38.46
-------

**B. PATRICK H O'CONNELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 185 Asylum St Cityplace II

City Hartford	State CT	Zip Code 06103
------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Group VP
---	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559791**

Amount of Each Receipt this Period  

38.46
-------

**C. Rosendo Palacios**  
Full Name (Last, First, Middle Initial)

Mailing Address 707 2nd Ave South

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP/LFO Finance
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67634**

Amount of Each Receipt this Period  

76.92
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>153.84</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 20 OF 34
<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 (Ameriprise PAC)**

**A. Rosendo Palacios**  
Full Name (Last, First, Middle Initial)  
Mailing Address 707 2nd Ave South

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP/LFO Finance
---	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318161**

Amount of Each Receipt this Period  

76.92
-------

**B. Rosendo Palacios**  
Full Name (Last, First, Middle Initial)  
Mailing Address 707 2nd Ave South

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP/LFO Finance
---	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429056**

Amount of Each Receipt this Period  

76.92
-------

**C. Rosendo Palacios**  
Full Name (Last, First, Middle Initial)  
Mailing Address 707 2nd Ave South

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP/LFO Finance
---	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559837**

Amount of Each Receipt this Period  

76.92
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.76</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 21 OF 34  
(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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)  
**A. Douglas J Parish**

Mailing Address 101 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	General Auditor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429048**

Amount of Each Receipt this Period  

50.00
-------

Full Name (Last, First, Middle Initial)  
**B. Douglas J Parish**

Mailing Address 101 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	General Auditor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559829**

Amount of Each Receipt this Period  

50.00
-------

Full Name (Last, First, Middle Initial)  
**C. BRIAN J SEASTONE**

Mailing Address 4337 Siena Drive

City	State	Zip Code
Frisco	TX	75034

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

Name of Employer	Occupation
Ameriprise Financial Inc.	RVP-Insurance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429011**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>150.00</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 22 OF 34
<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 (Ameriprise PAC)**

**A. BRIAN J SEASTONE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4337 Siena Drive  
City Frisco State TX Zip Code 75034  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation RVP-Insurance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 21 / 2014  
**Transaction ID : A2014-559792**  
Amount of Each Receipt this Period 50.00

**B. KIM SHARAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center Ste 3900  
City New York State NY Zip Code 10007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation EVP-Chief Marketing Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 384.60

Date of Receipt 01 / 24 / 2014  
**Transaction ID : A2014-28420**  
Amount of Each Receipt this Period 192.30

**C. KIM SHARAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center Ste 3900  
City New York State NY Zip Code 10007  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ameriprise Financial Inc. Occupation EVP-Chief Marketing Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 576.90

Date of Receipt 02 / 07 / 2014  
**Transaction ID : A2014-67583**  
Amount of Each Receipt this Period 192.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 434.60  
**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 23 OF 34
	<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 (Ameriprise PAC)**

**A. KIM SHARAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center Ste 3900

City New York	State NY	Zip Code 10007
------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Chief Marketing Officer
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318110**

Amount of Each Receipt this Period  

192.30
--------

**B. KIM SHARAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center Ste 3900

City New York	State NY	Zip Code 10007
------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Chief Marketing Officer
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429005**

Amount of Each Receipt this Period  

192.30
--------

**C. KIM SHARAN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 World Trade Center Ste 3900

City New York	State NY	Zip Code 10007
------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation EVP-Chief Marketing Officer
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559786**

Amount of Each Receipt this Period  

192.30
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.90</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 24 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 (Ameriprise PAC)**

**A. Joseph E Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 687 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres Fin Plng Prod & Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2014

**Transaction ID : A2014-28461**

Amount of Each Receipt this Period  

192.30
--------

**B. Joseph E Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 687 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres Fin Plng Prod & Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67624**

Amount of Each Receipt this Period  

192.30
--------

**C. Joseph E Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 687 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres Fin Plng Prod & Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318151**

Amount of Each Receipt this Period  

192.30
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.90</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 25 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 (Ameriprise PAC)**

**A. Joseph E Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 687 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres Fin Plng Prod & Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **961.50**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429046**

Amount of Each Receipt this Period  

192.30
--------

**B. Joseph E Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 687 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres Fin Plng Prod & Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1153.80**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559827**

Amount of Each Receipt this Period  

192.30
--------

**C. KAREN WILSON THISSEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 5223 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP & Asst General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559821**

Amount of Each Receipt this Period  

38.46
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>423.06</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 26 OF 34
	<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 (Ameriprise PAC)**

**A. WILLIAM F TRUSCOTT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 707 2nd Ave South

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation CEO Global Asset Management
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2014

**Transaction ID : A2014-503324**

Amount of Each Receipt this Period  
5000.00

**B. David H Weiser**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1099 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP & Assistant General Cnsl
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67632**

Amount of Each Receipt this Period  
76.92

**C. David H Weiser**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1099 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation SVP & Assistant General Cnsl
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318159**

Amount of Each Receipt this Period  
76.92

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5153.84
<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 27 OF 34
	<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 (Ameriprise PAC)**

**A. David H Weiser**  
Full Name (Last, First, Middle Initial)

Mailing Address 1099 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP & Assistant General Cnsl

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429054**

Amount of Each Receipt this Period  

76.92
-------

**B. David H Weiser**  
Full Name (Last, First, Middle Initial)

Mailing Address 1099 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	SVP & Assistant General Cnsl

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **461.52**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559835**

Amount of Each Receipt this Period  

76.92
-------

**C. WILLIAM J WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 50561 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	EVP - Franchise Group

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.76**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559787**

Amount of Each Receipt this Period  

38.46
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>192.30</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 28 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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 (Ameriprise PAC)**

**A. JOHN R WOERNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres-Ins & Chief Strat Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.60**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2014

**Transaction ID : A2014-28456**

Amount of Each Receipt this Period  

192.30
--------

**B. JOHN R WOERNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres-Ins & Chief Strat Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **576.90**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	07	/	2014

**Transaction ID : A2014-67619**

Amount of Each Receipt this Period  

192.30
--------

**C. JOHN R WOERNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 Ameriprise Financial Center

City	State	Zip Code
Minneapolis	MN	55474

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

Name of Employer	Occupation
Ameriprise Financial Inc.	Pres-Ins & Chief Strat Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **769.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

**Transaction ID : A2014-318146**

Amount of Each Receipt this Period  

192.30
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>576.90</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 29 OF 34
	<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 (Ameriprise PAC)**

**A. JOHN R WOERNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Pres-Ins & Chief Strat Officer
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
961.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	07	/	2014

**Transaction ID : A2014-429041**

Amount of Each Receipt this Period  

192.30
--------

**B. JOHN R WOERNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 138 Ameriprise Financial Center

City Minneapolis	State MN	Zip Code 55474
---------------------	-------------	-------------------

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

Name of Employer Ameriprise Financial Inc.	Occupation Pres-Ins & Chief Strat Officer
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1153.80

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2014

**Transaction ID : A2014-559822**

Amount of Each Receipt this Period  

192.30
--------

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period  

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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	384.60
<b>TOTAL</b> This Period (last page this line number only).....▶	14843.52

**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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)

**A. Terri Sewell for Congress**

Mailing Address 499 South Capitol St. S.W. Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Terri Sewell**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AL District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	4

**Transaction ID : B486682**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Perlmutter for Congress**

Mailing Address 499 S. Capitol St SW Ste 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ed Perlmutter**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	4

**Transaction ID : B492709**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Roskam for Congress Committee**

Mailing Address P.O. Box 713

City Wheaton State IL Zip Code 60189

Purpose of Disbursement  
Contribution

011

Candidate Name

**Peter J Roskam**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	1	4

**Transaction ID : B488373**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

**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

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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)

**A. Boustany for Congress**

Mailing Address 20 F Street N.W. Ste 500

City Washington State DC Zip Code 20001

Purpose of Disbursement Contribution

011

Candidate Name

**Charles W Boustany Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: LA District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	26	/	2014

**Transaction ID : B492711**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Hoyer for Congress**

Mailing Address 499 S. Capitol St. Ste 406

City Washington State DC Zip Code 20003

Purpose of Disbursement Contribution

011

Candidate Name

**Steny H Hoyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2014

**Transaction ID : B492899**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Friends of Erik Paulsen**

Mailing Address P.O. Box 44369

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement Contribution

011

Candidate Name

**Erik Paulsen**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MN District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	05	/	2014

**Transaction ID : B486681**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

4500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)

**A. Nolan for Congress Volunteer Committee**

Mailing Address 6 E Street S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Richard Nolan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2014

**Transaction ID : B486968**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. McHenry for Congress**

Mailing Address P.O. Box 1406

City Hickory State NC Zip Code 28603

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patrick McHenry**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District: 10

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2014

**Transaction ID : B488372**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Chris Gibson for Congress**

Mailing Address P.O. Box 255

City Kinderhook State NY Zip Code 12106

Purpose of Disbursement  
Contribution

011

Candidate Name

**Christopher Gibson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2014

**Transaction ID : B487989**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

**TOTAL** 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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)

**A. Wyden for Senate**

Mailing Address P.O. Box 3498

City Portland State OR Zip Code 97208

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : **B489185**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Friends of John Thune**

Mailing Address P.O. Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Contribution

011

Candidate Name  
**John Thune**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2014

Transaction ID : **B486967**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Neugebauer Congressional Committee**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Contribution

011

Candidate Name  
**Randy R Neugebauer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2014

Transaction ID : **B487988**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

**TOTAL** 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 (Ameriprise PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends of Jeb Hensarling**

Mailing Address P.O. Box 820504

City State Zip Code  
Dallas TX 75382

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jeb Hensarling**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 05 / 2014

Transaction ID : **B488374**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Mark Warner**

Mailing Address 10 G Street N.E. Suite 470

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Warner**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : **B489184**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Ryan for Congress**

Mailing Address P.O. Box 120697

City State Zip Code  
St. Paul MN 55112

Purpose of Disbursement  
Contribution

011

Candidate Name

**Paul D Ryan**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
03 / 14 / 2014

Transaction ID : **B489182**

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

3000.00

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

16500.00