

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 101 Constitution Avenue NW Ste 816  
 Check if different than previously reported. (ACC)  
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** 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 01 01 2007 through 06 30 2007

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 25 2007

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	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">20348.64</td></tr></table>	20348.64
Y	Y	Y	Y									
2	0	0	7									
20348.64												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">20348.64</td></tr></table>	20348.64	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
20348.64												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">41113.71</td></tr></table>	41113.71	<table border="1" style="width: 100%;"><tr><td align="right">41113.71</td></tr></table>	41113.71								
41113.71												
41113.71												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">61462.35</td></tr></table>	61462.35	<table border="1" style="width: 100%;"><tr><td align="right">61462.35</td></tr></table>	61462.35								
61462.35												
61462.35												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">23540.00</td></tr></table>	23540.00	<table border="1" style="width: 100%;"><tr><td align="right">23540.00</td></tr></table>	23540.00								
23540.00												
23540.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">37922.35</td></tr></table>	37922.35	<table border="1" style="width: 100%;"><tr><td align="right">37922.35</td></tr></table>	37922.35								
37922.35												
37922.35												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
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

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	35640.98	35640.98
(i) Itemized (use Schedule A) .....	5472.73	5472.73
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	41113.71	41113.71
(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) .....	41113.71	41113.71
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	41113.71	41113.71
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	41113.71	41113.71

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	20.00	20.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	20.00	20.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	23500.00	23500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	20.00	20.00
(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)) .....	20.00	20.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23540.00	23540.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	23540.00	23540.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	41113.71	41113.71
34. Total Contribution Refunds (from Line 28(d)) .....	20.00	20.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	41093.71	41093.71
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	20.00	20.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20.00	20.00

**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 / 48
	<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.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-486639
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.79	

Full Name (Last, First, Middle Initial) <b>B.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-627054
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.72	

Full Name (Last, First, Middle Initial) <b>C.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2007
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-654123
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.65	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.79
<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 / 48
	<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.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-760746
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.58	

Full Name (Last, First, Middle Initial) <b>B.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-838634
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.51	

Full Name (Last, First, Middle Initial) <b>C.</b> Patrick Banningan		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-934742
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.79
<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 / 48
	<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)  
Patrick Banningan

Mailing Address 101 Constitution Avenue NW

City State Zip Code  
Washington DC 20001

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 ▼ 692.37

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: A2007-1043215

Amount of Each Receipt this Period  
76.93

**B.** Full Name (Last, First, Middle Initial)  
James A Barnash

Mailing Address 8700 W. Brynmawr Ave. #1000N

City State Zip Code  
Chicago IL 60631

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

Name of Employer Ameriprise Financial Inc. Occupation Nat. Dir of Financial Planning

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2007

Transaction ID: A2007-439449

Amount of Each Receipt this Period  
365.00

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

Mailing Address 124 Bay Lane

City State Zip Code  
Water Mill NY 11976

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 ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 17 / 2007

Transaction ID: A2007-22649

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5441.93
<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 / 48
	<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.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-627055
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 230.79	

Full Name (Last, First, Middle Initial) <b>B.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-654124
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 307.72	

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-760747
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 384.65	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.79
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 / 48		
	<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

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

Full Name (Last, First, Middle Initial) <b>A.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-838635	
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 461.58		

Full Name (Last, First, Middle Initial) <b>B.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-934743	
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 538.51		

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Bush		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 101 Constitution Avenue NW		<b>Transaction ID:</b> A2007-1043216	
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 76.93		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 615.44		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	230.79
<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 / 48
	<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. PAUL J DOLAN</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-223254</b>	
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation VP/CAO Product Sales		
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>B. LAURA C GAGNON</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-173223</b>	
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation VP-Investor Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C. BRIAN M HEATH</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838612</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 ▼ 211.53		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1269.23
<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 12 / 48
	<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. BRIAN M HEATH</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2007
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934720</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 ▼ 230.76	

Full Name (Last, First, Middle Initial) <b>B. BRIAN M HEATH</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-1043194</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>C. Kelli A Hunter</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 09 / 2007
Mailing Address 1319 Wentworth Ct.		<b>Transaction ID: A2007-223255</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	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5038.46
<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 / 48
	<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. JOHN C JUNEK</b>		Date of Receipt MM / DD / YYYY 06 / 08 / 2007
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-832479</b>
City Minneapolis	State MN	Zip Code 55474
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 5000.00	
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	

Full Name (Last, First, Middle Initial) <b>B. DAVID J KASSING</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2007
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-654111</b>
City Minneapolis	State MN	Zip Code 55474
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00	
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>C. DAVID J KASSING</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2007
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-760734</b>
City Minneapolis	State MN	Zip Code 55474
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00	
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	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5050.00
<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 14 / 48
	<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 5 / 2 5 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838622</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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	

Full Name (Last, First, Middle Initial) <b>B. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934730</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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>C. DAVID J KASSING</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-1043204</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
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	

<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 15 / 48
	<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 ▼ 240.00

Date of Receipt  
03 / 16 / 2007

Transaction ID: A2007-457094

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
DOUGLAS A LENNICK

Mailing Address 172 AXP Financial Center

City State Zip Code  
Minneapolis MN 55474

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

Name of Employer: Ameriprise Financial Inc. Occupation: EVP-Private Client Group

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
03 / 30 / 2007

Transaction ID: A2007-486604

Amount of Each Receipt this Period  
40.00

**C.** 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 ▼ 320.00

Date of Receipt  
04 / 13 / 2007

Transaction ID: A2007-627019

Amount of Each Receipt this Period  
40.00

<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 16 / 48
	<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 ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 7

Transaction ID: A2007-654088

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 ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: A2007-760711

Amount of Each Receipt this Period  
40.00

**C.** 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 ▼ 440.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: A2007-838599

Amount of Each Receipt this Period  
40.00

<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 17 / 48
	<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 6 / 0 8 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934707</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 ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS A LENNICK</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-1043181</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 ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. JENINNE MCGEE</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-173227</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation Dir-Project Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	580.00
<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 18 / 48
	<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. PENNY J MEIER</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-173224</b>	
City State Zip Code Minneapolis MN 55474		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.		Occupation VP-Bus Trans/Six Sigma	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Douglas J Parish</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7	
Mailing Address 2191 Principal Ave		<b>Transaction ID: A2007-208160</b>	
City State Zip Code St. Paul MN 55101		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.		Occupation General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. ALEC N PEDERSEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7	
Mailing Address 11835 W Olympic Blvd Ste 900 E		<b>Transaction ID: A2007-223252</b>	
City State Zip Code Los Angeles CA 90064		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.		Occupation P1Advisor Exempt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<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 19 / 48
	<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. MARK A RIORDAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-654069</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation VP/LFO-Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.88	

Full Name (Last, First, Middle Initial) <b>B. MARK A RIORDAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-760692</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation VP/LFO-Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 242.35	

Full Name (Last, First, Middle Initial) <b>C. MARK A RIORDAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838581</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation VP/LFO-Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.82	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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 20 / 48
	<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

**A.** Full Name (Last, First, Middle Initial)  
MARK A RIORDAN

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: VP/LFO-Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 319.29

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 08 / 2007

**Transaction ID:** A2007-934689

Amount of Each Receipt this Period  
38.47

**B.** Full Name (Last, First, Middle Initial)  
MARK A RIORDAN

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: VP/LFO-Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 357.76

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

**Transaction ID:** A2007-1043164

Amount of Each Receipt this Period  
38.47

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

Mailing Address 92 Constitution Way

City State Zip Code  
Jersey City NM 07305

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

Name of Employer: Ameriprise Financial Inc. Occupation: EVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 384.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 19 / 2007

**Transaction ID:** A2007-22909

Amount of Each Receipt this Period  
192.31

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>269.25</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 21 / 48
	<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) Glen Salow		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-184264	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 576.93		

<b>B.</b> Full Name (Last, First, Middle Initial) Glen Salow		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-184327	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 769.24		

<b>C.</b> Full Name (Last, First, Middle Initial) Glen Salow		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-457064	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 961.55		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 22 / 48
	<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 03 / 16 / 2007	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-457127	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 1153.86		

Full Name (Last, First, Middle Initial) <b>B.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-486637	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 1346.17		

Full Name (Last, First, Middle Initial) <b>C.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-627052	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 1538.48		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 23 / 48
	<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 4 / 3 0 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-654121	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 1730.79		

Full Name (Last, First, Middle Initial) <b>B.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-760744	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 1923.10		

Full Name (Last, First, Middle Initial) <b>C.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-838632	
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31		
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 ▼ 2115.41		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 24 / 48
	<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 0 6 / 0 8 / 2 0 0 7
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-934740
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31	
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 ▼ 2307.72	

Full Name (Last, First, Middle Initial) <b>B.</b> Glen Salow		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 92 Constitution Way		<b>Transaction ID:</b> A2007-1043213
City State Zip Code Jersey City NM 07305	Amount of Each Receipt this Period 192.31	
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 ▼ 2500.03	

Full Name (Last, First, Middle Initial) <b>C.</b> MARK E SCHWARZMANN		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID:</b> A2007-184257
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
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 ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	459.62
<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 25 / 48
	<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 Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-184320</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 ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-457055</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 ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>C. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-457118</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 ▼ 450.00	

<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 26 / 48
	<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 Y 03 / 30 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-486628</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 ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>B. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-627043</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 ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2007	
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-654112</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	

<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 27 / 48
	<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 Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-760735</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>B. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838623</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	

Full Name (Last, First, Middle Initial) <b>C. MARK E SCHWARZMANN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934731</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 ▼ 900.00	

<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 28 / 48
	<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. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-22846</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 384.62		

Full Name (Last, First, Middle Initial) <b>B. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-184202</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 576.93		

Full Name (Last, First, Middle Initial) <b>C. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-184266</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 769.24		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 29 / 48		
	<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

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

<b>A.</b> Full Name (Last, First, Middle Initial) KIM SHARAN Mailing Address 200 Vesey Street City New York State NY Zip Code 10285 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2007 <b>Transaction ID: A2007-457003</b> Amount of Each Receipt this Period 192.31
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 ▼ 961.55	

<b>B.</b> Full Name (Last, First, Middle Initial) KIM SHARAN Mailing Address 200 Vesey Street City New York State NY Zip Code 10285 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2007 <b>Transaction ID: A2007-457067</b> Amount of Each Receipt this Period 192.31
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 ▼ 1153.86	

<b>C.</b> Full Name (Last, First, Middle Initial) KIM SHARAN Mailing Address 200 Vesey Street City New York State NY Zip Code 10285 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007 <b>Transaction ID: A2007-486578</b> Amount of Each Receipt this Period 192.31
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 ▼ 1346.17	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	576.93
<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 30 / 48
	<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. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-626993</b>	
City State Zip Code New York NY 10285		Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C			
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 ▼ 1538.48	

Full Name (Last, First, Middle Initial) <b>B. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-654062</b>	
City State Zip Code New York NY 10285		Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C			
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 ▼ 1730.79	

Full Name (Last, First, Middle Initial) <b>C. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-760685</b>	
City State Zip Code New York NY 10285		Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C			
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 ▼ 1923.10	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 31 / 48
	(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. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-838574</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 2115.41		

Full Name (Last, First, Middle Initial) <b>B. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-934682</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 2307.72		

Full Name (Last, First, Middle Initial) <b>C. KIM SHARAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 200 Vesey Street		<b>Transaction ID: A2007-1043158</b>	
City State Zip Code New York NY 10285	Amount of Each Receipt this Period 192.31		
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 ▼ 2500.03		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 32 / 48
	<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)  
Joseph M Sweeney

Mailing Address 155 Soundview Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer: Ameriprise Financial Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 384.62

Date of Receipt  
MM / DD / YYYY  
01 / 19 / 2007

Transaction ID: A2007-22910

Amount of Each Receipt this Period  
192.31

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

Mailing Address 155 Soundview Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer: Ameriprise Financial Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 576.93

Date of Receipt  
MM / DD / YYYY  
02 / 02 / 2007

Transaction ID: A2007-184265

Amount of Each Receipt this Period  
192.31

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

Mailing Address 155 Soundview Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer: Ameriprise Financial Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 769.24

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2007

Transaction ID: A2007-184328

Amount of Each Receipt this Period  
192.31

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	576.93
<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 33 / 48
	<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> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2007	
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-457065	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 961.55		

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2007	
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-457128	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1153.86		

Full Name (Last, First, Middle Initial) <b>C.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-486638	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. C			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1346.17		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 34 / 48
	<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> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 155 Soundview Lane		Transaction ID: A2007-627053	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1538.48		

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7	
Mailing Address 155 Soundview Lane		Transaction ID: A2007-654122	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.79		

Full Name (Last, First, Middle Initial) <b>C.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 155 Soundview Lane		Transaction ID: A2007-760745	
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ameriprise Financial Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.10		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 35 / 48
	<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.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-838633
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.41	

Full Name (Last, First, Middle Initial) <b>B.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-934741
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2307.72	

Full Name (Last, First, Middle Initial) <b>C.</b> Joseph M Sweeney		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 155 Soundview Lane		<b>Transaction ID:</b> A2007-1043214
City State Zip Code New Canaan CT 06840	Amount of Each Receipt this Period 192.31	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.03	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	576.93
<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 36 / 48
	<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 F TRUSCOTT</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-502643</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	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM J WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838575</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/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>C. WILLIAM J WILLIAMS</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934683</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/Field Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5038.46
<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 37 / 48
	<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 6 / 2 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-1043159</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/Field Mgmt	
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. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-184260</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic PIng-Bus Dvlpmnt	
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>C. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-184323</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic PIng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	219.23
<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 38 / 48
	<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)  
JOHN R WOERNER

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-Strategic Plng-Bus Dvlpmnt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

**Transaction ID: A2007-457060**

Amount of Each Receipt this Period  
100.00

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

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-Strategic Plng-Bus Dvlpmnt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

**Transaction ID: A2007-457123**

Amount of Each Receipt this Period  
100.00

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

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-Strategic Plng-Bus Dvlpmnt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

**Transaction ID: A2007-486633**

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</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 39 / 48
	<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. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-627048</b>
City State Zip Code Minneapolis MN 55474	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-654117</b>
City State Zip Code Minneapolis MN 55474	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-760740</b>
City State Zip Code Minneapolis MN 55474	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</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 40 / 48
	<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. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-838628</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-934736</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>C. JOHN R WOERNER</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 172 AXP Financial Center		<b>Transaction ID: A2007-1043209</b>
City State Zip Code Minneapolis MN 55474	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Ameriprise Financial Inc.	Occupation SVP-Strategic Plng-Bus Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	35640.98



**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. Pennsylvanians for Kanjorski</b>		<b>Transaction ID: B161973</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address 126 South Franklin Street		Amount of Each Disbursement this Period 1000.00
City Wilkes-Barre State PA Zip Code 18701	011 Category/ Type	
Purpose of Disbursement P-2008 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Christopher Shays for Congress Committee</b>		<b>Transaction ID: B162413</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00
City Norwalk State CT Zip Code 06851	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 04 CT		
Candidate Name Christopher Shays		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cmte. for the Preservation of Capitalism</b>		<b>Transaction ID: B162414</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address P.O. Box 65314		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20036	011 Category/ Type	
Purpose of Disbursement O-2007 Federal PAC US		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: US District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<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)

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<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. Rangel for Congress</b>		<b>Transaction ID:</b> B162958 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7
Mailing Address P.O. Box 5577		Amount of Each Disbursement this Period 1000.00
City Manhattanville Sta State NY Zip Code 10027	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 15 NY		
Candidate Name Charles B Rangel		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Kline for Congress</b>		<b>Transaction ID:</b> B163778 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 101 West Burnsville Parkway		Amount of Each Disbursement this Period 1000.00
City Burnsville State MN Zip Code 55337	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 02 MN		
Candidate Name John Kline		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Klobuchar for Minnesota</b>		<b>Transaction ID:</b> B163779 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 10 G Street N.E. Suite 470		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2012 U.S. Senate MN		
Candidate Name Amy Klobuchar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input 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)

<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 Boehner</b>		Transaction ID: B164122 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 7908-I Cincinnati Dayton Road		Amount of Each Disbursement this Period 1000.00
City West Chester State OH Zip Code 45069	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 08 OH		
Candidate Name John A Boehner		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Roberts for Senate</b>		Transaction ID: B164123 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 228 South Washington Street Ste B-		Amount of Each Disbursement this Period 2000.00
City Alexandria State VA Zip Code 22314	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. Senate KS		
Candidate Name Pat Roberts		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Carolyn McCarthy</b>		Transaction ID: B169849 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 38 Ivy Street S.E.		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 04 NY		
Candidate Name Carolyn McCarthy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input 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)

<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. Jim Ramstad Volunteer Committee</b>		Transaction ID: B170591 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 1809 South Plymouth Suite 310B		Amount of Each Disbursement this Period 1000.00
City State Zip Code Minnetonka MN 55305	011 Category/ Type	
Purpose of Disbursement P-2008 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tim Johnson for South Dakota</b>		Transaction ID: B171086 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
Mailing Address P.O. Box 1859		Amount of Each Disbursement this Period 2000.00
City State Zip Code Sioux Falls SD 57101	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. Senate SD		
Candidate Name Tim P Johnson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Bachus for Congress</b>		Transaction ID: B171243 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 217 Third Street S.E.		Amount of Each Disbursement this Period 1000.00
City State Zip Code Washington DC 20003	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 06 AL		
Candidate Name Spencer Bachus		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input 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)

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<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. Team Sununu</b>		Transaction ID: B171372 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 900 19th Street - N.W. 8th Floor		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20006	011 Category/ Type	
Purpose of Disbursement P-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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Schwartz for Congress</b>		Transaction ID: B171735 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address P.O. Box 2232		Amount of Each Disbursement this Period 1000.00
City Jenkintown State PA Zip Code 19046	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 13 PA		
Candidate Name Allyson Schwartz		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Hoyer for Congress</b>		Transaction ID: B171736 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 7905 Malcolm Road - Suite 102		Amount of Each Disbursement this Period 1000.00
City Clinton State MD Zip Code 20735	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. House 05 MD		
Candidate Name Steny H Hoyer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input 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) ..... ▶	.....

**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. Crowley for Congress</b>		Transaction ID: B173045 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 422 C Street - N.E. Lower Level		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2008 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Enzi for U.S. Senate</b>		Transaction ID: B175051 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address P.O. Box 2775		Amount of Each Disbursement this Period 1000.00
City Cody State WY Zip Code 82414	011 Category/ Type	
Purpose of Disbursement P-2008 U.S. Senate WY		
Candidate Name Michael B Enzi		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Crowley for Congress</b>		Transaction ID: B175054 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address 422 C Street N.E. - Lower Level		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement P-2008 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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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)

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<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

A. Full Name (Last, First, Middle Initial)  
Bachmann for Congress

Mailing Address 700 12th Street N.W. - Suite 700

City Washington State DC Zip Code 20005

Purpose of Disbursement  
P-2008 U.S. House 06 MN

Candidate Name  
Michele Bachmann

Office Sought:  House  
 Senate  
 President  
State: MN District: 06

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: B175098  
Date of Disbursement

06 / 22 / 2007

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

23500.00

Form/Schedule: SA11A1

Transaction ID:

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