

Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 212 Hart Building Washington, DC 20510
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SECRETARY

05 JAN -4

LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant name CAPITOL ADVANTAGE, INC Organization	
2. Address <input type="checkbox"/> Check if different than previously reported Address 1 9220 DECATUR AVENUE SOUTH City BLOOMINGTON State MN. Zip Code 55848 Country U	
3. Principal place of business (if different than line 2) City _____ State _____ Zip Code _____ Country _____ State/Zip or Country	
4a. Contact Name Prefix Full Name Mr.	b. Telephone number c. E-mail
5. Senate ID # 36981	
7. Client Name <input type="checkbox"/> Self AMERICAN EXPRESS FUNDS	6. House ID # 36981

TYPE OF REPORT 8. Year **2004** Midyear (January 1-June 30) OR Year End (July 1-December)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report Termination Date **11/1/2004**

11. No Lobbying A

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ 20,000.00</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(f) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Revenue Code</p>
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Form

Printed Name and Title **THOMAS R. BERKELMAN CFO**

Registrant Name THOMAS R. BERKELMAN Client Name AMERICAN EXPRESS

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the registrant was engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code and information as requested. Attach additional page(s) as needed.

15. General issue area code BAN (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue

MUTUAL FUND REFORM / NO SPECIFIC LEGISLATION

17. House(s) of Congress and Federal agencies contacted Check if None

HOUSE OF REPRESENTATIVES
UNITED STATES SENATE

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists for this issue area*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
<u>THOMAS</u>	<u>BERKELMAN</u>		

19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Printed Name and Title THOMAS R. BERKELMAN CFO

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Registrant Name THOMAS R. BERKSLMAN Client Name AMERICAN EXPRESS F

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address

City

State

Zip Code

Country

21. Client new principal place of business (if different than line 20)

City

State

Zip Code

Country

22. New general description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

First Name

Last Name

Suffix

First Name

Last Name

1

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State Country
	Address	City
	C/S/Z	State

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

1

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
	City	State/Province Country	City	
			State Country	

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant or affiliated organization

1

3

5

2

4

6

Add a page for more

Printed Name and Title ROBERT R. ...

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