

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
 Check if different than previously reported. (ACC)
Des Moines IA 50392-0220

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 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 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 01 14 2009

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
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

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	20112.24									
(c) Total Receipts (from Line 19)	24793.72	191985.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	44905.96	218310.96								
7. Total Disbursements (from Line 31)	9000.00	182405.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	35905.96	35905.96								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

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	18372.94	102971.31
(i) Itemized (use Schedule A)	6420.78	89014.48
(ii) Unitemized	24793.72	191985.79
(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)	24793.72	191985.79
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))	24793.72	191985.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	24793.72	191985.79

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.....	0.00	55.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	55.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	129250.00
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.....	9000.00	53100.00
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))..	9000.00	182405.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	182405.00

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	24793.72	191985.79
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24793.72	191985.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	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)	0.00	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 / 172
(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 E. Aschenbrenner

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 Ins & Fin Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 6 / 2 0 0 8

Transaction ID: 2ecd703f638bd8d431b

Amount of Each Receipt this Period
3300.00

B. Full Name (Last, First, Middle Initial)
Arthur J. Bacci

Mailing Address Wilmington Retirement Serv
1013 Centre Road

City State Zip Code
Wilmington DE 19805-1265

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

Name of Employer Principal Trust Company Occupation VP-CEO/President Ptc & Bank

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.56

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

Transaction ID: 311231-26

Amount of Each Receipt this Period
15.38

C. Full Name (Last, First, Middle Initial)
Arthur J. Bacci

Mailing Address Wilmington Retirement Serv
1013 Centre Road

City State Zip Code
Wilmington DE 19805-1265

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

Name of Employer Principal Trust Company Occupation VP-CEO/President Ptc & Bank

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 352.56

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

Transaction ID: 09019-51

Amount of Each Receipt this Period
15.38

SUBTOTAL of Receipts This Page (optional) ► **3330.76**

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 7 / 172
(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) Arthur J. Bacci		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address Wilmington Retirement Serv 1013 Centre Road		Transaction ID: 09019-52
City Wilmington	State DE	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer Principal Trust Company	Occupation VP-CEO/President Ptc & Bank	Aggregate Year-to-Date 352.56
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

B.

Full Name (Last, First, Middle Initial) Craig L. Bassett		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-111
City Des Moines	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.74
Name of Employer Principal Life Ins Co.	Occupation VP & Treasurer	Aggregate Year-to-Date 714.04
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

C.

Full Name (Last, First, Middle Initial) Craig L. Bassett		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-219
City Des Moines	State IA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.74
Name of Employer Principal Life Ins Co.	Occupation VP & Treasurer	Aggregate Year-to-Date 714.04
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

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: (check only one)	PAGE 8 / 172
	<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) Craig L. Bassett	Date of Receipt MM / DD / YYYY 12 / 26 / 2008
	Mailing Address 711 High Street	Transaction ID: 09019-220
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 31.74
	FEC ID number of contributing federal political committee. C	
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 ▼ 714.04	

B.	Full Name (Last, First, Middle Initial) Michael J. Beer	Date of Receipt MM / DD / YYYY 11 / 28 / 2008
	Mailing Address 711 High Street	Transaction ID: 311231-473
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co.	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	

C.	Full Name (Last, First, Middle Initial) Michael J. Beer	Date of Receipt MM / DD / YYYY 12 / 12 / 2008
	Mailing Address 711 High Street	Transaction ID: 09019-943
	City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period 35.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co.	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	

SUBTOTAL of Receipts This Page (optional)	101.74
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 9 / 172
(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>A. 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. C</p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation VP-Mutual Funds & 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 ▼ 910.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 8</p> <p>Transaction ID: 09019-944</p> <p>Amount of Each Receipt this Period 35.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Darin L. Bennigsdorf</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. C</p> <p>Name of Employer Principal Life Ins Co.</p> <p>Occupation Asst Mng Dir-Special Servicing</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 200.20</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 8</p> <p>Transaction ID: 09019-266</p> <p>Amount of Each Receipt this Period 7.70</p>
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<p>C. 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. C</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 ▼ 1014.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 311231-411</p> <p>Amount of Each Receipt this Period 39.00</p>
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SUBTOTAL of Receipts This Page (optional)	81.70
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 / 172

(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)
Louise A. Billmeyer

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 - Health IT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1014.00

Date of Receipt

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

Transaction ID: 09019-819

Amount of Each Receipt this Period
39.00

B.

Full Name (Last, First, Middle Initial)
Louise A. Billmeyer

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 - Health IT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1014.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-820

Amount of Each Receipt this Period
39.00

C.

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 Occupation
Principal Life Ins Co. Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 309.40

Date of Receipt

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

Transaction ID: 311231-535

Amount of Each Receipt this Period
11.90

SUBTOTAL of Receipts This Page (optional) ▶

89.90

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 11 / 172
(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)
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 ▼ 309.40

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

Transaction ID: 09019-1067

Amount of Each Receipt this Period
11.90

B. 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 ▼ 309.40

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1068

Amount of Each Receipt this Period
11.90

C. Full Name (Last, First, Middle Initial)
Debra K. Blackman

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-Operational Excellence

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-310

Amount of Each Receipt this Period
8.00

SUBTOTAL of Receipts This Page (optional) ► **31.80**

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 12 / 172

(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)
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 ▼ 520.00

Date of Receipt MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-361

Amount of Each Receipt this Period 20.00

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 ▼ 520.00

Date of Receipt MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-719

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 ▼ 520.00

Date of Receipt MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-720

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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 13 / 172
(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>A. Full Name (Last, First, Middle Initial) Patti R. Blumer</p> <p>Mailing Address 1350 I Street Northwest Suite 880</p> <p>City State Zip Code Washington D.C. DC 20005-7207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Director, Federal Gov Rel-Dc</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1196.80</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 1</td> <td></td> <td style="text-align: center;">2 8</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: 311231-525</p> <p>Amount of Each Receipt this Period 48.40</p>	M M	/	D D	/	Y Y Y Y	1 1		2 8		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 1		2 8		2 0 0 8							

<p>B. Full Name (Last, First, Middle Initial) Patti R. Blumer</p> <p>Mailing Address 1350 I Street Northwest Suite 880</p> <p>City State Zip Code Washington D.C. DC 20005-7207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Director, Federal Gov Rel-Dc</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1196.80</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2</td> <td></td> <td style="text-align: center;">1 2</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: 09019-1047</p> <p>Amount of Each Receipt this Period 48.40</p>	M M	/	D D	/	Y Y Y Y	1 2		1 2		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 2		1 2		2 0 0 8							

<p>C. Full Name (Last, First, Middle Initial) Patti R. Blumer</p> <p>Mailing Address 1350 I Street Northwest Suite 880</p> <p>City State Zip Code Washington D.C. DC 20005-7207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Director, Federal Gov Rel-Dc</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1196.80</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M</td> <td style="text-align: center;">/</td> <td style="text-align: center;">D D</td> <td style="text-align: center;">/</td> <td style="text-align: center;">Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 2</td> <td></td> <td style="text-align: center;">2 6</td> <td></td> <td style="text-align: center;">2 0 0 8</td> </tr> </table> </p> <p>Transaction ID: 09019-1048</p> <p>Amount of Each Receipt this Period 48.40</p>	M M	/	D D	/	Y Y Y Y	1 2		2 6		2 0 0 8
M M	/	D D	/	Y Y Y Y							
1 2		2 6		2 0 0 8							

SUBTOTAL of Receipts This Page (optional)	145.20
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 14 / 172
(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)
Dexter R. Bodin

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-Network Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-340

Amount of Each Receipt this Period
7.83

B.

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 ▼ 1300.00

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

Transaction ID: 311231-94

Amount of Each Receipt this Period
50.00

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 ▼ 1300.00

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

Transaction ID: 09019-185

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **107.83**

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 / 172
(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. 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 ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-186

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Jonette R. Brandsgard

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 Medical Management Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-314

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Jonette R. Brandsgard

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 Medical Management Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-625

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **70.00**

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 16 / 172

(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)

Jonette R. Brandsgard

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. Medical Management Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-626

Amount of Each Receipt this Period

10.00

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 760.02

Date of Receipt

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

Transaction ID: 311231-140

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 760.02

Date of Receipt

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

Transaction ID: 09019-277

Amount of Each Receipt this Period

31.74

SUBTOTAL of Receipts This Page (optional)

73.48

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 17 / 172
	(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) David J. Brown		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 1 2 / 2 6 / 2 0 0 8
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Principal Life Ins Co.		Occupation VP,Product &Distrib Compliance	Transaction ID: 09019-278
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 760.02	<input type="text"/> 31.74

B.	Full Name (Last, First, Middle Initial) Jill R. Brown		Date of Receipt
	Mailing Address 1100 Investment Boulevard		<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 1 1 / 2 8 / 2 0 0 8
	City	State	Zip Code
	El Dorado Hills	CA	95762-5710
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Principal Life Ins Co.		Occupation CFO-Principal Funds	Transaction ID: 311231-291
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 399.88	<input type="text"/> 15.38

C.	Full Name (Last, First, Middle Initial) Jill R. Brown		Date of Receipt
	Mailing Address 1100 Investment Boulevard		<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 1 2 / 1 2 / 2 0 0 8
	City	State	Zip Code
	El Dorado Hills	CA	95762-5710
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Principal Life Ins Co.		Occupation CFO-Principal Funds	Transaction ID: 09019-579
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 399.88	<input type="text"/> 15.38

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 62.50
TOTAL 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 18 / 172
(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) Jill R. Brown		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	6	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	2	6	/	2	0	0	8													
Mailing Address 1100 Investment Boulevard		Transaction ID: 09019-580																				
City El Dorado Hills	State CA	Zip Code 95762-5710																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>15.38</td></tr> </table>	15.38																			
15.38																						
Name of Employer Principal Life Ins Co.	Occupation CFO-Principal Funds																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>399.88</td></tr> </table>	399.88																				
399.88																						

B.

Full Name (Last, First, Middle Initial) Paul A. Brown		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	8	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	8	/	2	0	0	8													
Mailing Address 711 High Street		Transaction ID: 311231-526																				
City Des Moines	State IA	Zip Code 50309-2732																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>39.00</td></tr> </table>	39.00																			
39.00																						
Name of Employer Principal Life Ins Co.	Occupation VP- Institutional Mkt Segment																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1014.00</td></tr> </table>	1014.00																				
1014.00																						

C.

Full Name (Last, First, Middle Initial) Paul A. Brown		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	2	/	2	0	0	8													
Mailing Address 711 High Street		Transaction ID: 09019-1049																				
City Des Moines	State IA	Zip Code 50309-2732																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>39.00</td></tr> </table>	39.00																			
39.00																						
Name of Employer Principal Life Ins Co.	Occupation VP- Institutional Mkt Segment																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1014.00</td></tr> </table>	1014.00																				
1014.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"> <tr><td>93.38</td></tr> </table>	93.38
93.38		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

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

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

FOR LINE NUMBER: PAGE 19 / 172
(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)
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 ▼ 1014.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1050

Amount of Each Receipt this Period
39.00

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 ▼ 1300.00

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

Transaction ID: 311231-509

Amount of Each Receipt this Period
50.00

C. 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 ▼ 1300.00

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

Transaction ID: 09019-1015

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **139.00**

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 20 / 172
(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)
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 ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1016

Amount of Each Receipt this Period
50.00

B. 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 ▼ 750.10

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

Transaction ID: 311231-674

Amount of Each Receipt this Period
28.85

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 ▼ 750.10

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

Transaction ID: 09019-1345

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► 107.70

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 21 / 172
(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) Thomas L. Burnor		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 18101 Von Karman Avenue Suite 1170		Transaction ID: 09019-1346
City Irvine	State CA	Zip Code 92612-7169
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.10	

B.

Full Name (Last, First, Middle Initial) Gregory J. Burrows		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-227
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer Principal Life Ins Co.	Occupation Svp Retirement & Investor Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

C.

Full Name (Last, First, Middle Initial) Gregory J. Burrows		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-451
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 57.69
Name of Employer Principal Life Ins Co.	Occupation Svp Retirement & Investor Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

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: PAGE 22 / 172

(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 J. Burrows

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. Svp Retirement & Investor Svcs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1499.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-452

Amount of Each Receipt this Period

57.69

B.

Full Name (Last, First, Middle Initial)

Teresa M. Button

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) ▼ 390.00

Date of Receipt

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

Transaction ID: 311231-664

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Teresa M. Button

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) ▼ 390.00

Date of Receipt

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

Transaction ID: 09019-1325

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) ▶

87.69

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 / 172
(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)

Teresa M. Button

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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1326

Amount of Each Receipt this Period

15.00

B.

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 Occupation
Principal Life Ins Co. VP Group Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.10

Date of Receipt

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

Transaction ID: 311231-88

Amount of Each Receipt this Period

31.85

C.

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 Occupation
Principal Life Ins Co. VP Group Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 813.10

Date of Receipt

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

Transaction ID: 09019-173

Amount of Each Receipt this Period

31.85

SUBTOTAL of Receipts This Page (optional)

78.70

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 / 172

(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 ▼
813.10

Date of Receipt
M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-174

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 ▼
999.96

Date of Receipt
M M / D D / Y Y Y Y
11 / 28 / 2008

Transaction ID: 311231-511

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 ▼
999.96

Date of Receipt
M M / D D / Y Y Y Y
12 / 12 / 2008

Transaction ID: 09019-1019

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 25 / 172

(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)
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 ▼
999.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-1020

Amount of Each Receipt this Period
38.46

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 ▼
832.00

Date of Receipt

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

Transaction ID: 311231-392

Amount of Each Receipt this Period
32.00

C.

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 ▼
832.00

Date of Receipt

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

Transaction ID: 09019-781

Amount of Each Receipt this Period
32.00

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: PAGE 26 / 172

(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 Occupation
Principal Life Ins Co. VP Tax

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 832.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-782

Amount of Each Receipt this Period

32.00

B.

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 Occupation
Principal Life Ins Co. VP-Individual Investor Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.22

Date of Receipt

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

Transaction ID: 311231-35

Amount of Each Receipt this Period

38.47

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 Occupation
Principal Life Ins Co. VP-Individual Investor Svcs

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.22

Date of Receipt

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

Transaction ID: 09019-69

Amount of Each Receipt this Period

38.47

SUBTOTAL of Receipts This Page (optional)

108.94

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 172
(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) Barrie G. Christman		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-70
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer Principal Life Ins Co.	Occupation VP-Individual Investor Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.22	

B.

Full Name (Last, First, Middle Initial) Timothy J. Cleary		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 11100 Wayzata Boulevard, Suite 211 Principal Financial Group		Transaction ID: 311231-680
City Minnetonka	State MN	Zip Code 55305-5517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
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 ▼ 399.88	

C.

Full Name (Last, First, Middle Initial) Timothy J. Cleary		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 11100 Wayzata Boulevard, Suite 211 Principal Financial Group		Transaction ID: 09019-1357
City Minnetonka	State MN	Zip Code 55305-5517
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
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 ▼ 399.88	

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: PAGE 28 / 172
(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. 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 ▼ 399.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1358

Amount of Each Receipt this Period
15.38

B. Full Name (Last, First, Middle Initial)
Cindy M. Close

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 Service and Retention Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-99

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Cindy M. Close

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 Service and Retention Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-195

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 35.38

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 29 / 172
(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)
Cindy M. Close

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 Service and Retention Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-196

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Eileen M. Conroy

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-Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

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

Transaction ID: 311231-201

Amount of Each Receipt this Period
15.38

C.

Full Name (Last, First, Middle Initial)
Eileen M. Conroy

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-Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

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

Transaction ID: 09019-399

Amount of Each Receipt this Period
15.38

SUBTOTAL of Receipts This Page (optional) ► 40.76

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 30 / 172
(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)
Eileen M. Conroy

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-Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-400

Amount of Each Receipt this Period
15.38

B.

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 ▼ 406.00

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

Transaction ID: 311231-81

Amount of Each Receipt this Period
16.00

C.

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 ▼ 406.00

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

Transaction ID: 09019-159

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► **47.38**

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 31 / 172
(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)
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 ▼ 406.00

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-160
Amount of Each Receipt this Period 16.00

B. Full Name (Last, First, Middle Initial)
Martha P. Crist

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 ▼ 260.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-442
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Martha P. Crist

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 ▼ 260.00

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-881
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 36.00

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 / 172
(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)
Martha P. Crist

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 ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-882

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Martin L. Cropp

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-Investment Production

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.50

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

Transaction ID: 09019-887

Amount of Each Receipt this Period
8.25

C. Full Name (Last, First, Middle Initial)
Martin L. Cropp

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-Investment Production

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-888

Amount of Each Receipt this Period
8.25

SUBTOTAL of Receipts This Page (optional) ► 26.50

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 33 / 172

(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)

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 Occupation
Principal Life Ins Co. Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 390.00

Date of Receipt

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

Transaction ID: 311231-475

Amount of Each Receipt this Period

15.00

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 Occupation
Principal Life Ins Co. Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 390.00

Date of Receipt

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

Transaction ID: 09019-947

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 Occupation
Principal Life Ins Co. Counsel

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-948

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 34 / 172
(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 ▼ 390.00

Date of Receipt 11 / 28 / 2008

Transaction ID: 311231-13

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 ▼ 390.00

Date of Receipt 12 / 12 / 2008

Transaction ID: 09019-25

Amount of Each Receipt this Period 15.00

C.

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 ▼ 390.00

Date of Receipt 12 / 26 / 2008

Transaction ID: 09019-26

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 35 / 172
(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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-588

Amount of Each Receipt this Period
65.00

B.

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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1173

Amount of Each Receipt this Period
65.00

C.

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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1174

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **195.00**

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 36 / 172
(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) Michael J. Daugherty		Date of Receipt
	Mailing Address 6525 Chancellor Drive Cedar Falls Industrial Park		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cedar Falls	IA	50613-6957
	FEC ID number of contributing federal political committee. C		Transaction ID: 311231-476
Name of Employer Principal Life Ins Co.		Occupation AVP-Retirement & Investor Serv	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="260.00"/>	<input type="text" value="10.00"/>

B.	Full Name (Last, First, Middle Initial) Michael J. Daugherty		Date of Receipt
	Mailing Address 6525 Chancellor Drive Cedar Falls Industrial Park		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cedar Falls	IA	50613-6957
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-949
Name of Employer Principal Life Ins Co.		Occupation AVP-Retirement & Investor Serv	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="260.00"/>	<input type="text" value="10.00"/>

C.	Full Name (Last, First, Middle Initial) Michael J. Daugherty		Date of Receipt
	Mailing Address 6525 Chancellor Drive Cedar Falls Industrial Park		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Cedar Falls	IA	50613-6957
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-950
Name of Employer Principal Life Ins Co.		Occupation AVP-Retirement & Investor Serv	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="260.00"/>	<input type="text" value="10.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30.00"/>
TOTAL 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 37 / 172
(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)
Douglas S. Dornacker

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 ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-188

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Douglas S. Dornacker

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 ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-373

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Douglas S. Dornacker

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 ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-374

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 38 / 172

(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)

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 825.24

Date of Receipt

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

Transaction ID: 311231-214

Amount of Each Receipt this Period

31.74

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 825.24

Date of Receipt

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

Transaction ID: 09019-425

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

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 825.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-426

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 39 / 172
(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 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 ▼ 1423.80

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-683

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 ▼ 1423.80

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1363

Amount of Each Receipt this Period
63.46

C.

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 ▼ 1423.80

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1364

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **190.38**

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 40 / 172
(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)
Carrie D. Duvall

Mailing Address 6500 West Freeway
One Ridgmar Centre, Suite 555

City State Zip Code
Fort Worth TX 76116

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

Name of Employer Occupation
Recruiting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

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

Transaction ID: 311231-74

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Carrie D. Duvall

Mailing Address 6500 West Freeway
One Ridgmar Centre, Suite 555

City State Zip Code
Fort Worth TX 76116

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

Name of Employer Occupation
Recruiting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 09019-145

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Carrie D. Duvall

Mailing Address 6500 West Freeway
One Ridgmar Centre, Suite 555

City State Zip Code
Fort Worth TX 76116

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

Name of Employer Occupation
Recruiting Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 09019-146

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 41 / 172
(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)
Gregory B. Elming
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 & Controller
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1664.00
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-228
Amount of Each Receipt this Period 64.00

B. Full Name (Last, First, Middle Initial)
Gregory B. Elming
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 & Controller
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1664.00
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-453
Amount of Each Receipt this Period 64.00

C. Full Name (Last, First, Middle Initial)
Gregory B. Elming
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 & Controller
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1664.00
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-454
Amount of Each Receipt this Period 64.00

SUBTOTAL of Receipts This Page (optional) ► 192.00
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 42 / 172
(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)
Ralph C. Eucher

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 HR, Corp Svcs & Ris

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-549

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Ralph C. Eucher

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 HR, Corp Svcs & Ris

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1095

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Ralph C. Eucher

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 HR, Corp Svcs & Ris

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1096

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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 43 / 172

(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)
Nora M. Everett

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. Svp Retirement & Investor Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1163.46

Date of Receipt

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

Transaction ID: 311231-513

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)
Nora M. Everett

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. Svp Retirement & Investor Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1163.46

Date of Receipt

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

Transaction ID: 09019-1023

Amount of Each Receipt this Period

45.00

C.

Full Name (Last, First, Middle Initial)
Nora M. Everett

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. Svp Retirement & Investor Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1163.46

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1024

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)

135.00

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 44 / 172
(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)
Todd E. Everett

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-Head of Re Fixed Inc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1380

Amount of Each Receipt this Period
8.00

B. 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 ▼ 832.00

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

Transaction ID: 311231-189

Amount of Each Receipt this Period
32.00

C. 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 ▼ 832.00

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

Transaction ID: 09019-375

Amount of Each Receipt this Period
32.00

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 45 / 172
(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 ▼ 832.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-376

Amount of Each Receipt this Period
32.00

B. Full Name (Last, First, Middle Initial)
James C. Fifield

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 ▼ 260.00

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

Transaction ID: 311231-241

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
James C. Fifield

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 ▼ 260.00

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

Transaction ID: 09019-479

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **52.00**

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 46 / 172

(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)
James C. Fifield

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. Assistant General Counsel

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-480

Amount of Each Receipt this Period

10.00

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 755.38

Date of Receipt

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

Transaction ID: 311231-478

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 755.38

Date of Receipt

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

Transaction ID: 09019-953

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

74.00

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 47 / 172
(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)
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 ▼ 755.38

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-954

Amount of Each Receipt this Period
32.00

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 ▼ 741.25

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

Transaction ID: 311231-268

Amount of Each Receipt this Period
28.85

C. 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 ▼ 741.25

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

Transaction ID: 09019-533

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► **89.70**

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 48 / 172
(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 ▼ 741.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-534

Amount of Each Receipt this Period
28.85

B.

Full Name (Last, First, Middle Initial)
Melita L. Frankford

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 IT-Quality Assurance Anlst Iii

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-470

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Melita L. Frankford

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 IT-Quality Assurance Anlst Iii

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-937

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 48.85

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 49 / 172
(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)
Melita L. Frankford
 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 IT-Quality Assurance Anlst Iii
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00
 Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-938
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Christopher P. Freese
 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 Actuary
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00
 Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-190
 Amount of Each Receipt this Period 8.00

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 ▼ 761.76
 Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-55
 Amount of Each Receipt this Period 31.74

SUBTOTAL of Receipts This Page (optional) ► 49.74
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 50 / 172
(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)
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 ▼ 761.76

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

Transaction ID: 09019-109

Amount of Each Receipt this Period
31.74

B.

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 ▼ 761.76

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-110

Amount of Each Receipt this Period
31.74

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 ▼ 499.98

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

Transaction ID: 311231-528

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ► **82.71**

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 / 172

(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)
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 Occupation
Principal Life Ins Co. AVP-Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.98

Date of Receipt

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

Transaction ID: 09019-1053

Amount of Each Receipt this Period

19.23

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 Occupation
Principal Life Ins Co. AVP-Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.98

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1054

Amount of Each Receipt this Period

19.23

C.

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: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

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

Transaction ID: 311231-76

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

58.46

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 52 / 172
(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)
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) ▼ 520.00

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

Transaction ID: 09019-149

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) ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-150

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) ▼ 2080.00

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

Transaction ID: 311231-480

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 53 / 172
(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)
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 ▼ 2080.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-957

Amount of Each Receipt this Period
80.00

B.

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 ▼ 2080.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-958

Amount of Each Receipt this Period
80.00

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 ▼ 3900.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-676

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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 54 / 172
(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)
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 ▼ 3900.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1349

Amount of Each Receipt this Period
150.00

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 ▼ 3900.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1350

Amount of Each Receipt this Period
150.00

C. 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 ▼ 1025.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-415

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 340.00

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 55 / 172
(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)
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 ▼ 1025.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-827

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 ▼ 1025.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-828

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 ▼ 832.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-645

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 56 / 172
(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)
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 Occupation
Principal Life Ins Co. Mng Dir-Real Estate Operation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1287

Amount of Each Receipt this Period
32.00

B. 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 Occupation
Principal Life Ins Co. Mng Dir-Real Estate Operation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1288

Amount of Each Receipt this Period
32.00

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 Occupation
Principal Life Ins Co. Sr Account Exec-Retirement Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-704

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **139.00**

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 57 / 172
(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)
Victoria I. Gray

Mailing Address 51 Germantown Court Suite 101
Principal Financial Group

City Cordova State TN Zip Code 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 ▼ 1950.00

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-1405
Amount of Each Receipt this Period 75.00

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

Mailing Address 51 Germantown Court Suite 101
Principal Financial Group

City Cordova State TN Zip Code 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 ▼ 1950.00

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1406
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Gregg R. Griesemer

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 Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-225
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 / 172
(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)
Gregg R. Griesemer

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 Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-447

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Gregg R. Griesemer

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 Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-448

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
J. B. Griswell

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 Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4999.80

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

Transaction ID: 311231-237

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **212.30**

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 / 172

(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)
J. B. Griswell

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. Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt

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

Transaction ID: 09019-471

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)
J. B. Griswell

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. Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-472

Amount of Each Receipt this Period

192.30

C.

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

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

City State Zip Code
Lombard IL 60148-5671

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 910.00

Date of Receipt

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

Transaction ID: 311231-191

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional) ▶

419.60

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

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

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

FOR LINE NUMBER: PAGE 60 / 172
(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 ▼ 910.00

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-379
Amount of Each Receipt this Period 35.00

B. 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 ▼ 910.00

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-380
Amount of Each Receipt this Period 35.00

C. Full Name (Last, First, Middle Initial)
Karen J. 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 Business Performance Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-335
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 80.00

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 61 / 172
(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)
Karen J. Halter

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 Business Performance Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-667

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Karen J. Halter

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 Business Performance Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-668

Amount of Each Receipt this Period
10.00

C.

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

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 Prinrei

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 781.76

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-522

Amount of Each Receipt this Period
31.74

SUBTOTAL of Receipts This Page (optional) ► 51.74

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 62 / 172
(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)
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 ▼ 781.76
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-1041
Amount of Each Receipt this Period 31.74

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 ▼ 781.76
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1042
Amount of Each Receipt this Period 31.74

C. Full Name (Last, First, Middle Initial)
Mark A. Hanrahan
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 Mng Dir-Cre
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-430
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 163.48
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 63 / 172

(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 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00
---	-------------------------------------

Date of Receipt

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

Transaction ID: 09019-857

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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-858

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth B. Happe

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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.66
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-402

Amount of Each Receipt this Period
8.00

SUBTOTAL of Receipts This Page (optional) ▶

208.00

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 64 / 172
(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)
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- Chief Admin Officer Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00
 Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-404
 Amount of Each Receipt this Period 35.00

B. 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- Chief Admin Officer Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00
 Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-805
 Amount of Each Receipt this Period 35.00

C. 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- Chief Admin Officer Health
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 880.00
 Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-806
 Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 105.00
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 65 / 172
(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)
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 ▼ 499.98

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-499

Amount of Each Receipt this Period
19.23

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 ▼ 499.98

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-995

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 ▼ 499.98

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-996

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ► 57.69

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 66 / 172
(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)
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 Occupation
Principal Life Ins Co. Nat'l Advanced Solution Specia

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.92

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

Transaction ID: 311231-542

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 Occupation
Principal Life Ins Co. Nat'l Advanced Solution Specia

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.92

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

Transaction ID: 09019-1081

Amount of Each Receipt this Period
11.92

C. 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 Occupation
Principal Life Ins Co. Nat'l Advanced Solution Specia

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.92

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1082

Amount of Each Receipt this Period
11.92

SUBTOTAL of Receipts This Page (optional) ► 35.76

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 67 / 172
(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)
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 ▼ 828.85

Date of Receipt: 11 / 28 / 2008
Transaction ID: 311231-97
Amount of Each Receipt this Period: 32.00

B. 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 ▼ 828.85

Date of Receipt: 12 / 12 / 2008
Transaction ID: 09019-191
Amount of Each Receipt this Period: 32.00

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 ▼ 828.85

Date of Receipt: 12 / 26 / 2008
Transaction ID: 09019-192
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 68 / 172

(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 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 Occupation
Principal Life Ins Co. National Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 468.00

Date of Receipt

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

Transaction ID: 311231-684

Amount of Each Receipt this Period

18.00

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 Occupation
Principal Life Ins Co. National Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 468.00

Date of Receipt

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

Transaction ID: 09019-1365

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 Occupation
Principal Life Ins Co. National Sales Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1366

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

54.00

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 69 / 172

(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)

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 Occupation
Principal Life Ins Co. Chief Financial Officer-Pgi

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 641.56

Date of Receipt

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

Transaction ID: 311231-292

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 Occupation
Principal Life Ins Co. Chief Financial Officer-Pgi

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 641.56

Date of Receipt

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

Transaction ID: 09019-581

Amount of Each Receipt this Period

31.74

C.

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 Occupation
Principal Life Ins Co. Chief Financial Officer-Pgi

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 641.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-582

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 70 / 172
(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)
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 ▼ 1624.96

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

Transaction ID: 311231-323

Amount of Each Receipt this Period
63.46

B.

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 ▼ 1624.96

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

Transaction ID: 09019-643

Amount of Each Receipt this Period
63.46

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 ▼ 1624.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-644

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► **190.38**

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 71 / 172

(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) Rebecca L. Hoffman		Date of Receipt MM / DD / YYYY 11 / 28 / 2008		
	Mailing Address 690 Berkmar Circle		Transaction ID: 311231-557		
	City Charlottesville	State VA	Zip Code 22901-1464	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Director- Consulting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

B.	Full Name (Last, First, Middle Initial) Rebecca L. Hoffman		Date of Receipt MM / DD / YYYY 12 / 12 / 2008		
	Mailing Address 690 Berkmar Circle		Transaction ID: 09019-1111		
	City Charlottesville	State VA	Zip Code 22901-1464	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Director- Consulting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

C.	Full Name (Last, First, Middle Initial) Rebecca L. Hoffman		Date of Receipt MM / DD / YYYY 12 / 26 / 2008		
	Mailing Address 690 Berkmar Circle		Transaction ID: 09019-1112		
	City Charlottesville	State VA	Zip Code 22901-1464	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Director- Consulting			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

SUBTOTAL of Receipts This Page (optional)

30.00

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 72 / 172
(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>A. Full Name (Last, First, Middle Initial) Roger D. Holton</p> <p>Mailing Address 7077 Bonneval Road Suite 380</p> <p>City State Zip Code Jacksonville FL 32216-6055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Managing Director-Unit</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 28 / 2008</p> <p>Transaction ID: 311231-585</p> <p>Amount of Each Receipt this Period 15.00</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) Roger D. Holton</p> <p>Mailing Address 7077 Bonneval Road Suite 380</p> <p>City State Zip Code Jacksonville FL 32216-6055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Managing Director-Unit</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 15 / 2008</p> <p>Transaction ID: 09019-1167</p> <p>Amount of Each Receipt this Period 15.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Roger D. Holton</p> <p>Mailing Address 7077 Bonneval Road Suite 380</p> <p>City State Zip Code Jacksonville FL 32216-6055</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Managing Director-Unit</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 31 / 2008</p> <p>Transaction ID: 09019-1168</p> <p>Amount of Each Receipt this Period 15.00</p>
---	---

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 73 / 172
(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 ▼ 2844.92

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

Transaction ID: 311231-124

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 ▼ 2844.92

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

Transaction ID: 09019-245

Amount of Each Receipt this Period
117.00

C.

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 ▼ 2844.92

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-246

Amount of Each Receipt this Period
117.00

SUBTOTAL of Receipts This Page (optional) ► **351.00**

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 74 / 172
(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) Raymond N. Ianni		Date of Receipt MM / DD / YYYY 11 / 25 / 2008
Mailing Address 107 Thomas Pointe Circle		Transaction ID: 39950c582cf4cc17504
City Wilmington	State DE	Zip Code 19808-1368
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Life Ins Co.	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

B.

Full Name (Last, First, Middle Initial) Raymond N. Ianni		Date of Receipt MM / DD / YYYY 12 / 29 / 2008
Mailing Address 107 Thomas Pointe Circle		Transaction ID: 5ba93cb66f2d5adaa26
City Wilmington	State DE	Zip Code 19808-1368
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Life Ins Co.	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

C.

Full Name (Last, First, Middle Initial) Bradley G. Jensen		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-48
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.74
Name of Employer Principal Life Ins Co.	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.24	

SUBTOTAL of Receipts This Page (optional)	▶	81.74
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 75 / 172

(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		Date of Receipt
	Mailing Address 711 High Street		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-95
Name of Employer Principal Life Ins Co.		Occupation VP-Chief Financial Officer	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="825.24"/>	<input type="text" value="31.74"/>

B.	Full Name (Last, First, Middle Initial) Bradley G. Jensen		Date of Receipt
	Mailing Address 711 High Street		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-96
Name of Employer Principal Life Ins Co.		Occupation VP-Chief Financial Officer	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="825.24"/>	<input type="text" value="31.74"/>

C.	Full Name (Last, First, Middle Initial) Betsy R. Jepsen		Date of Receipt
	Mailing Address 6200 Park Avenue		<input type="text" value="12"/> / <input type="text" value="26"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50321-1270
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-76
Name of Employer Principal Life Ins Co.		Occupation Dir-Field Development	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="208.00"/>	<input type="text" value="8.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="71.48"/>
TOTAL 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 / 172
(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) Richard C. Johnson		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		2	8		2	0	0	8													
Mailing Address 711 High Street		Transaction ID: 311231-570																				
City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>12.00</td></tr></table>		12.00																			
12.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer Principal Life Ins Co.	Occupation Dir Idi Oper-New & Exist Bus																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>288.00</td></tr></table>		288.00																			
288.00																						

B.

Full Name (Last, First, Middle Initial) Richard C. Johnson		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	2		2	0	0	8													
Mailing Address 711 High Street		Transaction ID: 09019-1137																				
City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>12.00</td></tr></table>		12.00																			
12.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer Principal Life Ins Co.	Occupation Dir Idi Oper-New & Exist Bus																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>288.00</td></tr></table>		288.00																			
288.00																						

C.

Full Name (Last, First, Middle Initial) Richard C. Johnson		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		2	6		2	0	0	8													
Mailing Address 711 High Street		Transaction ID: 09019-1138																				
City State Zip Code Des Moines IA 50309-2732	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>12.00</td></tr></table>		12.00																			
12.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer Principal Life Ins Co.	Occupation Dir Idi Oper-New & Exist Bus																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>288.00</td></tr></table>		288.00																			
288.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>36.00</td></tr></table>	36.00
36.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 172
(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>A. Full Name (Last, First, Middle Initial) Roman E. Kalpas</p> <p>Mailing Address Wilmington Retirement Serv 1013 Centre Road</p> <p>City Wilmington State DE Zip Code 19805-1265</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Principal Trust Company Occupation IT Application Analyst-Sr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: 311231-587</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">10.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	8	/	2	0	0	8		10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	2	8	/	2	0	0	8														
	10.00																						

<p>B. Full Name (Last, First, Middle Initial) Roman E. Kalpas</p> <p>Mailing Address Wilmington Retirement Serv 1013 Centre Road</p> <p>City Wilmington State DE Zip Code 19805-1265</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Principal Trust Company Occupation IT Application Analyst-Sr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: 09019-1171</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">10.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	0	8		10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	1	2	/	2	0	0	8														
	10.00																						

<p>C. Full Name (Last, First, Middle Initial) Roman E. Kalpas</p> <p>Mailing Address Wilmington Retirement Serv 1013 Centre Road</p> <p>City Wilmington State DE Zip Code 19805-1265</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Principal Trust Company Occupation IT Application Analyst-Sr</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 230.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: 09019-1172</p> <p>Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td style="width: 20%;">10.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	2	6	/	2	0	0	8		10.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	2	6	/	2	0	0	8														
	10.00																						

SUBTOTAL of Receipts This Page (optional)	30.00
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 78 / 172
(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)
Patrick J. Kane

Mailing Address 201 Jones Road
2nd Floor, Prinicpal Financial Grp

City Waltham State MA Zip Code 24511-605

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

Name of Employer Principal Life Ins Co. Occupation Reg VP - Life Brokerage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-523
Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Patrick J. Kane

Mailing Address 201 Jones Road
2nd Floor, Prinicpal Financial Grp

City Waltham State MA Zip Code 24511-605

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

Name of Employer Principal Life Ins Co. Occupation Reg VP - Life Brokerage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2008
Transaction ID: 09019-1043
Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Patrick J. Kane

Mailing Address 201 Jones Road
2nd Floor, Prinicpal Financial Grp

City Waltham State MA Zip Code 24511-605

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

Name of Employer Principal Life Ins Co. Occupation Reg VP - Life Brokerage

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2008
Transaction ID: 09019-1044
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 79 / 172
(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) Clifford P. Karthaus		Date of Receipt MM / DD / YYYY 11 / 25 / 2008
Mailing Address 19407 Camden Avenue		Transaction ID: a26a485ad4033d3b1ac
City Elkhorn	State NE	Zip Code 68022-1124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Principal Life Ins Co.	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

B.

Full Name (Last, First, Middle Initial) Clifford P. Karthaus		Date of Receipt MM / DD / YYYY 12 / 29 / 2008
Mailing Address 19407 Camden Avenue		Transaction ID: 58468f2396a98c2b5a1
City Elkhorn	State NE	Zip Code 68022-1124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Principal Life Ins Co.	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

C.

Full Name (Last, First, Middle Initial) Jill E. Kempkes		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High St		Transaction ID: 311231-293
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.75
Name of Employer Principal Life Ins Co.	Occupation Sr Adm - Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional)	▶	119.75
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 / 172
(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)
Jill E. Kempkes

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: Sr Adm - Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 12 / 2008
Transaction ID: 09019-583
Amount of Each Receipt this Period: 9.75

B. Full Name (Last, First, Middle Initial)
Jill E. Kempkes

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: Sr Adm - Govt Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt: 12 / 26 / 2008
Transaction ID: 09019-584
Amount of Each Receipt this Period: 9.75

C. Full Name (Last, First, Middle Initial)
Mark A. Kinback

Mailing Address 405 Grove Street

City State Zip Code
Worcester MA 01605-1270

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 11 / 28 / 2008
Transaction ID: 311231-432
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 29.50

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 81 / 172
(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)
Mark A. Kinback

Mailing Address 405 Grove Street

City Worcester State MA Zip Code 01605-1270

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-861
 Amount of Each Receipt this Period 10.00

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

Mailing Address 405 Grove Street

City Worcester State MA Zip Code 01605-1270

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-862
 Amount of Each Receipt this Period 10.00

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

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 VP-National Service Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 936.98

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-500
 Amount of Each Receipt this Period 36.00

SUBTOTAL of Receipts This Page (optional) ► 56.00

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 82 / 172
(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)
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 Occupation
Principal Life Ins Co. VP-National Service Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 936.98

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-997

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 Occupation
Principal Life Ins Co. VP-National Service Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 936.98

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-998

Amount of Each Receipt this Period
36.00

C.

Full Name (Last, First, Middle Initial)
Kara M. Kohler-Hoogensen

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. Strategy Director-Prin Funds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-332

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **82.00**

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 83 / 172

(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)
Kara M. Kohler-Hoogensen

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. Strategy Director-Prin Funds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt M M / D D / Y Y Y Y
12 / 12 / 2008

Transaction ID: 09019-661

Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Kara M. Kohler-Hoogensen

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. Strategy Director-Prin Funds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-662

Amount of Each Receipt this Period 10.00

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 Occupation
Principal Life Ins Co. Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt M M / D D / Y Y Y Y
11 / 28 / 2008

Transaction ID: 311231-113

Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional) 31.00

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 84 / 172
(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) Curtis S. Krause		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-223
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer Principal Life Ins Co.	Occupation Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

B.

Full Name (Last, First, Middle Initial) Curtis S. Krause		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-224
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer Principal Life Ins Co.	Occupation Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.00	

C.

Full Name (Last, First, Middle Initial) Ellen Z. Lamale		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-206
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Principal Life Ins Co.	Occupation Svp & Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1820.00	

SUBTOTAL of Receipts This Page (optional)	92.00
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 85 / 172
(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)
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 ▼ 1820.00
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-409
Amount of Each Receipt this Period 70.00

B. 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 ▼ 1820.00
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-410
Amount of Each Receipt this Period 70.00

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 ▼ 399.88
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-41
Amount of Each Receipt this Period 15.38

SUBTOTAL of Receipts This Page (optional) ► 155.38
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 86 / 172
(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)
Blaine W. Laverick

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 VP-Executive Benefit Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-81
 Amount of Each Receipt this Period 15.38

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

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 VP-Executive Benefit Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-82
 Amount of Each Receipt this Period 15.38

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

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 & Chief Inv Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1430.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-326
 Amount of Each Receipt this Period 55.00

SUBTOTAL of Receipts This Page (optional) ► 85.76

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 87 / 172
(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

<p>A. Full Name (Last, First, Middle Initial) Julia M. Lawler-Johnson</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. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp & Chief Inv Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1430.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2008</p> <p>Transaction ID: 09019-649</p> <p>Amount of Each Receipt this Period 55.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Julia M. Lawler-Johnson</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. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp & Chief Inv Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1430.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2008</p> <p>Transaction ID: 09019-650</p> <p>Amount of Each Receipt this Period 55.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Richard C. Lawson</p> <p>Mailing Address 1350 I Street Northwest Suite 880</p> <p>City State Zip Code Washington D.C. DC 20005-7207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: VP-Federal Govt Relations</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 999.96</p>	<p>Date of Receipt M M / D D / Y Y Y Y 11 / 28 / 2008</p> <p>Transaction ID: 311231-571</p> <p>Amount of Each Receipt this Period 38.46</p>
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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: PAGE 88 / 172
(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)
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 ▼ 999.96

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

Transaction ID: 09019-1139

Amount of Each Receipt this Period
38.46

B. 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 ▼ 999.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1140

Amount of Each Receipt this Period
38.46

C. Full Name (Last, First, Middle Initial)
Scott P. Leiberton

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-Product Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

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

Transaction ID: 311231-611

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **96.92**

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 89 / 172
(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)
Scott P. Leiberton
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-Product Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-1219
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Scott P. Leiberton
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-Product Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1220
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Brayton T. Li
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 Sr Managing Dir
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.10
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-50
Amount of Each Receipt this Period 8.85

SUBTOTAL of Receipts This Page (optional) ► 48.85
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 90 / 172
(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)
Brayton T. Li

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 Sr Managing Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.10

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

Transaction ID: 09019-99

Amount of Each Receipt this Period
8.85

B. Full Name (Last, First, Middle Initial)
Brayton T. Li

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 Sr Managing Dir

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.10

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-100

Amount of Each Receipt this Period
8.85

C. Full Name (Last, First, Middle Initial)
Terrance J. Lillis

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 Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

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

Transaction ID: 311231-667

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► **57.70**

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 91 / 172
(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>A. 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. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp & 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 ▼ 1040.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 12 / 2008</p> <p>Transaction ID: 09019-1331</p> <p>Amount of Each Receipt this Period 40.00</p>
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<p>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. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Svp & 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 ▼ 1040.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 26 / 2008</p> <p>Transaction ID: 09019-1332</p> <p>Amount of Each Receipt this Period 40.00</p>
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<p>C. 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. C</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 ▼ 650.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 28 / 2008</p> <p>Transaction ID: 311231-229</p> <p>Amount of Each Receipt this Period 25.00</p>
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SUBTOTAL of Receipts This Page (optional)	105.00
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 92 / 172
(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)
Gregory A. Linde
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 VP-Individual Life Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-455
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Gregory A. Linde
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 VP-Individual Life Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-456
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Dennis J. Long
Mailing Address 1025 E South River Street
City Appleton State WI Zip Code 54915-2225
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Life Ins Co. Occupation Vice President- Pcg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 999.96
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-167
Amount of Each Receipt this Period 38.46

SUBTOTAL of Receipts This Page (optional) ► 88.46
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 93 / 172
(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)
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 Principal Life Ins Co. Occupation Vice President- Pcg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-331

Amount of Each Receipt this Period
38.46

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 Principal Life Ins Co. Occupation Vice President- Pcg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-332

Amount of Each Receipt this Period
38.46

C. 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 ▼ 390.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-163

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **91.92**

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 94 / 172
(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)
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 ▼ 390.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-323

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 ▼ 390.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-324

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 ▼ 390.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-319

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 95 / 172
(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>A. Full Name (Last, First, Middle Initial) Joseph E. Marx</p> <p>Mailing Address 5500 Main Street Principal Financial Group</p> <p>City State Zip Code Williamsville NY 14221</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Principal Life Ins Co. VP Consulting</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 12 / 2008</p> <p>Transaction ID: 09019-635</p> <p>Amount of Each Receipt this Period 15.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Joseph E. Marx</p> <p>Mailing Address 5500 Main Street Principal Financial Group</p> <p>City State Zip Code Williamsville NY 14221</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Principal Life Ins Co. VP Consulting</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 26 / 2008</p> <p>Transaction ID: 09019-636</p> <p>Amount of Each Receipt this Period 15.00</p>
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<p>C. Full Name (Last, First, Middle Initial) David G. Matlage</p> <p>Mailing Address 2603 Augusta Suite 1350</p> <p>City State Zip Code Houston TX 77057-5797</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Principal Life Ins Co. VP of Sales - Group Benefits</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 260.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 28 / 2008</p> <p>Transaction ID: 311231-142</p> <p>Amount of Each Receipt this Period 10.00</p>
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SUBTOTAL of Receipts This Page (optional)	40.00
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 96 / 172
(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) David G. Matlage		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 2603 Augusta Suite 1350		Transaction ID: 09019-281
City Houston	State TX	Zip Code 77057-5797
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Group Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) David G. Matlage		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 2603 Augusta Suite 1350		Transaction ID: 09019-282
City Houston	State TX	Zip Code 77057-5797
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Group Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Chris L. Mayer		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-89
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		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 ▼ 832.00	

SUBTOTAL of Receipts This Page (optional)	52.00
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 97 / 172
(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 L. Mayer

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 Defined Benefit & Ret Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

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

Transaction ID: 09019-175

Amount of Each Receipt this Period
32.00

B.

Full Name (Last, First, Middle Initial)
Chris L. Mayer

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 Defined Benefit & Ret Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-176

Amount of Each Receipt this Period
32.00

C.

Full Name (Last, First, Middle Initial)
Joseph W. McCarty

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-Annuity Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-320

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **74.00**

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 98 / 172
(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)
Joseph W. McCarty
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-Annuity Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008
Transaction ID: 09019-637
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Joseph W. McCarty
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-Annuity Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008
Transaction ID: 09019-638
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
James P. McCaughan
Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

Name of Employer Principal Life Ins Co. Occupation President Global Asset Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008
Transaction ID: 311231-245
Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ► 212.30

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 99 / 172

(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)
James P. McCaughan

Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

Name of Employer Occupation
Principal Life Ins Co. President Global Asset Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt

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

Transaction ID: 09019-487

Amount of Each Receipt this Period

192.30

B.

Full Name (Last, First, Middle Initial)
James P. McCaughan

Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

Name of Employer Occupation
Principal Life Ins Co. President Global Asset Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4999.80

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-488

Amount of Each Receipt this Period

192.30

C.

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

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. VP-Managing Dir, Ris Distrib

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

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

Transaction ID: 311231-127

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)

424.60

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 172
(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. McGee

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. VP-Managing Dir, Ris Distrib

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

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

Transaction ID: 09019-251

Amount of Each Receipt this Period

40.00

B.

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

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. VP-Managing Dir, Ris Distrib

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1040.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-252

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Patrick J. McKay

Mailing Address 754 Revere Road

City State Zip Code
Glen Ellyn IL 60137-5567

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

Name of Employer Occupation
Principal Life Ins Co. Investment Specialist

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt

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

Transaction ID: 311231-524

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

90.00

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 101 / 172
	<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

A.	Full Name (Last, First, Middle Initial) Patrick J. McKay		Date of Receipt MM / DD / YYYY 12 / 12 / 2008		
	Mailing Address 754 Revere Road		Transaction ID: 09019-1045		
	City Glen Ellyn	State IL	Zip Code 60137-5567	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Investment Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

B.	Full Name (Last, First, Middle Initial) Patrick J. McKay		Date of Receipt MM / DD / YYYY 12 / 26 / 2008		
	Mailing Address 754 Revere Road		Transaction ID: 09019-1046		
	City Glen Ellyn	State IL	Zip Code 60137-5567	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Investment Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

C.	Full Name (Last, First, Middle Initial) Barbara A. McKenzie		Date of Receipt MM / DD / YYYY 11 / 28 / 2008		
	Mailing Address 711 High Street		Transaction ID: 311231-33		
	City Des Moines	State IA	Zip Code 50309-2732	Amount of Each Receipt this Period 32.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 832.00			

SUBTOTAL of Receipts This Page (optional)	▶	52.00
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 102 / 172
(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)
Barbara A. McKenzie

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 Operations Officer-Pgi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-65

Amount of Each Receipt this Period
32.00

B. Full Name (Last, First, Middle Initial)
Barbara A. McKenzie

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 Operations Officer-Pgi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-66

Amount of Each Receipt this Period
32.00

C. Full Name (Last, First, Middle Initial)
Arthur M. McMahon

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-Product Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 620.62

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-27

Amount of Each Receipt this Period
23.87

SUBTOTAL of Receipts This Page (optional) ► **87.87**

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 103 / 172

(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)
Arthur M. McMahon

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-Product Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620.62

Date of Receipt M M / D D / Y Y Y Y
12 / 12 / 2008

Transaction ID: 09019-53

Amount of Each Receipt this Period 23.87

B.

Full Name (Last, First, Middle Initial)
Arthur M. McMahon

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-Product Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 620.62

Date of Receipt M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-54

Amount of Each Receipt this Period 23.87

C.

Full Name (Last, First, Middle Initial)
Paul W. Meeks

Mailing Address 191 North Wacker Drive
Level 16

City State Zip Code
Chicago IL 60606-1615

FEC ID number of contributing federal political committee. C

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt M M / D D / Y Y Y Y
11 / 28 / 2008

Transaction ID: 311231-531

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) 57.74

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 104 / 172
(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)
Paul W. Meeks

Mailing Address 191 North Wacker Drive
Level 16

City State Zip Code
Chicago IL 60606-1615

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1059

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Paul W. Meeks

Mailing Address 191 North Wacker Drive
Level 16

City State Zip Code
Chicago IL 60606-1615

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1060

Amount of Each Receipt this Period
10.00

C.

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 ▼ 650.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-625

Amount of Each Receipt this Period
25.00

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 105 / 172
(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 ▼ 650.00

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

Transaction ID: 09019-1247

Amount of Each Receipt this Period
25.00

B.

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 ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1248

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Kevin L. Meinders

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 - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-716

Amount of Each Receipt this Period
8.00

SUBTOTAL of Receipts This Page (optional) ► 58.00

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 106 / 172
	<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 C. Miller		Date of Receipt MM / DD / YYYY 11 / 28 / 2008		
	Mailing Address 18 Foxcroft Run		Transaction ID: 311231-15		
	City Avon	State CT	Zip Code 06001-2509	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.		Occupation Sr Relationship Mgr - Amg Pfd		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

B.	Full Name (Last, First, Middle Initial) Andrew C. Miller		Date of Receipt MM / DD / YYYY 12 / 12 / 2008		
	Mailing Address 18 Foxcroft Run		Transaction ID: 09019-29		
	City Avon	State CT	Zip Code 06001-2509	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.		Occupation Sr Relationship Mgr - Amg Pfd		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

C.	Full Name (Last, First, Middle Initial) Andrew C. Miller		Date of Receipt MM / DD / YYYY 12 / 26 / 2008		
	Mailing Address 18 Foxcroft Run		Transaction ID: 09019-30		
	City Avon	State CT	Zip Code 06001-2509	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.		Occupation Sr Relationship Mgr - Amg Pfd		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

SUBTOTAL of Receipts This Page (optional)	▶	30.00
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 107 / 172
(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)
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 ▼ 999.96

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

Transaction ID: 311231-9

Amount of Each Receipt this Period
38.46

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 ▼ 999.96

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

Transaction ID: 09019-17

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 ▼ 999.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-18

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional) ► **115.38**

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 108 / 172
(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 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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-686

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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1369

Amount of Each Receipt this Period
65.00

C. 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 ▼ 1690.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-1370

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► 195.00

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 109 / 172
(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)
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 ▼ 832.00

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

Transaction ID: 311231-239

Amount of Each Receipt this Period
32.00

B.

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 ▼ 832.00

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

Transaction ID: 09019-475

Amount of Each Receipt this Period
32.00

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 ▼ 832.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-476

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 110 / 172
(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)
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 Principal Life Ins Co. Occupation Chief Credit & Risk Offcr-Bank

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.08

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

Transaction ID: 311231-34

Amount of Each Receipt this Period
15.38

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.08

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

Transaction ID: 09019-67

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.08

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-68

Amount of Each Receipt this Period
15.38

SUBTOTAL of Receipts This Page (optional) ► 46.14

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 111 / 172

(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)

Philip K. Nordhus

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. Portfolio Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	8

Transaction ID: 09019-1086

Amount of Each Receipt this Period

8.00

B.

Full Name (Last, First, Middle Initial)

Sarah O'Brien

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. Product Development Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 299.52

Date of Receipt

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

Transaction ID: 311231-605

Amount of Each Receipt this Period

11.52

C.

Full Name (Last, First, Middle Initial)

Sarah O'Brien

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. Product Development Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 299.52

Date of Receipt

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

Transaction ID: 09019-1207

Amount of Each Receipt this Period

11.52

SUBTOTAL of Receipts This Page (optional) ▶

31.04

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 112 / 172
(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)
Sarah O'Brien

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 Product Development Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 299.52

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1208

Amount of Each Receipt this Period
11.52

B.

Full Name (Last, First, Middle Initial)
Mary A. O'Keefe

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 Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1149.98

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

Transaction ID: 311231-457

Amount of Each Receipt this Period
44.23

C.

Full Name (Last, First, Middle Initial)
Mary A. O'Keefe

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 Marketing Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1149.98

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

Transaction ID: 09019-911

Amount of Each Receipt this Period
44.23

SUBTOTAL of Receipts This Page (optional) ► **99.98**

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 113 / 172
(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)
Mary A. O'Keefe

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 Marketing Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1149.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-912

Amount of Each Receipt this Period
44.23

B. Full Name (Last, First, Middle Initial)
Susan A. Palmer

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 Govt Relations Director RIS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1310

Amount of Each Receipt this Period
8.00

C. 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 ▼ 750.10

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

Transaction ID: 311231-221

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► **81.08**

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 114 / 172
(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) Gerald W. Patterson		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-439
City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.85
Name of Employer Principal Life Ins Co.	Occupation VP-Marketing Life & Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.10	

B.

Full Name (Last, First, Middle Initial) Gerald W. Patterson		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-440
City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.85
Name of Employer Principal Life Ins Co.	Occupation VP-Marketing Life & Health	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.10	

C.

Full Name (Last, First, Middle Initial) Karen A. Pearston		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-339
City State Zip Code Des Moines IA 50309-2732	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 31.74
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 ▼ 676.80	

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 115 / 172
(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 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 ▼ 676.80

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-675

Amount of Each Receipt this Period
31.74

B.

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 ▼ 676.80

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-676

Amount of Each Receipt this Period
31.74

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 ▼ 832.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-471

Amount of Each Receipt this Period
32.00

SUBTOTAL of Receipts This Page (optional) ► **95.48**

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 116 / 172
(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)
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 ▼ 832.00
 Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-939
 Amount of Each Receipt this Period 32.00

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 ▼ 832.00
 Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-940
 Amount of Each Receipt this Period 32.00

C. Full Name (Last, First, Middle Initial)
R. K. Prey
 Mailing Address 7780 Office Plaza Drive, Suite 112
Principal Financial Group
 City State Zip Code
West Des Moines IA 50266
 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 ▼ 208.00
 Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1092
 Amount of Each Receipt this Period 8.00

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 117 / 172
(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)
John P. Prodoehl

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 Director- Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-606

Amount of Each Receipt this Period 8.00

B. Full Name (Last, First, Middle Initial)
Peter J. Prodoehl

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 VP Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-540

Amount of Each Receipt this Period 19.23

C. Full Name (Last, First, Middle Initial)
Peter J. Prodoehl

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 VP Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-1077

Amount of Each Receipt this Period 19.23

SUBTOTAL of Receipts This Page (optional) 46.46

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 118 / 172
(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)
Peter J. Prodoehl

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 VP Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1078

Amount of Each Receipt this Period
19.23

B.

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

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 Director-Retire & Invest Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-428

Amount of Each Receipt this Period
8.00

C.

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 ▼ 416.00

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

Transaction ID: 311231-274

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► 43.23

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: PAGE 119 / 172
(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)
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 ▼ 416.00

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

Transaction ID: 09019-545

Amount of Each Receipt this Period
16.00

B. 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 ▼ 416.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-546

Amount of Each Receipt this Period
16.00

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 ▼ 616.18

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

Transaction ID: 311231-98

Amount of Each Receipt this Period
23.79

SUBTOTAL of Receipts This Page (optional) ► 55.79

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 120 / 172
(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. 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 ▼ 616.18

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-193

Amount of Each Receipt this Period
23.79

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 ▼ 616.18

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-194

Amount of Each Receipt this Period
25.43

C. Full Name (Last, First, Middle Initial)
R. L. Riddle

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 ▼ 1200.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-548

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 99.22

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 121 / 172
(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) R. L. Riddle		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 1350 I Street Northwest Suite 880		Transaction ID: 09019-1093
City Washington D.C.	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 1200.00	

B.

Full Name (Last, First, Middle Initial) R. L. Riddle		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 1350 I Street Northwest Suite 880		Transaction ID: 09019-1094
City Washington D.C.	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 1200.00	

C.

Full Name (Last, First, Middle Initial) Michael D. Roughton		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-486
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.00
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 ▼ 815.00	

SUBTOTAL of Receipts This Page (optional)	▶	132.00
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 122 / 172
(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)
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 Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 815.00

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

Transaction ID: 09019-969

Amount of Each Receipt this Period
32.00

B. 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 Principal Life Ins Co. Occupation VP & Associate General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 815.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-970

Amount of Each Receipt this Period
32.00

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 Principal Life Ins Co. Occupation Chief Accounting Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

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

Transaction ID: 311231-18

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **84.00**

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 123 / 172
(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)
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 Principal Life Ins Co. Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

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

Transaction ID: 09019-35

Amount of Each Receipt this Period
20.00

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 Principal Life Ins Co. Occupation Chief Accounting Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-36

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Valerie C. Sandford

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-Product Marketing Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-701

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

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 124 / 172
	(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) Valerie C. Sanford		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-1399
Name of Employer Principal Life Ins Co.		Occupation Dir-Product Marketing Mgmt	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"/> 260.00	<input type="text"/> 10.00

B.	Full Name (Last, First, Middle Initial) Valerie C. Sanford		Date of Receipt
	Mailing Address 711 High Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 6 / 2 0 0 8
	City	State	Zip Code
	Des Moines	IA	50309-2732
	FEC ID number of contributing federal political committee. C		Transaction ID: 09019-1400
Name of Employer Principal Life Ins Co.		Occupation Dir-Product Marketing Mgmt	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"/> 260.00	<input type="text"/> 10.00

C.	Full Name (Last, First, Middle Initial) Lisa Sandos		Date of Receipt
	Mailing Address 2202 Kehrsgrrove Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Chesterfield	MO	63005-6519
	FEC ID number of contributing federal political committee. C		Transaction ID: 311231-401
Name of Employer Principal Life Ins Co.		Occupation Supplier Diversity Mgr	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"/> 260.00	<input type="text"/> 10.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 30.00
TOTAL 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 125 / 172
(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)
Lisa Sandos

Mailing Address 2202 Kehrsgrrove Court

City State Zip Code
Chesterfield MO 63005-6519

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

Name of Employer Occupation
Principal Life Ins Co. Supplier Diversity Mgr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

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

Transaction ID: 09019-799

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Lisa Sandos

Mailing Address 2202 Kehrsgrrove Court

City State Zip Code
Chesterfield MO 63005-6519

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

Name of Employer Occupation
Principal Life Ins Co. Supplier Diversity Mgr

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-800

Amount of Each Receipt this Period

10.00

C.

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 777.24

Date of Receipt

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

Transaction ID: 311231-562

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

52.00

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 126 / 172
(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)
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 ▼ 777.24

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

Transaction ID: 09019-1121

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 ▼ 777.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1122

Amount of Each Receipt this Period
32.00

C. Full Name (Last, First, Middle Initial)
Donald J. Schamay

Mailing Address 2000 River Edge Parkway Suite 9000

City State Zip Code
Atlanta GA 30328-4694

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

Name of Employer Principal Life Ins Co. Occupation Disability Income Rvp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.24

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 09019-357

Amount of Each Receipt this Period
8.76

SUBTOTAL of Receipts This Page (optional) ► **72.76**

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 127 / 172
(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>A. Full Name (Last, First, Middle Initial) Donald J. Schamay</p> <p>Mailing Address 2000 River Edge Parkway Suite 9000</p> <p>City Atlanta State GA Zip Code 30328-4694</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Principal Life Ins Co. Occupation Disability Income Rvp</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.24</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 8</p> <p>Transaction ID: 09019-358</p> <p>Amount of Each Receipt this Period 8.76</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) John D. Schmidt</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. C</p> <p>Name of Employer Principal Life Ins Co. Occupation VP & Associate 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 ▼ 1040.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 8</p> <p>Transaction ID: 311231-305</p> <p>Amount of Each Receipt this Period 40.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) John D. Schmidt</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. C</p> <p>Name of Employer Principal Life Ins Co. Occupation VP & Associate 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 ▼ 1040.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 2 / 2 0 0 8</p> <p>Transaction ID: 09019-607</p> <p>Amount of Each Receipt this Period 40.00</p>
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SUBTOTAL of Receipts This Page (optional)	88.76
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 128 / 172
(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)
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 ▼ 1040.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-608

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 ▼ 1170.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-216

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 ▼ 1170.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-429

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: PAGE 129 / 172
(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)
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 ▼ 1170.00

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-430

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Jeffrey D. Schreiber

Mailing Address 201 Jones Road
Principal Financial Grp

City State Zip Code
Waltham MA 02451-1605

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

Name of Employer Principal Life Ins Co. Occupation VP of Bus Development-Tpa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-275

Amount of Each Receipt this Period
15.38

C. Full Name (Last, First, Middle Initial)
Jeffrey D. Schreiber

Mailing Address 201 Jones Road
Principal Financial Grp

City State Zip Code
Waltham MA 02451-1605

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

Name of Employer Principal Life Ins Co. Occupation VP of Bus Development-Tpa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-547

Amount of Each Receipt this Period
15.38

SUBTOTAL of Receipts This Page (optional) ► **75.76**

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 130 / 172
(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 D. Schreiber

Mailing Address 201 Jones Road
Principal Financial Grp

City Waltham State MA Zip Code 02451-1605

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

Name of Employer Principal Life Ins Co. Occupation VP of Bus Development-Tpa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-548
Amount of Each Receipt this Period 15.38

B. Full Name (Last, First, Middle Initial)
Edward M. Schuh

Mailing Address 2732 Daniel Avenue

City Dallas State TX Zip Code 75205-1512

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

Name of Employer Principal Life Ins Co. Occupation Investment Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-200
Amount of Each Receipt this Period 16.00

C. Full Name (Last, First, Middle Initial)
Edward M. Schuh

Mailing Address 2732 Daniel Avenue

City Dallas State TX Zip Code 75205-1512

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

Name of Employer Principal Life Ins Co. Occupation Investment Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-397
Amount of Each Receipt this Period 16.00

SUBTOTAL of Receipts This Page (optional) ▶ 47.38

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 131 / 172
(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)
Edward M. Schuh

Mailing Address 2732 Daniel Avenue

City State Zip Code
Dallas TX 75205-1512

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

Name of Employer Principal Life Ins Co. Occupation Investment Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-398

Amount of Each Receipt this Period
16.00

B.

Full Name (Last, First, Middle Initial)
Karen E. Shaff

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 VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

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

Transaction ID: 311231-340

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Karen E. Shaff

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 VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

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

Transaction ID: 09019-677

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ► **236.00**

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 132 / 172
(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 E. Shaff

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 VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2860.00

Date of Receipt: MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-678

Amount of Each Receipt this Period: 110.00

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 Principal Life Ins Co. Occupation Regional Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-129

Amount of Each Receipt this Period: 20.00

C. 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 Principal Life Ins Co. Occupation Regional Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 09019-255

Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 133 / 172
(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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 09019-256

Amount of Each Receipt this Period
20.00

B. 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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 999.96

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

Transaction ID: 311231-443

Amount of Each Receipt this Period
38.46

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: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 999.96

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

Transaction ID: 09019-883

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional) ► 96.92

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 134 / 172
(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)
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 ▼ 999.96

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-884

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 ▼ 835.00

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

Transaction ID: 311231-382

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 ▼ 835.00

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

Transaction ID: 09019-761

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 135 / 172
(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)
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 ▼ 835.00

Date of Receipt M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-762

Amount of Each Receipt this Period 33.00

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 ▼ 832.00

Date of Receipt M M / D D / Y Y Y Y
11 / 28 / 2008

Transaction ID: 311231-207

Amount of Each Receipt this Period 32.00

C. 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 ▼ 832.00

Date of Receipt M M / D D / Y Y Y Y
12 / 12 / 2008

Transaction ID: 09019-411

Amount of Each Receipt this Period 32.00

SUBTOTAL of Receipts This Page (optional) 97.00

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 136 / 172

(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 Occupation
Principal Life Ins Co. Exec Director- Affiliate Op

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 832.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	0	8

Transaction ID: 09019-412

Amount of Each Receipt this Period

32.00

B.

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 Occupation
Principal Life Ins Co. Regional VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.10

Date of Receipt

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

Transaction ID: 311231-693

Amount of Each Receipt this Period

28.85

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 Occupation
Principal Life Ins Co. Regional VP

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.10

Date of Receipt

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

Transaction ID: 09019-1383

Amount of Each Receipt this Period

28.85

SUBTOTAL of Receipts This Page (optional)

89.70

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 137 / 172
(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) Tom Smith		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 2000 River Edge Parkway Suite 1000 Principal Financial Group		Transaction ID: 09019-1384
City Atlanta	State GA	Zip Code 30328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Principal Life Ins Co.	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.10	

B.

Full Name (Last, First, Middle Initial) Dwight N. Soethout		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-197
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer Principal Life Ins Co.	Occupation Chief Financial Officer- Ris	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.08	

C.

Full Name (Last, First, Middle Initial) Dwight N. Soethout		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-391
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.38
Name of Employer Principal Life Ins Co.	Occupation Chief Financial Officer- Ris	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.08	

SUBTOTAL of Receipts This Page (optional)	▶	59.61
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 138 / 172
(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)
Dwight N. 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 Chief Financial Officer- Ris

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 246.08

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-392

Amount of Each Receipt this Period
15.38

B.

Full Name (Last, First, Middle Initial)
Norman R. Sorensen

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 Exec VP Int'l Asset Accum

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1999.92

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

Transaction ID: 311231-514

Amount of Each Receipt this Period
76.92

C.

Full Name (Last, First, Middle Initial)
Norman R. Sorensen

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 Exec VP Int'l Asset Accum

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1999.92

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

Transaction ID: 09019-1025

Amount of Each Receipt this Period
76.92

SUBTOTAL of Receipts This Page (optional) ► 169.22

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 139 / 172

(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)
Norman R. Sorensen
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 International, Inc. Exec VP Int'l Asset Accum

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1999.92

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-1026

Amount of Each Receipt this Period

76.92

B.

Full Name (Last, First, Middle Initial)
Kathleen M. Souhrada
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. AVP-Recruiting & Diversity

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 399.88

Date of Receipt

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

Transaction ID: 311231-348

Amount of Each Receipt this Period

15.38

C.

Full Name (Last, First, Middle Initial)
Kathleen M. Souhrada
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. AVP-Recruiting & Diversity

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 399.88

Date of Receipt

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

Transaction ID: 09019-693

Amount of Each Receipt this Period

15.38

SUBTOTAL of Receipts This Page (optional) ▶

107.68

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 140 / 172
(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)
Kathleen M. Souhrada

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-Recruiting & Diversity

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 399.88

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-694

Amount of Each Receipt this Period
15.38

B.

Full Name (Last, First, Middle Initial)
Jack E. Stewart

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-Retire & Invest Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-238

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Jack E. Stewart

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-Retire & Invest Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-473

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **35.38**

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 141 / 172
(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)
Jack E. Stewart

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-Retire & Invest Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-474

Amount of Each Receipt this Period
10.00

B. 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 ▼ 1649.96

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

Transaction ID: 311231-149

Amount of Each Receipt this Period
63.46

C. 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 ▼ 1649.96

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

Transaction ID: 09019-295

Amount of Each Receipt this Period
63.46

SUBTOTAL of Receipts This Page (optional) ► 136.92

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 142 / 172

(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)
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 Occupation
Principal Life Ins Co. Svp Ind Life & Spec Benefits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1649.96

Date of Receipt M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-296

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 Occupation
Principal Life Ins Co. AVP & Corporate Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.36

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

Transaction ID: 311231-487

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 Occupation
Principal Life Ins Co. AVP & Corporate Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 323.36

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

Transaction ID: 09019-971

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 143 / 172
(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)
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 ▼ 323.36

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-972

Amount of Each Receipt this Period
15.40

B. Full Name (Last, First, Middle Initial)
M. Randall Strickland

Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.30

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-418

Amount of Each Receipt this Period
19.25

C. Full Name (Last, First, Middle Initial)
M. Randall Strickland

Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.30

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-833

Amount of Each Receipt this Period
19.25

SUBTOTAL of Receipts This Page (optional) ► **53.90**

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 144 / 172
(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)
M. Randall Strickland

Mailing Address 888 7th Ave; 11th Floor

City State Zip Code
New York NY 10106-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 298.30

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-834

Amount of Each Receipt this Period
19.25

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 ▼ 745.02

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

Transaction ID: 311231-688

Amount of Each Receipt this Period
31.74

C. 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 ▼ 745.02

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

Transaction ID: 09019-1373

Amount of Each Receipt this Period
31.74

SUBTOTAL of Receipts This Page (optional) ► **82.73**

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 145 / 172
(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 E. Stumpf

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 ▼ 745.02

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-1374

Amount of Each Receipt this Period
31.74

B. Full Name (Last, First, Middle Initial)
Connie K. Taylor

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 Product Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-212

Amount of Each Receipt this Period
8.00

C. Full Name (Last, First, Middle Initial)
Kirk L. Tebo

Mailing Address 14755 N Outer 40, Suite 108
Principal Financial Group

City State Zip Code
Chesterfield MO 63017-2027

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 ▼ 260.00

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

Transaction ID: 311231-365

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **49.74**

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 146 / 172
(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) Kirk L. Tebo		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 14755 N Outer 40, Suite 108 Principal Financial Group		Transaction ID: 09019-727
City Chesterfield	State MO	Zip Code 63017-2027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) Kirk L. Tebo		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 14755 N Outer 40, Suite 108 Principal Financial Group		Transaction ID: 09019-728
City Chesterfield	State MO	Zip Code 63017-2027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Karen S. Thomann		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-342
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.74
Name of Employer Principal Life Ins Co.	Occupation VP & CIO-Retire Investor Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 682.09	

SUBTOTAL of Receipts This Page (optional)	51.74
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 147 / 172

(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 Occupation
Principal Life Ins Co. VP & CIO-Retire Investor Svcs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 682.09

Date of Receipt

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

Transaction ID: 09019-681

Amount of Each Receipt this Period

31.74

B.

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 Occupation
Principal Life Ins Co. VP & CIO-Retire Investor Svcs

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 682.09

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-682

Amount of Each Receipt this Period

31.74

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 Occupation
Principal Life Ins Co. Asst Dir - IT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 399.88

Date of Receipt

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

Transaction ID: 311231-130

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 148 / 172
(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. 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 ▼ 399.88

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

Transaction ID: 09019-257

Amount of Each Receipt this Period
15.38

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 ▼ 399.88

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-258

Amount of Each Receipt this Period
15.38

C.

Full Name (Last, First, Middle Initial)
James M. Thomas

Mailing Address 600 Grant Street
Suite 1245

City State Zip Code
Pittsburgh PA 15219-2711

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

Name of Employer Principal Life Ins Co. Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-247

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **40.76**

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 149 / 172
(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) James M. Thomas		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 600 Grant Street Suite 1245		Transaction ID: 09019-491
City Pittsburgh	State PA	Zip Code 15219-2711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.

Full Name (Last, First, Middle Initial) James M. Thomas		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 600 Grant Street Suite 1245		Transaction ID: 09019-492
City Pittsburgh	State PA	Zip Code 15219-2711
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Principal Life Ins Co.	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

C.

Full Name (Last, First, Middle Initial) Joni L. Tibbetts		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-316
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Principal Life Ins Co.	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.00	

SUBTOTAL of Receipts This Page (optional)	▶	35.00
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 150 / 172

(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)

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 Occupation
Principal Life Ins Co. VP- Sales Engineering

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 313.00

Date of Receipt

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

Transaction ID: 09019-629

Amount of Each Receipt this Period
15.00

B.

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 Occupation
Principal Life Ins Co. VP- Sales Engineering

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 313.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-630

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)

Kirk 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 Occupation
Principal Life Ins Co. Financial Controller

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 208.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-730

Amount of Each Receipt this Period
8.00

SUBTOTAL of Receipts This Page (optional)

38.00

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 151 / 172
(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) Terrence Tobin		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 711 High Street		Transaction ID: 311231-668
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Principal Life Ins Co.	Occupation Director-Prin Enterprise Cap	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

B.

Full Name (Last, First, Middle Initial) Terrence Tobin		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-1333
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Principal Life Ins Co.	Occupation Director-Prin Enterprise Cap	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.

Full Name (Last, First, Middle Initial) Terrence Tobin		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 711 High Street		Transaction ID: 09019-1334
City Des Moines	State IA	Zip Code 50309-2732
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer Principal Life Ins Co.	Occupation Director-Prin Enterprise Cap	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

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 152 / 172
(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)
Mark A. Trom

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-Operation Excellence

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-437

Amount of Each Receipt this Period
10.00

B.

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

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-Operation Excellence

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-871

Amount of Each Receipt this Period
10.00

C.

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

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-Operation Excellence

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-872

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 153 / 172
(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)

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 Occupation
Principal Life Ins Co. VP & Associate General Counsel

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 706.28

Date of Receipt

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

Transaction ID: 311231-387

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 Occupation
Principal Life Ins Co. VP & Associate General Counsel

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 706.28

Date of Receipt

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

Transaction ID: 09019-771

Amount of Each Receipt this Period

31.74

C.

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 Occupation
Principal Life Ins Co. VP & Associate General Counsel

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 706.28

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	0	8

Transaction ID: 09019-772

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 154 / 172

(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)
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 ▼
399.88

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

Transaction ID: 311231-63

Amount of Each Receipt this Period
15.38

B.

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 ▼
399.88

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

Transaction ID: 09019-125

Amount of Each Receipt this Period
15.38

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 ▼
399.88

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-126

Amount of Each Receipt this Period
15.38

SUBTOTAL of Receipts This Page (optional) 46.14

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 155 / 172
(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)
Patricia R. Van Thomme
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-Sourcing/Supplier Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 11 / 28 / 2008
Transaction ID: 311231-521
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Patricia R. Van Thomme
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-Sourcing/Supplier Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 12 / 2008
Transaction ID: 09019-1039
Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Patricia R. Van Thomme
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-Sourcing/Supplier Mgmt

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 12 / 26 / 2008
Transaction ID: 09019-1040
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 156 / 172

(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)
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 ▼ 910.00

Date of Receipt MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-413

Amount of Each Receipt this Period 35.00

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 ▼ 910.00

Date of Receipt MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-823

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 ▼ 910.00

Date of Receipt MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-824

Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) 105.00

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 157 / 172
(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)
Audrey M. Vaughn
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-Medical Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8
Transaction ID: 311231-28
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Audrey M. Vaughn
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-Medical Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 8
Transaction ID: 09019-55
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Audrey M. Vaughn
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-Medical Management

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8
Transaction ID: 09019-56
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 158 / 172
(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) Maria E. Volante		Date of Receipt MM / DD / YYYY 11 / 28 / 2008
Mailing Address 1275 Northwest 128th Street Suite 100		Transaction ID: 311231-426
City Clive	State IA	Zip Code 50325-7450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 797.00	

B.

Full Name (Last, First, Middle Initial) Maria E. Volante		Date of Receipt MM / DD / YYYY 12 / 12 / 2008
Mailing Address 1275 Northwest 128th Street Suite 100		Transaction ID: 09019-849
City Clive	State IA	Zip Code 50325-7450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 797.00	

C.

Full Name (Last, First, Middle Initial) Maria E. Volante		Date of Receipt MM / DD / YYYY 12 / 26 / 2008
Mailing Address 1275 Northwest 128th Street Suite 100		Transaction ID: 09019-850
City Clive	State IA	Zip Code 50325-7450
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.00
Name of Employer Principal Life Ins Co.	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 797.00	

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 159 / 172
(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)
Dale R. Ward

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 - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-232

Amount of Each Receipt this Period
8.00

B.

Full Name (Last, First, Middle Initial)
Liliana G. Waters

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 CFO-Life & Health Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 311231-391

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Liliana G. Waters

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 CFO-Life & Health Distribution

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: 09019-779

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **28.00**

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 160 / 172
(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)
Liliana G. Waters

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 CFO-Life & Health Distribution

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-780

Amount of Each Receipt this Period
10.00

B. 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 ▼ 318.76

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

Transaction ID: 311231-231

Amount of Each Receipt this Period
12.26

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 ▼ 318.76

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

Transaction ID: 09019-459

Amount of Each Receipt this Period
12.26

SUBTOTAL of Receipts This Page (optional) ► 34.52

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

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

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

FOR LINE NUMBER: PAGE 161 / 172
(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)
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 ▼ 318.76

Date of Receipt
MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-460

Amount of Each Receipt this Period
12.26

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

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 VP-Business Operations & Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-181

Amount of Each Receipt this Period
10.00

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

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 VP-Business Operations & Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-359

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 32.26

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 162 / 172
(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)
Donald E. Weitzel

Mailing Address 2000 River Edge Parkway Suite 1000
Principal Financial Group

City Atlanta State GA Zip Code 30328

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

Name of Employer Principal Life Ins Co. Occupation VP-Business Operations & Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-360
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Randy L. Welch

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 Director-Investment Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.20

Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1108
 Amount of Each Receipt this Period 7.70

C. Full Name (Last, First, Middle Initial)
Hugh B. White

Mailing Address 485 Metro Place South, Suite 206
Principal Financial Group

City Dublin State OH Zip Code 43017-5332

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

Name of Employer Principal Life Ins Co. Occupation Vice President-Grp Non Med

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-235
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 37.70

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 163 / 172

(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)
Hugh B. White

Mailing Address 485 Metro Place South, Suite 206
Principal Financial Group

City State Zip Code
Dublin OH 43017-5332

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

Name of Employer Occupation
Principal Life Ins Co. Vice President-Grp Non Med

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt

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

Transaction ID: 09019-467

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Hugh B. White

Mailing Address 485 Metro Place South, Suite 206
Principal Financial Group

City State Zip Code
Dublin OH 43017-5332

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

Name of Employer Occupation
Principal Life Ins Co. Vice President-Grp Non Med

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-468

Amount of Each Receipt this Period

20.00

C.

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: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 832.00

Date of Receipt

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

Transaction ID: 311231-650

Amount of Each Receipt this Period

32.00

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 164 / 172
(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)
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 Principal Life Ins Co. Occupation VP Corporate Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 832.00
Date of Receipt 12 / 12 / 2008
Transaction ID: 09019-1297
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 Principal Life Ins Co. Occupation VP Corporate Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 832.00
Date of Receipt 12 / 26 / 2008
Transaction ID: 09019-1298
Amount of Each Receipt this Period 32.00

C. Full Name (Last, First, Middle Initial)
Jayne M. Woods
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 Financial Analyst Iv
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 218.80
Date of Receipt 11 / 28 / 2008
Transaction ID: 311231-263
Amount of Each Receipt this Period 8.90

SUBTOTAL of Receipts This Page (optional) ▶ 72.90
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 165 / 172

(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)
Jayne M. Woods

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: Financial Analyst Iv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.80

Date of Receipt MM / DD / YYYY
12 / 12 / 2008

Transaction ID: 09019-523

Amount of Each Receipt this Period 8.90

B.

Full Name (Last, First, Middle Initial)
Jayne M. Woods

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: Financial Analyst Iv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.80

Date of Receipt MM / DD / YYYY
12 / 26 / 2008

Transaction ID: 09019-524

Amount of Each Receipt this Period 8.90

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: Principal Life Ins Co. Occupation: VP-IT Life & Disability

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt MM / DD / YYYY
11 / 28 / 2008

Transaction ID: 311231-720

Amount of Each Receipt this Period 38.46

SUBTOTAL of Receipts This Page (optional) 56.26

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 166 / 172

(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)
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: Principal Life Ins Co. Occupation: VP-IT Life & Disability

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt M M / D D / Y Y Y Y
12 / 12 / 2008

Transaction ID: 09019-1436

Amount of Each Receipt this Period 38.46

B.

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: Principal Life Ins Co. Occupation: VP-IT Life & Disability

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 999.96

Date of Receipt M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-1437

Amount of Each Receipt this Period 38.46

C.

Full Name (Last, First, Middle Initial)
Thomas F. Zimmerman

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: Technical Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt M M / D D / Y Y Y Y
12 / 26 / 2008

Transaction ID: 09019-1356

Amount of Each Receipt this Period 8.00

SUBTOTAL of Receipts This Page (optional) 84.92

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 167 / 172
(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)

Larry D. Zimpleman

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. President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4399.98

Date of Receipt

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

Transaction ID: 311231-379

Amount of Each Receipt this Period

169.23

B.

Full Name (Last, First, Middle Initial)

Larry D. Zimpleman

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. President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4399.98

Date of Receipt

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

Transaction ID: 09019-755

Amount of Each Receipt this Period

169.23

C.

Full Name (Last, First, Middle Initial)

Larry D. Zimpleman

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. President & CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4399.98

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 2 6 / 2 0 0 8

Transaction ID: 09019-756

Amount of Each Receipt this Period

169.23

SUBTOTAL of Receipts This Page (optional) ▶

507.69

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

18372.94

**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 168 / 172

<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

<p>A. Full Name (Last, First, Middle Initial) Berry for Iowa House of Representatives</p> <p>Mailing Address 241 Madison Street</p> <p>City Waterloo State IA Zip Code 50703</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 60810-9199487566948</p> <p>Date of Disbursement 12 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Chet Culver Committee</p> <p>Mailing Address PO Box 6068</p> <p>City Des Moines State IA Zip Code 50309</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 42708-1765863299369</p> <p>Date of Disbursement 12 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Citizens for Gronstal</p> <p>Mailing Address 220 Bennett Avenue</p> <p>City Council Bluffs State IA Zip Code 51503</p> <p>Purpose of Disbursement Nonfederal Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 60810-5109521746635</p> <p>Date of Disbursement 12 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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 169 / 172

<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

A. Full Name (Last, First, Middle Initial) Committee to Elect John Whitaker <hr/> Mailing Address 32500 145th Street <hr/> City Hillsboro State IA Zip Code 52630 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 85288-9010278582573 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cownie for Statehouse <hr/> Mailing Address 686 58th Place <hr/> City West Des Moines State IA Zip Code 50266 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 42708-1637384295463 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Federation of Iowa Insurers PAC <hr/> Mailing Address c/o Paula Dierenfeld 700 Walnut, Suite 1600 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 60810-2291375994682 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 171 / 172

<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

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

A. Full Name (Last, First, Middle Initial) Murphy for State Representative <hr/> Mailing Address 155 North Grandview Avenue <hr/> City Dubuque State IA Zip Code 52001-6325 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 42708-2718469500541 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00 <hr/> Category/Type 011
B. Full Name (Last, First, Middle Initial) Paulsen for State House Committee <hr/> Mailing Address P.O. Box 250 <hr/> City Hiawatha State IA Zip Code 52233 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 42708-5071222186088 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <hr/> Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

750.00

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

9000.00

Image# 29990057455

Form/Schedule: **F3X**

Transaction ID:
