

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 Principal Life Insurance Company Political Action Committee

ADDRESS (number and street) 711 High St. Government Relations Des Moines IA 50392 0220 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00128918 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 09 01 2008 through 09 30 2008

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 Terry Tobin

Signature of Treasurer Electronically Filed by Terry Tobin Date 10 16 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Principal Life Insurance Company Political Action Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		26325.17
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	14915.13									
(c) Total Receipts (from Line 19) .....	14451.09	138641.05								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	29366.22	164966.22								
7. Total Disbursements (from Line 31) .....	14055.00	149655.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	15311.22	15311.22								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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  
Principal Life Insurance Company Political Action Committee

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	9218.96	65272.67
(i) Itemized (use Schedule A) .....	5232.13	73368.38
(ii) Unitemized .....	14451.09	138641.05
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14451.09	138641.05
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)) .....	14451.09	138641.05
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14451.09	138641.05

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	55.00	55.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	55.00	55.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10500.00	111750.00
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 .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	3500.00	37850.00
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))..	14055.00	149655.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14055.00	149655.00

**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 .....	14451.09	138641.05
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14451.09	138641.05
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	55.00	55.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	55.00	55.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 91  
(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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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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Arthur J. Bacci		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address Wilmington Retirement Serv 1013 Centre Road		<b>Transaction ID:</b> 06106-54
City Wilmington	State DE	Zip Code 19805-1265
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15.38
Name of Employer Principal Trust Company	Occupation VP-CEO/President Ptc & Bank	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.90	

**B.**

Full Name (Last, First, Middle Initial) Arthur J. Bacci		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address Wilmington Retirement Serv 1013 Centre Road		<b>Transaction ID:</b> 06106-55
City Wilmington	State DE	Zip Code 19805-1265
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15.38
Name of Employer Principal Trust Company	Occupation VP-CEO/President Ptc & Bank	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.90	

**C.**

Full Name (Last, First, Middle Initial) Craig L. Bassett		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-223
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 31.74
Name of Employer Principal Life Ins Co.	Occupation VP & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 491.86	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	62.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Craig L. Bassett</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP &amp; Treasurer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">491.86</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-224</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">31.74</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Michael J. Beer</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP-Mutual Funds &amp; Broker Dealer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">665.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-963</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">35.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael J. Beer</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP-Mutual Funds &amp; Broker Dealer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">665.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-964</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">35.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">101.74</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Louise A. Billmeyer</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP - Health IT</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">741.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-835</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">39.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Louise A. Billmeyer</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP - Health IT</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">741.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-836</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">39.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Paula J. Binkley-Bittick</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">226.10</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1089</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">11.90</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">89.90</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Paula J. Binkley-Bittick

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.10

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-1090

Amount of Each Receipt this Period  
11.90

**B.**

Full Name (Last, First, Middle Initial)  
Kim M. Blaugher

Mailing Address 910 W Main Street Suite 316

City State Zip Code  
Boise ID 83702-5733

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-733

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Kim M. Blaugher

Mailing Address 910 W Main Street Suite 316

City State Zip Code  
Boise ID 83702-5733

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-734

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **51.90**

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

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

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

FOR LINE NUMBER: PAGE 10 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Patti R. Blumer

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

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

Name of Employer Principal Life Ins Co. Occupation Director, Federal Gov Rel-Dc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 858.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-1069

Amount of Each Receipt this Period  
48.40

**B.** Full Name (Last, First, Middle Initial)  
Patti R. Blumer

Mailing Address 1350 I Street Northwest  
Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

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

Name of Employer Principal Life Ins Co. Occupation Director, Federal Gov Rel-Dc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 858.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 06106-1070

Amount of Each Receipt this Period  
48.40

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategic Dev & Mktg

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-191

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **146.80**

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

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

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

FOR LINE NUMBER: PAGE 11 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Christopher J. Bowman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategic Dev & Mktg

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-192  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
David J. Brown

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP,Product &Distrib Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 537.84

Date of Receipt 09 / 05 / 2008  
Transaction ID: 06106-281  
Amount of Each Receipt this Period 31.74

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP,Product &Distrib Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 537.84

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-282  
Amount of Each Receipt this Period 31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► 113.48

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 91  
(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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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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jill R. Brown

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Principal Life Ins Co. Occupation CFO-Principal Funds

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-591

Amount of Each Receipt this Period  
15.38

**B.**

Full Name (Last, First, Middle Initial)  
Jill R. Brown

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Principal Life Ins Co. Occupation CFO-Principal Funds

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-592

Amount of Each Receipt this Period  
15.38

**C.**

Full Name (Last, First, Middle Initial)  
Paul A. Brown

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Institutional Mkt Segment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1071

Amount of Each Receipt this Period  
39.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 69.76

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 91

(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Paul A. Brown

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP- Institutional Mkt Segment

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 741.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-1072

Amount of Each Receipt this Period

39.00

**B.**

Full Name (Last, First, Middle Initial)

Barbara A. Burgat

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Occupation  
Principal Life Ins Co. 2nd VP-Principal Funds Distr

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 292.22

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-64

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Barbara A. Burgat

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Occupation  
Principal Life Ins Co. 2nd VP-Principal Funds Distr

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 292.22

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 8 / 2 0 0 8

Transaction ID: 06106-65

Amount of Each Receipt this Period

15.38

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

69.76

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ned A. Burmeister

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal International, Inc. Occupation VP, CFO & Risk Mgr-Prin Intrn'l

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1037

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Ned A. Burmeister

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal International, Inc. Occupation VP, CFO & Risk Mgr-Prin Intrn'l

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1038

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas L. Burnor

Mailing Address 18101 Von Karman Avenue Suite 1170

City State Zip Code  
Irvine CA 92612-7169

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

Name of Employer Principal Life Ins Co. Occupation VP of Sales - Retirement Svcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1371

Amount of Each Receipt this Period  
28.85

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.85**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 91  
(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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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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Thomas L. Burnor

Mailing Address 18101 Von Karman Avenue  
Suite 1170

City Irvine State CA Zip Code 92612-7169

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

Name of Employer Principal Life Ins Co. Occupation VP of Sales - Retirement Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-1372

Amount of Each Receipt this Period  
28.85

**B.**

Full Name (Last, First, Middle Initial)  
Gregory J. Burrows

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement & Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1096.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-455

Amount of Each Receipt this Period  
57.69

**C.**

Full Name (Last, First, Middle Initial)  
Gregory J. Burrows

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement & Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1096.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-456

Amount of Each Receipt this Period  
57.69

**SUBTOTAL** of Receipts This Page (optional) ..... ► **144.23**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Teresa M. Button	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-1351
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation Chief Accounting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Teresa M. Button	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-1352
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation Chief Accounting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Chris T. Calos	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-180
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 31.85
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation VP Group Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 590.15	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>61.85</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Chris T. Calos

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Group Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 590.15

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-181

Amount of Each Receipt this Period  
31.85

**B.**

Full Name (Last, First, Middle Initial)  
Nicholas M. Cecere

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Career Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1041

Amount of Each Receipt this Period  
38.46

**C.**

Full Name (Last, First, Middle Initial)  
Nicholas M. Cecere

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Career Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1042

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **108.77**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lillian I. Chen

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-797

Amount of Each Receipt this Period  
32.00

**B.**

Full Name (Last, First, Middle Initial)  
Lillian I. Chen

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-798

Amount of Each Receipt this Period  
32.00

**C.**

Full Name (Last, First, Middle Initial)  
Barrie G. Christman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Individual Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.93

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-74

Amount of Each Receipt this Period  
38.47

**SUBTOTAL** of Receipts This Page (optional) ..... ► 102.47

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 91  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Barrie G. Christman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Individual Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.93

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-75

Amount of Each Receipt this Period 38.47

**B.**

Full Name (Last, First, Middle Initial)  
Timothy J. Cleary

Mailing Address 11100 Wayzata Boulevard, Suite 211  
Principal Financial Group

City State Zip Code  
Minnetonka MN 55305-5517

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-1382

Amount of Each Receipt this Period 15.38

**C.**

Full Name (Last, First, Middle Initial)  
Timothy J. Cleary

Mailing Address 11100 Wayzata Boulevard, Suite 211  
Principal Financial Group

City State Zip Code  
Minnetonka MN 55305-5517

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-1383

Amount of Each Receipt this Period 15.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► 69.23

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Eileen M. Conroy		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-403		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 15.38	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation AVP-Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 292.22			

<b>B.</b>	Full Name (Last, First, Middle Initial) Eileen M. Conroy		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-404		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 15.38	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation AVP-Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 292.22			

<b>C.</b>	Full Name (Last, First, Middle Initial) Cathy L. Cory		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-166		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 16.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation State/Fed Compl Consult			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	46.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Cathy L. Cory

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation State/Fed Compl Consult

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-167

Amount of Each Receipt this Period  
16.00

**B.** Full Name (Last, First, Middle Initial)  
Michael W. Cumings

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-967

Amount of Each Receipt this Period  
15.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-968

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 46.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Andrew P. Dalgliesh

Mailing Address 4141 Park Lake ; Suite 400

City Raleigh State NC Zip Code 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation Director-Non-Qualified

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-25

Amount of Each Receipt this Period  
15.00

**B.**

Full Name (Last, First, Middle Initial)  
Andrew P. Dalgliesh

Mailing Address 4141 Park Lake ; Suite 400

City Raleigh State NC Zip Code 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation Director-Non-Qualified

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-26

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)  
Ronald L. Danilson

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement & Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-1197

Amount of Each Receipt this Period  
65.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **95.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ronald L. Danilson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement & Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1198

Amount of Each Receipt this Period  
65.00

**B.**

Full Name (Last, First, Middle Initial)  
Gary L. Dorton

Mailing Address 4141 Park Lake ; Suite 400

City State Zip Code  
Raleigh NC 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation VP-Employer Solutions & Serv

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-429

Amount of Each Receipt this Period  
31.74

**C.**

Full Name (Last, First, Middle Initial)  
Gary L. Dorton

Mailing Address 4141 Park Lake ; Suite 400

City State Zip Code  
Raleigh NC 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation VP-Employer Solutions & Serv

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-430

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► **128.48**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 91  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Timothy M. Dunbar

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Exec Dir - Equities

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 979.58

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1388

Amount of Each Receipt this Period  
63.46

**B.**

Full Name (Last, First, Middle Initial)  
Timothy M. Dunbar

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Exec Dir - Equities

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 979.58

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1389

Amount of Each Receipt this Period  
63.46

**C.**

Full Name (Last, First, Middle Initial)  
Gregory B. Elming

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1216.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-457

Amount of Each Receipt this Period  
64.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.92**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 91

(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

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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Gregory B. Elming		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-458
	City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 64.00
	Name of Employer Principal Life Ins Co.	Occupation Svp & Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1216.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Ralph C. Eucher		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-1117
	City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
	Name of Employer Principal Life Ins Co.	Occupation Svp HR, Corp Svcs & Ris	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Ralph C. Eucher		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-1118
	City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
	Name of Employer Principal Life Ins Co.	Occupation Svp HR, Corp Svcs & Ris	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>114.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Nora M. Everett		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 06106-1045
Name of Employer Principal Life Ins Co.		Occupation Svp Retirement & Investor Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 848.46	<input type="text"/> 45.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Nora M. Everett		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 19 / 2008
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 06106-1046
Name of Employer Principal Life Ins Co.		Occupation Svp Retirement & Investor Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 848.46	<input type="text"/> 45.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas A. Fick		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 06106-379
Name of Employer Principal Life Ins Co.		Occupation VP - Sbd IT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 608.00	<input type="text"/> 32.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 122.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 27 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP - Sbd IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-380  
Amount of Each Receipt this Period 32.00

**B.** Full Name (Last, First, Middle Initial)  
Michael P. Finnegan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Chief Invest Officer- Pmc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 531.38

Date of Receipt 09 / 05 / 2008  
Transaction ID: 06106-973  
Amount of Each Receipt this Period 32.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Chief Invest Officer- Pmc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 531.38

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-974  
Amount of Each Receipt this Period 32.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 96.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jed A. Fisk

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Corp Svc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.30

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-545

Amount of Each Receipt this Period  
28.85

**B.**

Full Name (Last, First, Middle Initial)  
Jed A. Fisk

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Corp Svc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.30

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 06106-546

Amount of Each Receipt this Period  
28.85

**C.**

Full Name (Last, First, Middle Initial)  
Brent Fritz

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Actuary-Individual

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.58

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-114

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► **89.44**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 91  
(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
							17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Brent Fritz

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Actuary-Individual

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 539.58

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-115

Amount of Each Receipt this Period  
31.74

**B.**

Full Name (Last, First, Middle Initial)  
Paul E. Fromm

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation AVP-Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1075

Amount of Each Receipt this Period  
19.23

**C.**

Full Name (Last, First, Middle Initial)  
Paul E. Fromm

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation AVP-Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1076

Amount of Each Receipt this Period  
19.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► 70.20

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 91

(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Cary A. Fuchs

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Occupation  
Principal Life Ins Co. AVP-Principal Funds Distrib

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-156

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Cary A. Fuchs

Mailing Address 1100 Investment Boulevard

City State Zip Code  
El Dorado Hills CA 95762-5710

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

Name of Employer Occupation  
Principal Life Ins Co. AVP-Principal Funds Distrib

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-157

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Michael H. Gersie

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. Executive Vice President

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1520.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-977

Amount of Each Receipt this Period

80.00

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

120.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael H. Gersie

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1520.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-978

Amount of Each Receipt this Period  
80.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas J. Graf

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1374

Amount of Each Receipt this Period  
150.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Investor Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1375

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 380.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 91  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lynn M. Graves

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-843

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
Lynn M. Graves

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 745.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-844

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven K. Graves

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Mng Dir-Real Estate Operation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-1313

Amount of Each Receipt this Period  
32.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **112.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 91

(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Steven K. Graves

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer  
Principal Life Ins Co.

Occupation  
Mng Dir-Real Estate Operation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1314

Amount of Each Receipt this Period 32.00

**B.**

Full Name (Last, First, Middle Initial)  
Victoria I. Gray

Mailing Address 51 Germantown Court Suite 101  
Principal Financial Group

City State Zip Code  
Cordova TN 38018

FEC ID number of contributing federal political committee. C

Name of Employer  
Principal Life Ins Co.

Occupation  
Sr Account Exec-Retirement Svc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1432

Amount of Each Receipt this Period 75.00

**C.**

Full Name (Last, First, Middle Initial)  
Victoria I. Gray

Mailing Address 51 Germantown Court Suite 101  
Principal Financial Group

City State Zip Code  
Cordova TN 38018

FEC ID number of contributing federal political committee. C

Name of Employer  
Principal Life Ins Co.

Occupation  
Sr Account Exec-Retirement Svc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1425.00

Date of Receipt MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1433

Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... 182.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) J. B. Griswell	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-477
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70	

<b>B.</b>	Full Name (Last, First, Middle Initial) J. B. Griswell	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-478
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 192.30
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3653.70	

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas E. Grove	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 700 E Butterfield Road, Suite 450 Principal Financial Group	<b>Transaction ID:</b> 06106-383
	City State Zip Code Lombard IL 60148-5671	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation VP - Nat'l Sales Dir Ret Svc Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 665.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>419.60</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Douglas E. Grove

Mailing Address 700 E Butterfield Road, Suite 450  
Principal Financial Group

City Lombard State IL Zip Code 60148-5671

FEC ID number of contributing federal political committee. C

Name of Employer Principal Life Ins Co. Occupation VP - Nat'l Sales Dir Ret Svc

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt 09 / 19 / 2008  
**Transaction ID:** 06106-384  
 Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick G. Halter

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer Principal Life Ins Co. Occupation Head of Prinrei

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 559.58

Date of Receipt 09 / 05 / 2008  
**Transaction ID:** 06106-1063  
 Amount of Each Receipt this Period 31.74

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

Mailing Address 711 High Street

City Des Moines State IA Zip Code 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer Principal Life Ins Co. Occupation Head of Prinrei

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 559.58

Date of Receipt 09 / 19 / 2008  
**Transaction ID:** 06106-1064  
 Amount of Each Receipt this Period 31.74

**SUBTOTAL** of Receipts This Page (optional) ..... 98.48

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

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

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

FOR LINE NUMBER: PAGE 36 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mark A. Hanrahan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Mng Dir-Cre

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-873

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mark A. Hanrahan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Mng Dir-Cre

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-874

Amount of Each Receipt this Period  
100.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Insured Medical Products

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-821

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **235.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Loraine N. Hardin

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer: Principal Life Ins Co. Occupation: VP-Insured Medical Products

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 635.00

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-822

Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
Monica L. Haun

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer: Principal Life Ins Co. Occupation: AVP-IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 05 / 2008  
Transaction ID: 06106-1017

Amount of Each Receipt this Period 19.23

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

FEC ID number of contributing federal political committee. C

Name of Employer: Principal Life Ins Co. Occupation: AVP-IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-1018

Amount of Each Receipt this Period 19.23

**SUBTOTAL** of Receipts This Page (optional) ..... 73.46

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

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

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

FOR LINE NUMBER: PAGE 38 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Philip G. Hayne  
Mailing Address 711 High Street  
City State Zip Code  
Des Moines IA 50309-2732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation Nat'l Advanced Solution Specia  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 226.48  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 06106-1103  
Amount of Each Receipt this Period 11.92

**B.** Full Name (Last, First, Middle Initial)  
Philip G. Hayne  
Mailing Address 711 High Street  
City State Zip Code  
Des Moines IA 50309-2732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation Nat'l Advanced Solution Specia  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 226.48  
Date of Receipt 09 / 19 / 2008  
Transaction ID: 06106-1104  
Amount of Each Receipt this Period 11.92

**C.** Full Name (Last, First, Middle Initial)  
Christopher J. Henderson  
Mailing Address 711 High Street  
City State Zip Code  
Des Moines IA 50309-2732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 604.85  
Date of Receipt 09 / 05 / 2008  
Transaction ID: 06106-197  
Amount of Each Receipt this Period 32.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 55.84  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Christopher J. Henderson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.85

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-198

Amount of Each Receipt this Period  
32.00

**B.**

Full Name (Last, First, Middle Initial)  
Timothy A. Hill

Mailing Address 3727 South Hills Way

City State Zip Code  
Eagan MN 55123-1215

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

Name of Employer Principal Life Ins Co. Occupation National Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-1390

Amount of Each Receipt this Period  
18.00

**C.**

Full Name (Last, First, Middle Initial)  
Timothy A. Hill

Mailing Address 3727 South Hills Way

City State Zip Code  
Eagan MN 55123-1215

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

Name of Employer Principal Life Ins Co. Occupation National Sales Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-1391

Amount of Each Receipt this Period  
18.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **68.00**

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

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

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

FOR LINE NUMBER: PAGE 40 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Jill M. Hittner

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Chief Financial Officer-Pgi

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 419.38

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-593

Amount of Each Receipt this Period  
31.74

**B.** Full Name (Last, First, Middle Initial)  
Jill M. Hittner

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Chief Financial Officer-Pgi

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 419.38

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-594

Amount of Each Receipt this Period  
31.74

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Corporate Secretary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1180.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-657

Amount of Each Receipt this Period  
63.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► 126.94

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 91  
(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
							17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joyce N. Hoffman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Corporate Secretary

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1180.74

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-658

Amount of Each Receipt this Period  
63.46

**B.**

Full Name (Last, First, Middle Initial)  
Roger D. Holton

Mailing Address 7077 Bonneval Road Suite 380

City State Zip Code  
Jacksonville FL 32216-6055

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

Name of Employer Principal Life Ins Co. Occupation Managing Director-Unit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

**Transaction ID:** 06106-1191

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)  
Roger D. Holton

Mailing Address 7077 Bonneval Road Suite 380

City State Zip Code  
Jacksonville FL 32216-6055

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

Name of Employer Principal Life Ins Co. Occupation Managing Director-Unit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** 06106-1192

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 93.46

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Daniel J. Houston

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation President Ret & Investor Svcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2025.92

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-249

Amount of Each Receipt this Period  
117.00

**B.**

Full Name (Last, First, Middle Initial)  
Daniel J. Houston

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation President Ret & Investor Svcs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2025.92

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-250

Amount of Each Receipt this Period  
117.00

**C.**

Full Name (Last, First, Middle Initial)  
Bradley G. Jensen

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Chief Financial Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-100

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► **265.74**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Bradley G. Jensen

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-101

Amount of Each Receipt this Period  
31.74

**B.**

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Dir Idi Oper-New & Exist Bus

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1160

Amount of Each Receipt this Period  
12.00

**C.**

Full Name (Last, First, Middle Initial)  
Clifford P. Karthausser

Mailing Address 14301 First National Bank Parkway  
Suite 306

City State Zip Code  
Omaha NE 68154-5299

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

Name of Employer Principal Life Ins Co. Occupation Regional Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt  
MM / DD / YYYY  
09 / 25 / 2008

**Transaction ID:** 795cbf536946ea10169

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **98.74**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 91  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Monica J. Kirgan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-National Service Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 684.98

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-1019

Amount of Each Receipt this Period  
36.00

**B.** Full Name (Last, First, Middle Initial)  
Monica J. Kirgan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-National Service Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 684.98

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-1020

Amount of Each Receipt this Period  
36.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-228

Amount of Each Receipt this Period  
11.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **83.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 91  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mark Lagomarcino

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Assistant General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-881

Amount of Each Receipt this Period  
15.38

**B.**

Full Name (Last, First, Middle Initial)  
Mark Lagomarcino

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Assistant General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-882

Amount of Each Receipt this Period  
15.38

**C.**

Full Name (Last, First, Middle Initial)  
Ellen Z. Lamale

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Chief Risk Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-413

Amount of Each Receipt this Period  
70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **100.76**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 91  
(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
							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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ellen Z. Lamale

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Chief Risk Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-414

Amount of Each Receipt this Period  
70.00

**B.**

Full Name (Last, First, Middle Initial)  
Blaine W. Laverick

Mailing Address 4141 Park Lake ; Suite 400

City State Zip Code  
Raleigh NC 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation VP-Executive Benefit Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-86

Amount of Each Receipt this Period  
15.38

**C.**

Full Name (Last, First, Middle Initial)  
Blaine W. Laverick

Mailing Address 4141 Park Lake ; Suite 400

City State Zip Code  
Raleigh NC 27612-2333

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

Name of Employer Principal Life Ins Co. Occupation VP-Executive Benefit Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-87

Amount of Each Receipt this Period  
15.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► **100.76**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Julia M. Lawler-Johnson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Chief Inv Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1045.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-663

Amount of Each Receipt this Period  
55.00

**B.**

Full Name (Last, First, Middle Initial)  
Julia M. Lawler-Johnson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & Chief Inv Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1045.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-664

Amount of Each Receipt this Period  
55.00

**C.**

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

Mailing Address 1350 I Street Northwest Suite 880

City State Zip Code  
Washington D.C. DC 20005-7207

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

Name of Employer Principal Life Ins Co. Occupation VP-Federal Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1161

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► 148.46

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard C. Lawson		Date of Receipt
	Mailing Address 1350 I Street Northwest Suite 880		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 19 / 2008
	City	State	Zip Code
	Washington D.C.	DC	20005-7207
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-1162
Name of Employer Principal Life Ins Co.		Occupation VP-Federal Govt Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 730.74	<input type="text"/> 38.46

<b>B.</b>	Full Name (Last, First, Middle Initial) Scott P. Leiberton		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-1243
Name of Employer Principal Life Ins Co.		Occupation Mng Dir-Product Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	<input type="text"/> 20.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Scott P. Leiberton		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 19 / 2008
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-1244
Name of Employer Principal Life Ins Co.		Occupation Mng Dir-Product Specialist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	<input type="text"/> 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 78.46
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Terrance J. Lillis</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co.      Occupation: Svp &amp; Chief Financial Officer</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">760.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1357</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Terrance J. Lillis</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co.      Occupation: Svp &amp; Chief Financial Officer</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">760.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1358</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">40.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Gregory A. Linde</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co.      Occupation: VP-Individual Life Operations</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">475.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-459</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">105.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 91

(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)  
Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Gregory A. Linde

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP-Individual Life Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-460

Amount of Each Receipt this Period  
25.00

B.

Full Name (Last, First, Middle Initial)  
Dennis J. Long

Mailing Address 1025 E South River Street

City State Zip Code  
Appleton WI 54915-2225

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

Name of Employer Occupation  
Principal Life Ins Co. Vice President- Pcg

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 730.74

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-335

Amount of Each Receipt this Period  
38.46

C.

Full Name (Last, First, Middle Initial)  
Dennis J. Long

Mailing Address 1025 E South River Street

City State Zip Code  
Appleton WI 54915-2225

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

Name of Employer Occupation  
Principal Life Ins Co. Vice President- Pcg

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 730.74

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-336

Amount of Each Receipt this Period  
38.46

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

101.92

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

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

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

FOR LINE NUMBER: PAGE 51 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Denise A. Loomis

Mailing Address 999 Fifth Avenue  
Suite 490

City State Zip Code  
San Rafael CA 94901-2995

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

Name of Employer Principal Life Ins Co. Occupation Reg Client Svc Dir-Retirement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-327

Amount of Each Receipt this Period  
15.00

**B.** Full Name (Last, First, Middle Initial)  
Denise A. Loomis

Mailing Address 999 Fifth Avenue  
Suite 490

City State Zip Code  
San Rafael CA 94901-2995

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

Name of Employer Principal Life Ins Co. Occupation Reg Client Svc Dir-Retirement

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-328

Amount of Each Receipt this Period  
15.00

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

Mailing Address 5500 Main Street  
Principal Financial Group

City State Zip Code  
Williamsville NY 14221

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-649

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Joseph E. Marx		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 5500 Main Street Principal Financial Group		Transaction ID: 06106-650
City Williamsville	State NY	Zip Code 14221
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15.00
Name of Employer Principal Life Ins Co.	Occupation VP Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

**B.**

Full Name (Last, First, Middle Initial) Chris L. Mayer		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 711 High Street		Transaction ID: 06106-182
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation VP Defined Benefit & Ret Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00	

**C.**

Full Name (Last, First, Middle Initial) Chris L. Mayer		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 711 High Street		Transaction ID: 06106-183
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation VP Defined Benefit & Ret Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	79.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 / 91
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) James P. McCaughan		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 888 7th Ave; 11th Floor		<b>Transaction ID:</b> 06106-497
	City New York	State NY	Zip Code 10106-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer Principal Life Ins Co.		Occupation President Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3653.70	

<b>B.</b>	Full Name (Last, First, Middle Initial) James P. McCaughan		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 888 7th Ave; 11th Floor		<b>Transaction ID:</b> 06106-498
	City New York	State NY	Zip Code 10106-0001
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer Principal Life Ins Co.		Occupation President Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3653.70	

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel J. McGee		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 13860 Ballantyne Corp Place, Suite Principal Financial Group		<b>Transaction ID:</b> 06106-255
	City Charlotte	State NC	Zip Code 28277-2467
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Principal Life Ins Co.		Occupation VP-Managing Dir, Ris Distrib	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 760.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	424.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Daniel J. McGee		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 13860 Ballantyne Corp Place, Suite Principal Financial Group		Transaction ID: 06106-256
City Charlotte	State NC	Zip Code 28277-2467
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 40.00
Name of Employer Principal Life Ins Co.	Occupation VP-Managing Dir, Ris Distrib	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	

**B.**

Full Name (Last, First, Middle Initial) Barbara A. McKenzie		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 711 High Street		Transaction ID: 06106-70
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation Chief Operations Officer-Pgi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00	

**C.**

Full Name (Last, First, Middle Initial) Barbara A. McKenzie		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 711 High Street		Transaction ID: 06106-71
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation Chief Operations Officer-Pgi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	104.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 91

(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

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)

Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Arthur M. McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
AVP-Product Management

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

453.53

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-56

Amount of Each Receipt this Period

23.87

**B.**

Full Name (Last, First, Middle Initial)

Arthur M. McMahon

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
AVP-Product Management

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

453.53

Date of Receipt

M M / D D / Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-57

Amount of Each Receipt this Period

23.87

**C.**

Full Name (Last, First, Middle Initial)

Shelly M. Meighan

Mailing Address 711 High Street

City

Des Moines

State

IA

Zip Code

50309-2732

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
Principal Life Ins Co.

Occupation  
Dir - Career Operations

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-1273

Amount of Each Receipt this Period

25.00

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

72.74

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Shelly M. Meighan

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Dir - Career Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-1274

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Amy J. Mills

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-17

Amount of Each Receipt this Period  
38.46

**C.**

Full Name (Last, First, Middle Initial)  
Amy J. Mills

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-18

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **101.92**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Timothy J. Minard

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-1394

Amount of Each Receipt this Period  
65.00

**B.**

Full Name (Last, First, Middle Initial)  
Timothy J. Minard

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Retirement Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-1395

Amount of Each Receipt this Period  
65.00

**C.**

Full Name (Last, First, Middle Initial)  
Jacque S. Mohs

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Dynamic Market Segment

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-481

Amount of Each Receipt this Period  
32.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **162.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 91

(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jacque S. Mohs

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP- Dynamic Market Segment

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-482

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Barbara C. Mueller

Mailing Address 6200 Park Avenue

City State Zip Code  
Des Moines IA 50321-1270

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

Name of Employer Occupation  
Principal Life Ins Co. Chief Credit & Risk Offcr-Bank

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 238.42

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-72

Amount of Each Receipt this Period

15.38

**C.**

Full Name (Last, First, Middle Initial)

Barbara C. Mueller

Mailing Address 6200 Park Avenue

City State Zip Code  
Des Moines IA 50321-1270

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

Name of Employer Occupation  
Principal Life Ins Co. Chief Credit & Risk Offcr-Bank

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 238.42

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-73

Amount of Each Receipt this Period

15.38

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

62.76

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) John Mullen		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 402 Juniper Mill Trace		<b>Transaction ID:</b> 06106-617
City Canton	State GA	Zip Code 30114-9600
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.00
Name of Employer Principal Life Ins Co.	Occupation Sr Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

**B.**

Full Name (Last, First, Middle Initial) John Mullen		Date of Receipt MM / DD / YYYY 09 / 19 / 2008
Mailing Address 402 Juniper Mill Trace		<b>Transaction ID:</b> 06106-618
City Canton	State GA	Zip Code 30114-9600
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.00
Name of Employer Principal Life Ins Co.	Occupation Sr Regional Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 399.00	

**C.**

Full Name (Last, First, Middle Initial) Sarah O'Brien		Date of Receipt MM / DD / YYYY 09 / 05 / 2008
Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-1231
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 11.52
Name of Employer Principal Life Ins Co.	Occupation Product Development Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.88	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>53.52</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sarah O'Brien</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co. Occupation: Product Development Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">218.88</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1232</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">11.52</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary A. O'Keefe</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp &amp; Chief Marketing Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">840.37</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-931</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">44.23</span></p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Mary A. O'Keefe</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp &amp; Chief Marketing Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">840.37</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-932</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">44.23</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">99.98</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Gerald W. Patterson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Marketing Life & Health

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-443

Amount of Each Receipt this Period  
28.85

**B.**

Full Name (Last, First, Middle Initial)  
Gerald W. Patterson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Marketing Life & Health

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

Transaction ID: 06106-444

Amount of Each Receipt this Period  
28.85

**C.**

Full Name (Last, First, Middle Initial)  
Karen A. Pearston

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

Transaction ID: 06106-689

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.44

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Karen A. Pearston

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.62

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-690

Amount of Each Receipt this Period  
31.74

**B.** Full Name (Last, First, Middle Initial)  
Merle T. Pederson

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-959

Amount of Each Receipt this Period  
32.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP-Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-960

Amount of Each Receipt this Period  
32.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 95.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 91						
	(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

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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter J. Prodoehl		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 1025 E South River Street		<b>Transaction ID:</b> 06106-1099		
	City Appleton	State WI	Zip Code 54915-2225	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation VP Consulting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.37			

<b>B.</b>	Full Name (Last, First, Middle Initial) Peter J. Prodoehl		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 1025 E South River Street		<b>Transaction ID:</b> 06106-1100		
	City Appleton	State WI	Zip Code 54915-2225	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation VP Consulting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.37			

<b>C.</b>	Full Name (Last, First, Middle Initial) Jeffrey K. Rader		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-557		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 16.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation Head of Financial Communicatio			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 304.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>54.46</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey K. Rader

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Head of Financial Communicatio

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-558

Amount of Each Receipt this Period  
16.00

**B.**

Full Name (Last, First, Middle Initial)  
Christopher J. Reddy

Mailing Address 521 5th Avenue  
5th Floor - Nlia

City State Zip Code  
New York NY 10175-0500

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

Name of Employer Principal Life Ins Co. Occupation COO Nippon

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 448.01

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-199

Amount of Each Receipt this Period  
23.79

**C.**

Full Name (Last, First, Middle Initial)  
Christopher J. Reddy

Mailing Address 521 5th Avenue  
5th Floor - Nlia

City State Zip Code  
New York NY 10175-0500

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

Name of Employer Principal Life Ins Co. Occupation COO Nippon

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 448.01

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-200

Amount of Each Receipt this Period  
23.79

**SUBTOTAL** of Receipts This Page (optional) ..... ► **63.58**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) R. L. Riddle	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 1350 I Street Northwest Suite 880	<b>Transaction ID:</b> 06106-1115
	City State Zip Code Washington D.C. DC 20005-7207	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation VP-Federal Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) R. L. Riddle	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 1350 I Street Northwest Suite 880	<b>Transaction ID:</b> 06106-1116
	City State Zip Code Washington D.C. DC 20005-7207	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation VP-Federal Govt Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael D. Roughton	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-991
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 32.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 591.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>132.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 91

(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Michael D. Roughton

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP & Associate General Counsel

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 591.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-992

Amount of Each Receipt this Period  
32.00

**B.**

Full Name (Last, First, Middle Initial)

Angela R. Sanders

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. Chief Accounting Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-36

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)

Angela R. Sanders

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. Chief Accounting Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-37

Amount of Each Receipt this Period  
20.00

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

72.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Renee V. Schaaf

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Ris Mktg & Strategy Dvlpmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 553.24

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-1143

Amount of Each Receipt this Period  
32.00

**B.**

Full Name (Last, First, Middle Initial)  
Renee V. Schaaf

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Ris Mktg & Strategy Dvlpmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 553.24

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-1144

Amount of Each Receipt this Period  
32.00

**C.**

Full Name (Last, First, Middle Initial)  
John D. Schmidt

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-621

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **104.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
John D. Schmidt

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-622

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
Gary P. Scholten

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 855.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-433

Amount of Each Receipt this Period  
45.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp & CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 855.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-434

Amount of Each Receipt this Period  
45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **130.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 91		
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeffrey D. Schreiber		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 201 Jones Road Principal Financial Grp		<b>Transaction ID:</b> 06106-559		
	City Waltham	State MA	Zip Code 02451-1605	Amount of Each Receipt this Period 15.38	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Principal Life Ins Co.		Occupation VP of Bus Development-Tpa		

Aggregate Year-to-Date ▼  
292.22

<b>B.</b>	Full Name (Last, First, Middle Initial) Jeffrey D. Schreiber		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 201 Jones Road Principal Financial Grp		<b>Transaction ID:</b> 06106-560		
	City Waltham	State MA	Zip Code 02451-1605	Amount of Each Receipt this Period 15.38	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Principal Life Ins Co.		Occupation VP of Bus Development-Tpa		

Aggregate Year-to-Date ▼  
292.22

<b>C.</b>	Full Name (Last, First, Middle Initial) Edward M. Schuh		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 2732 Daniel Avenue		<b>Transaction ID:</b> 06106-401		
	City Dallas	State TX	Zip Code 75205-1512	Amount of Each Receipt this Period 16.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Principal Life Ins Co.		Occupation Investment Specialist		

Aggregate Year-to-Date ▼  
304.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	46.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Edward M. Schuh</p> <p>Mailing Address 2732 Daniel Avenue</p> <p>City State Zip Code Dallas TX 75205-1512</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation Investment Specialist</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">304.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">19</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> 06106-402</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">16.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Karen E. Shaff</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation Exec VP &amp; General Counsel</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2090.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">05</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> 06106-691</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">110.00</span></p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Karen E. Shaff</p> <p>Mailing Address 711 High Street</p> <p>City State Zip Code Des Moines IA 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation Exec VP &amp; General Counsel</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2090.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">19</span> / <span style="border: 1px solid black; padding: 2px;">2008</span></p> <p><b>Transaction ID:</b> 06106-692</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">110.00</span></p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">236.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 71 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Daniel J. Shanahan

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

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

Name of Employer Occupation  
Principal Life Ins Co. Regional Managing Director

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** 06106-259

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
Daniel J. Shanahan

Mailing Address 13860 Ballantyne Corp Place, Suite  
Principal Financial Group

City State Zip Code  
Charlotte NC 28277-2467

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

Name of Employer Occupation  
Principal Life Ins Co. Regional Managing Director

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2008

**Transaction ID:** 06106-260

Amount of Each Receipt this Period  
20.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP & General Auditor

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-901

Amount of Each Receipt this Period  
38.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► 78.46

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 91  
(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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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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Martha C. Shepard

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & General Auditor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-902

Amount of Each Receipt this Period  
38.46

**B.**

Full Name (Last, First, Middle Initial)  
Laurel J. Shultz

Mailing Address 111 West State Street

City State Zip Code  
Mason City IA 50401-3131

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

Name of Employer Principal Life Ins Co. Occupation VP- Emerging Mkt Segment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-777

Amount of Each Receipt this Period  
33.00

**C.**

Full Name (Last, First, Middle Initial)  
Laurel J. Shultz

Mailing Address 111 West State Street

City State Zip Code  
Mason City IA 50401-3131

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

Name of Employer Principal Life Ins Co. Occupation VP- Emerging Mkt Segment

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 604.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-778

Amount of Each Receipt this Period  
33.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **104.46**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 91  
(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

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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ellen W. Shumway

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Exec Director- Affiliate Op

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-415

Amount of Each Receipt this Period  
32.00

**B.**

Full Name (Last, First, Middle Initial)  
Ellen W. Shumway

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Exec Director- Affiliate Op

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-416

Amount of Each Receipt this Period  
32.00

**C.**

Full Name (Last, First, Middle Initial)  
Tom Smith

Mailing Address 2000 River Edge Parkway Suite 1000  
Principal Financial Group

City State Zip Code  
Atlanta GA 30328

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

Name of Employer Principal Life Ins Co. Occupation Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-1410

Amount of Each Receipt this Period  
28.85

**SUBTOTAL** of Receipts This Page (optional) ..... ► **92.85**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Tom Smith</p> <p>Mailing Address 2000 River Edge Parkway Suite 1000 Principal Financial Group</p> <p>City Atlanta State GA Zip Code 30328</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal Life Ins Co. Occupation Regional VP</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">548.15</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1411</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">28.85</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Norman R. Sorensen</p> <p>Mailing Address 711 High Street</p> <p>City Des Moines State IA Zip Code 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal International, Inc. Occupation Exec VP Int'l Asset Accum</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1461.48</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 05 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1047</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">76.92</span></p>
---	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) Norman R. Sorensen</p> <p>Mailing Address 711 High Street</p> <p>City Des Moines State IA Zip Code 50309-2732</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Principal International, Inc. Occupation Exec VP Int'l Asset Accum</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1461.48</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> 06106-1048</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">76.92</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">182.69</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 91		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathleen M. Souhrada		Date of Receipt
	Mailing Address 711 High Street		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-707
Name of Employer Principal Life Ins Co.		Occupation AVP-Recruiting & Diversity	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="292.22"/>	<input type="text" value="15.38"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Kathleen M. Souhrada		Date of Receipt
	Mailing Address 711 High Street		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-708
Name of Employer Principal Life Ins Co.		Occupation AVP-Recruiting & Diversity	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="292.22"/>	<input type="text" value="15.38"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Deanna D. Strable-Soethout		Date of Receipt
	Mailing Address 711 High Street		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 06106-299
Name of Employer Principal Life Ins Co.		Occupation Svp Ind Life & Spec Benefits	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1205.74"/>	<input type="text" value="63.46"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="94.22"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Deanna D. Strable-Soethout

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Svp Ind Life & Spec Benefits

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.74

Date of Receipt: 09 / 19 / 2008  
Transaction ID: 06106-300  
Amount of Each Receipt this Period: 63.46

**B.** Full Name (Last, First, Middle Initial)  
Michael J. Streck

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation AVP & Corporate Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.56

Date of Receipt: 09 / 05 / 2008  
Transaction ID: 06106-993  
Amount of Each Receipt this Period: 15.40

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation AVP & Corporate Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.56

Date of Receipt: 09 / 19 / 2008  
Transaction ID: 06106-994  
Amount of Each Receipt this Period: 15.40

**SUBTOTAL** of Receipts This Page (optional) ..... ► 94.26

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

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

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

FOR LINE NUMBER: PAGE 77 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Timothy E. Stumpff

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Network Development

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 522.84

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-1398

Amount of Each Receipt this Period  
31.74

**B.** Full Name (Last, First, Middle Initial)  
Timothy E. Stumpff

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Network Development

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 522.84

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

**Transaction ID:** 06106-1399

Amount of Each Receipt this Period  
31.74

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & CIO-Retire Investor Svcs

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.91

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

**Transaction ID:** 06106-695

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► **95.22**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Karen S. Thomann

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & CIO-Retire Investor Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 459.91

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-696

Amount of Each Receipt this Period  
31.74

**B.**

Full Name (Last, First, Middle Initial)  
Daniel J. Thomas

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Asst Dir - IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-261

Amount of Each Receipt this Period  
15.38

**C.**

Full Name (Last, First, Middle Initial)  
Daniel J. Thomas

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Asst Dir - IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-262

Amount of Each Receipt this Period  
15.38

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **62.50**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joni L. Tibbetts

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP- Sales Engineering

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-644

Amount of Each Receipt this Period 15.00

**B.**

Full Name (Last, First, Middle Initial)  
Terrence Tobin

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Director-Prin Enterprise Cap

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt MM / DD / YYYY  
09 / 05 / 2008

Transaction ID: 06106-1359

Amount of Each Receipt this Period 15.00

**C.**

Full Name (Last, First, Middle Initial)  
Terrence Tobin

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Director-Prin Enterprise Cap

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: 06106-1360

Amount of Each Receipt this Period 15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 91  
(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Leanne M. Valentine

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.10

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-787

Amount of Each Receipt this Period  
31.74

**B.**

Full Name (Last, First, Middle Initial)  
Leanne M. Valentine

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 484.10

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-788

Amount of Each Receipt this Period  
31.74

**C.**

Full Name (Last, First, Middle Initial)  
Bruce R. Valk

Mailing Address 1025 E South River Street

City State Zip Code  
Appleton WI 54915-2225

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

Name of Employer Principal Life Ins Co. Occupation AVP-Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-130

Amount of Each Receipt this Period  
15.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► **78.86**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Bruce R. Valk

Mailing Address 1025 E South River Street

City State Zip Code  
Appleton WI 54915-2225

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

Name of Employer Principal Life Ins Co. Occupation AVP-Consulting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-131

Amount of Each Receipt this Period  
15.38

**B.** Full Name (Last, First, Middle Initial)  
Luke J. Vandermillen

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Risd- Worksite Solutions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2008

**Transaction ID:** 06106-839

Amount of Each Receipt this Period  
35.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation VP Risd- Worksite Solutions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** 06106-840

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85.38**

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

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

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

FOR LINE NUMBER: PAGE 82 / 91  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Maria E. Volante

Mailing Address 1275 Northwest 128th Street  
Suite 100

City State Zip Code  
Clive IA 50325-7450

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

Name of Employer Principal Life Ins Co. Occupation VP-Natl Accts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 573.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-865

Amount of Each Receipt this Period  
32.00

**B.** Full Name (Last, First, Middle Initial)  
Maria E. Volante

Mailing Address 1275 Northwest 128th Street  
Suite 100

City State Zip Code  
Clive IA 50325-7450

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

Name of Employer Principal Life Ins Co. Occupation VP-Natl Accts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 573.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 19 / 2008

**Transaction ID:** 06106-866

Amount of Each Receipt this Period  
32.00

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

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Principal Life Ins Co. Occupation Director- Institutional

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 232.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 05 / 2008

**Transaction ID:** 06106-463

Amount of Each Receipt this Period  
12.26

**SUBTOTAL** of Receipts This Page (optional) ..... ► **76.26**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Harvey R. Weinberg		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 711 High Street		<b>Transaction ID:</b> 06106-464		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 12.26	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation Director- Institutional			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 232.94			

<b>B.</b>	Full Name (Last, First, Middle Initial) Hugh B. White		Date of Receipt MM / DD / YYYY 09 / 05 / 2008		
	Mailing Address 485 Metro Place South, Suite 206 Principal Financial Group		<b>Transaction ID:</b> 06106-473		
	City Dublin	State OH	Zip Code 43017-5332	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation Vice President-Grp Non Med			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Hugh B. White		Date of Receipt MM / DD / YYYY 09 / 19 / 2008		
	Mailing Address 485 Metro Place South, Suite 206 Principal Financial Group		<b>Transaction ID:</b> 06106-474		
	City Dublin	State OH	Zip Code 43017-5332	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Principal Life Ins Co.	Occupation Vice President-Grp Non Med			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	52.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 91

(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)  
Principal Life Insurance Company Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP Corporate Marketing

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-1323

Amount of Each Receipt this Period

32.00

**B.**

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP Corporate Marketing

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 9 / 2 0 0 8

Transaction ID: 06106-1324

Amount of Each Receipt this Period

32.00

**C.**

Full Name (Last, First, Middle Initial)

William Workman

Mailing Address 711 High Street

City State Zip Code  
Des Moines IA 50309-2732

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

Name of Employer Occupation  
Principal Life Ins Co. VP-IT Life & Disability

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 730.74

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 06106-1464

Amount of Each Receipt this Period

38.46

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

102.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 91
	<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) William Workman	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-1465
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation VP-IT Life & Disability	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.74	

<b>B.</b>	Full Name (Last, First, Middle Initial) Larry D. Zimpleman	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-771
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 169.23
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3215.37	

<b>C.</b>	Full Name (Last, First, Middle Initial) Larry D. Zimpleman	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 711 High Street	<b>Transaction ID:</b> 06106-772
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 169.23
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principal Life Ins Co.	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3215.37	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>376.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>9218.96</b>

# 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)  
Principal Life Insurance Company Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cantor for Congress</p> <p>Mailing Address PO Box 17813</p> <p>City Richmond State VA Zip Code 23226</p> <p>Purpose of Disbursement Contribution Candidate Name Eric I. Cantor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31851-8965265154838</p> <p>Date of Disbursement 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Castle Campaign Fund</p> <p>Mailing Address PO Box 133</p> <p>City Wilmington State DE Zip Code 19899</p> <p>Purpose of Disbursement Contribution Candidate Name Michael N. Castle</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 58958-7768365740776</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Crowley for Congress</p> <p>Mailing Address 84-56 Grand Avenue</p> <p>City Elmhurst State NY Zip Code 11373</p> <p>Purpose of Disbursement Contribution Candidate Name Joseph Crowley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31851-4276086688041</p> <p>Date of Disbursement 09 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>

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

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 91

<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)  
Principal Life Insurance Company Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Jim Clyburn <hr/> Mailing Address PO Box 12567 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name James E. Clyburn <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SC District: 06	Transaction ID: 31851-8179590106010 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2008
	Amount of Each Disbursement this Period 1500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Mark Warner <hr/> Mailing Address 1029 North Royal Street 2nd Fl <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Mark R. Warner <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District:	Transaction ID: 58958-7481195330619 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2008
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kendrick Meek Campaign for Congress <hr/> Mailing Address 111 NW 183rd Street Suite 325 <hr/> City Miami State FL Zip Code 33169 <hr/> Purpose of Disbursement Contribution <input type="checkbox"/> 011 Candidate Name Kendrick B. Meek <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 17	Transaction ID: 58958-0500451922416 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 89 / 91

<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)  
Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Tim Johnson for South Dakota Inc

Transaction ID: 31851-9639398455619

Date of Disbursement

Mailing Address PO Box 1536

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	8		2	0	0	8

City State Zip Code  
Sioux Falls SD 57101

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Contribution

011
-----

Category/  
Type

Candidate Name  
Tim Johnson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: SD District:

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

1000.00
---------

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

10500.00
----------

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 90 / 91

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Principal Life Insurance Company Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Matt McCoy Mailing Address 5016 Pleasant Street City Des Moines State IA Zip Code 50312 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 58958-8918878436088 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) McCarthy for State Representative Mailing Address 5220 SE 31st Court City Des Moines State IA Zip Code 50320 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 58958-0990411639213 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Wieck for Iowa Senate Mailing Address 4362 Old Lakeport Road City Sioux City State IA Zip Code 51106 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 58958-4061700701713 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

Image# 28992622349

Form/Schedule: **F3X**

Transaction ID:

\*\*\*\*\*