MENNE MICHA Form 5 February 14, 2006								
FORM 5						PROVAL	-	
Check this box if		STATES	S SECURITIES AND EXCHANGE Washington, D.C. 20549	OMB Number:	3235-0362 January 31,			
no longer subject to Section 16. Form 4 or Form 5 obligations may continue.		NUAL ST	Expires: Estimated a burden hour response	2005 I average burs per				
See InstructionFiled pursuant to Section 16(a) of the Securities Exchange Act of 1934,1(b).Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,Form 3 HoldingsSection 17(a) of the Public Utility Holding Company Act of 1935 or SectionReported30(h) of the Investment Company Act of 1940TransactionsReported								
1. Name and Address of Reporting Person <u>*</u> MENNE MICHAEL L			2. Issuer Name and Ticker or Trading Symbol AMEREN CORP [AEE]	Issuer	Reporting Person(s) to k all applicable)			
(Last) (P. O. BOX 6614		Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2005	Director Officer (give t below)	Owner er (specify			
G	Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi	ident of Subsid int/Group Repo applicable line)	orting		

ST. LOUIS, MOÂ 63166-6149

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

(City)	(State) (A	Zip) Tabl	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)))	5. Amount of Securities Beneficially Owned at end	6. Ownership Form: Direct (D) or Indirect (I)	Indirect Beneficial Ownership	
				Amount	(A) or (D)	Price	of Issuer's Fiscal Year (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)	
Common Stock, \$.01 Par Value	Â	Â	Â	Â	Â	Â	1,462 <u>(1)</u>	Ι	By 401K	
Common Stock, \$.01 Par Value	Â	Â	Â	Â	Â	Â	1,749 <u>(2)</u>	Ι	By ESOP	
Common Stock, \$.01 Par Value	Â	Â	Â	Â	Â	Â	5,884 <u>(3)</u>	D	Â	

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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8. D S (I

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		;		7. Title and Amount o Underlying Securities (Instr. 3 and 4)		8 1 5 ()
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option	\$ 36.625	Â	Â	Â	Â	Â	02/12/2001	02/12/2009	Common Stock, \$.01 Par Value	3,800	
Stock Option	\$ 31	Â	Â	Â	Â	Â	02/11/2002	02/11/2010	Common Stock, \$.01 Par Value	4,000	

Reporting Owners

Reporting Owner Name / Address	Relationships						
1	Director	Director 10% Owner		Other			
MENNE MICHAEL L P. O. BOX 66149 ST. LOUIS, MO 63166-6149	Â	Â	Â	Vice President of Subsidiary			
Signatures							
G. L. Waters, Asst. Secy. for Micha Menne	02/14/2	2006					
<u>**</u> Signature of Reporting Person	Date	e					
Explanation of Res	nneag	2.					

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) Includes a total of 38 shares acquired monthly from January through December 2005 at prices ranging from \$48.94 to \$55.77.

(2)

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Amount includes a total of 82 shares acquired during the first through fourth quarters of 2005 through reinvested dividends at prices ranging from \$48.94 to \$55.53.

(3) Amount includes a total of 272 shares acquired during the first through fourth quarters of 2005 through reinvested dividends at prices ranging from \$48.94 to \$55.53.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.