

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 Street
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 (12S)
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 09 01 2010 through 09 30 2010

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 Mr. Art Bacci

Signature of Treasurer Electronically Filed by Mr. Art Bacci Date 10 15 2010

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)

A. Form/Schedule : **F3X**

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		63408.03
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	34296.32									
(c) Total Receipts (from Line 19)	12304.00	123013.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46600.32	186421.32								
7. Total Disbursements (from Line 31)	24000.00	163821.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22600.32	22600.32								
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
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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		
(i) Itemized (use Schedule A)	7756.36	58685.57
(ii) Unitemized	4547.64	64327.72
(iii) TOTAL (add Lines 11(a)(i) and (ii)	12304.00	123013.29
(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)	12304.00	123013.29
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))	12304.00	123013.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12304.00	123013.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	71.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	71.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	124500.00
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.....	12000.00	39250.00
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))..	24000.00	163821.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24000.00	163821.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	12304.00	123013.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12304.00	123013.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	71.00
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	71.00

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

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

FOR LINE NUMBER: PAGE 7 / 91
(check only one)
 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)
Noel John Anderson

Mailing Address 201 Jones Rd
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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

Name of Employer: Principal Life Ins Co. Occupation: Reg VP - Nonqualified Plans

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: 20101005563-892
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Noel John Anderson

Mailing Address 201 Jones Rd
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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

Name of Employer: Principal Life Ins Co. Occupation: Reg VP - Nonqualified Plans

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt: 09 / 30 / 2010
Transaction ID: 20101005563-893
Amount of Each Receipt this Period: 20.00

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

Mailing Address 6200 Park Ave

City Des Moines State IA Zip Code 50321-1270

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

Name of Employer: Principal Life Ins Co. Occupation: VP-CEO/President PTC & Bank

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 547.96

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-47
Amount of Each Receipt this Period: 28.84

SUBTOTAL of Receipts This Page (optional) ► 68.84

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Arthur John Bacci		Date of Receipt	
	Mailing Address 6200 Park Ave		M M / D D / Y Y Y Y Y 09 / 17 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-48
	Des Moines	IA	50321-1270	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C		28.84
Name of Employer Principal Life Ins Co.		Occupation VP-CEO/President PTC & Bank		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		547.96		

B.	Full Name (Last, First, Middle Initial) Craig Lawrence Bassett		Date of Receipt	
	Mailing Address 711 High St		M M / D D / Y Y Y Y Y 09 / 03 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-176
	Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C		31.74
Name of Employer Principal Life Ins Co.		Occupation VP & Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		603.06		

C.	Full Name (Last, First, Middle Initial) Craig Lawrence Bassett		Date of Receipt	
	Mailing Address 711 High St		M M / D D / Y Y Y Y Y 09 / 17 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-177
	Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C		31.74
Name of Employer Principal Life Ins Co.		Occupation VP & Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		603.06		

SUBTOTAL of Receipts This Page (optional)	▶	92.32
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 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Michael Jon Beer

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP-Mutual Funds & Broker Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-814

Amount of Each Receipt this Period
35.00

B.

Full Name (Last, First, Middle Initial)
Michael Jon Beer

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP-Mutual Funds & Broker Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-815

Amount of Each Receipt this Period
35.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-708

Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional) ► **109.00**

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 10 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-709

Amount of Each Receipt this Period
39.00

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Nurse Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.10

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-932

Amount of Each Receipt this Period
11.90

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Nurse Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.10

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-933

Amount of Each Receipt this Period
11.90

SUBTOTAL of Receipts This Page (optional) ► **62.80**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 91
(check only one)

<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 St
Ste 316

City State Zip Code
Boise ID 83702-5733

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-622

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 910 W Main St
Ste 316

City State Zip Code
Boise ID 83702-5733

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-623

Amount of Each Receipt this Period
20.00

C.

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

Mailing Address 1350 I St NW
Ste 880

City State Zip Code
Washington DC 20005-7207

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
919.60

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-916

Amount of Each Receipt this Period
48.40

SUBTOTAL of Receipts This Page (optional) ► **88.40**

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

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

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

FOR LINE NUMBER: PAGE 12 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 1350 I St NW
Ste 880

City State Zip Code
Washington DC 20005-7207

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
919.60

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-917

Amount of Each Receipt this Period

48.40

B.

Full Name (Last, First, Middle Initial)
Christopher Joseph Bowman

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-154

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Christopher Joseph Bowman

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-155

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

148.40

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 91
(check only one)
 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)
David James Brown

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP - Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	1	0

Transaction ID: 20101005563-234

Amount of Each Receipt this Period
31.74

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP - Compliance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	1	0

Transaction ID: 20101005563-235

Amount of Each Receipt this Period
31.74

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

Mailing Address 1100 Investment Blvd

City State Zip Code
El Dorado Hills CA 95762-5710

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	3	/	2	0	1	0

Transaction ID: 20101005563-488

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 14 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

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

A.

Full Name (Last, First, Middle Initial)
Jill Renae Brown

Mailing Address 1100 Investment Blvd

City State Zip Code
El Dorado Hills CA 95762-5710

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-489

Amount of Each Receipt this Period
15.38

B.

Full Name (Last, First, Middle Initial)
Paul Alvin Brown

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-918

Amount of Each Receipt this Period
39.00

C.

Full Name (Last, First, Middle Initial)
Paul Alvin Brown

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 741.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-919

Amount of Each Receipt this Period
39.00

SUBTOTAL of Receipts This Page (optional) ► **93.38**

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: (check only one)	PAGE 15 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Ned Alan Burmeister		Date of Receipt
	Mailing Address 711 High St		<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
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-886
Name of Employer Principal International, Inc.		Occupation SVP & COO - PI	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 ▼ 950.00	<input type="text"/>

B.	Full Name (Last, First, Middle Initial) Ned Alan Burmeister		Date of Receipt
	Mailing Address 711 High St		<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
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-887
Name of Employer Principal International, Inc.		Occupation SVP & COO - PI	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 ▼ 950.00	<input type="text"/>

C.	Full Name (Last, First, Middle Initial) Barbara B. Burnett		Date of Receipt
	Mailing Address 711 High St		<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
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-57
Name of Employer Principal Life Ins Co.		Occupation Sr Corp Negotiator	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	<input type="text"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
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 16 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Sr Corp Negotiator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-58

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 18101 Von Karman Ave Ste 1170

City State Zip Code
Irvine CA 92612-7169

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1176

Amount of Each Receipt this Period
28.85

C.

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

Mailing Address 18101 Von Karman Ave Ste 1170

City State Zip Code
Irvine CA 92612-7169

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1177

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► **77.70**

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 17 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							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 John Burrows

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 1205.55

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-388

Amount of Each Receipt this Period
63.45

B.

Full Name (Last, First, Middle Initial)
Gregory John Burrows

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 1205.55

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-389

Amount of Each Receipt this Period
63.45

C.

Full Name (Last, First, Middle Initial)
Teresa Marie Button

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1156

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **141.90**

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 18 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<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)
Teresa Marie Button

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1157

Amount of Each Receipt this Period
15.00

B.

Full Name (Last, First, Middle Initial)
Chris Tonnis Calos

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 605.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-144

Amount of Each Receipt this Period
31.85

C.

Full Name (Last, First, Middle Initial)
Chris Tonnis Calos

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 605.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-145

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 19 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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 St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-888

Amount of Each Receipt this Period
38.46

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-889

Amount of Each Receipt this Period
38.46

C.

Full Name (Last, First, Middle Initial)
Lillian Ilin Chen

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-672

Amount of Each Receipt this Period
32.00

SUBTOTAL of Receipts This Page (optional) ► **108.92**

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 20 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Lillian Ilin Chen

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP Tax

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-673

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)
Barrie Gibb Christman

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.93

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-64

Amount of Each Receipt this Period

38.47

C.

Full Name (Last, First, Middle Initial)
Barrie Gibb Christman

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.93

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-65

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)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 91
(check only one)

<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 Joseph Cleary

Mailing Address 11100 Wayzata Blvd
Principal Financial Group, Ste 211

City State Zip Code
Minnetonka MN 55305-5537

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-1186

Amount of Each Receipt this Period
15.38

B.

Full Name (Last, First, Middle Initial)
Timothy Joseph Cleary

Mailing Address 11100 Wayzata Blvd
Principal Financial Group, Ste 211

City State Zip Code
Minnetonka MN 55305-5537

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-1187

Amount of Each Receipt this Period
15.38

C.

Full Name (Last, First, Middle Initial)
Eileen Mary Conroy

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.22

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-342

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 22 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

A.

Full Name (Last, First, Middle Initial)
Eileen Mary Conroy

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.22

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-343

Amount of Each Receipt this Period
15.38

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 323.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-134

Amount of Each Receipt this Period
17.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 323.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-135

Amount of Each Receipt this Period
17.00

SUBTOTAL of Receipts This Page (optional) ► **49.38**

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 23 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-820

Amount of Each Receipt this Period
15.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-821

Amount of Each Receipt this Period
15.00

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

Mailing Address 4141 Parklake Ave
Ste 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 Director-Non-Qualified

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-21

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: (check only one)	PAGE 24 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Andrew Piper Dalgliesh		Date of Receipt
	Mailing Address 4141 Parklake Ave Ste 400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City Raleigh	State NC	Zip Code 27612-2333
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-22
	Name of Employer Principal Life Ins Co.		Occupation Director-Non-Qualified
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	Amount of Each Receipt this Period 15.00

B.	Full Name (Last, First, Middle Initial) Ronald L. Danilson		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010
	City Des Moines	State IA	Zip Code 50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-1028
	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 ▼ 1235.00	Amount of Each Receipt this Period 65.00

C.	Full Name (Last, First, Middle Initial) Ronald L. Danilson		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City Des Moines	State IA	Zip Code 50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-1029
	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 ▼ 1235.00	Amount of Each Receipt this Period 65.00

SUBTOTAL of Receipts This Page (optional)	145.00
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 25 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

Full Name (Last, First, Middle Initial) Michael John Daugherty		Date of Receipt MM / DD / YYYY 09 / 03 / 2010	
Mailing Address 6525 Chancellor Dr Cedar Falls Industrial Park		Transaction ID: 20101005563-822	
City Cedar Falls	State IA	Zip Code 50613-6957	Amount of Each Receipt this Period 31.75
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP- Emerging Mkt Segment		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.25		

B.

Full Name (Last, First, Middle Initial) Michael John Daugherty		Date of Receipt MM / DD / YYYY 09 / 17 / 2010	
Mailing Address 6525 Chancellor Dr Cedar Falls Industrial Park		Transaction ID: 20101005563-823	
City Cedar Falls	State IA	Zip Code 50613-6957	Amount of Each Receipt this Period 31.75
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP- Emerging Mkt Segment		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.25		

C.

Full Name (Last, First, Middle Initial) Gary Lane Dorton		Date of Receipt MM / DD / YYYY 09 / 03 / 2010	
Mailing Address 4141 Parklake Ave Ste 400		Transaction ID: 20101005563-366	
City Raleigh	State NC	Zip Code 27612-2333	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-Employer Solutions & Serv		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 603.06		

SUBTOTAL of Receipts This Page (optional)	▶	95.24
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 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

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

A.

Full Name (Last, First, Middle Initial)
Gary Lane Dorton

Mailing Address 4141 Parklake Ave
Ste 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-Employer Solutions & Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.06

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-367
Amount of Each Receipt this Period 31.74

B.

Full Name (Last, First, Middle Initial)
Timothy Mark Dunbar

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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 ▼ 1205.74

Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-1192
Amount of Each Receipt this Period 63.46

C.

Full Name (Last, First, Middle Initial)
Timothy Mark Dunbar

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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 ▼ 1205.74

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-1193
Amount of Each Receipt this Period 63.46

SUBTOTAL of Receipts This Page (optional) ► 158.66

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 27 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Full Name (Last, First, Middle Initial)
John Michael Egan

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
VP - Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 222.18

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-509

Amount of Each Receipt this Period
31.74

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1216.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-390

Amount of Each Receipt this Period
64.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1216.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-391

Amount of Each Receipt this Period
64.00

SUBTOTAL of Receipts This Page (optional) ► **159.74**

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 28 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Ralph Craig Eucher
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Life Ins Co. Occupation SVP HR & Corp Svcs
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-954
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Ralph Craig Eucher
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Life Ins Co. Occupation SVP HR & Corp Svcs
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 475.00
Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-955
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Nora Mary Everett
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 855.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-894
Amount of Each Receipt this Period 45.00

SUBTOTAL of Receipts This Page (optional) ► 95.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<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)
Nora Mary Everett

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 855.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-895

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
Douglas Alan Fick

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 722.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-322

Amount of Each Receipt this Period
38.00

C.

Full Name (Last, First, Middle Initial)
Douglas Alan Fick

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 722.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-323

Amount of Each Receipt this Period
38.00

SUBTOTAL of Receipts This Page (optional) ► **121.00**

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 30 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael Patrick Finnegan
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 608.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-826
Amount of Each Receipt this Period 32.00

B. Full Name (Last, First, Middle Initial)
Michael Patrick Finnegan
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 608.00
Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-827
Amount of Each Receipt this Period 32.00

C. Full Name (Last, First, Middle Initial)
Jed A. Fisk
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 380.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-448
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 31 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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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 St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-449

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Louis E. Flori

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP - Capital Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-706

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Louis E. Flori

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP - Capital Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-707

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 32 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 603.06

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-102

Amount of Each Receipt this Period
31.74

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 603.06

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-103

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 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation AVP-Retirement & Investor Serv

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.37

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-922

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 33 / 91
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Paul E. Fromm		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 17 / 2010
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-923
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 ▼ 365.37	<input type="text"/> 19.23

B.	Full Name (Last, First, Middle Initial) Cary Allan Fuchs		Date of Receipt
	Mailing Address 1100 Investment Blvd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2010
	City	State	Zip Code
	El Dorado Hills	CA	95762-5710
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-128
Name of Employer Principal Life Ins Co.		Occupation Dir-Transfer Agent & Adm Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) Cary Allan Fuchs		Date of Receipt
	Mailing Address 1100 Investment Blvd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 17 / 2010
	City	State	Zip Code
	El Dorado Hills	CA	95762-5710
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-129
Name of Employer Principal Life Ins Co.		Occupation Dir-Transfer Agent & Adm Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	<input type="text"/> 20.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 59.23
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 34 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)

Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lynn Marie Graves

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP Corporate Marketing

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-714

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)

Lynn Marie Graves

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP Corporate Marketing

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 760.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-715

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)

Victoria Whitaker Gray

Mailing Address 51 Germantown Ct
Principal Financial Group, Ste 101

City State Zip Code
Cordova TN 38018-4278

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

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1425.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1220

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

155.00

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 35 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Victoria Whitaker Gray		Date of Receipt	
	Mailing Address 51 Germantown Ct Principal Financial Group, Ste 101		M M / D D / Y Y Y Y Y 09 / 17 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-1221
	Cordova	TN	38018-4278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
	Name of Employer Principal Life Ins Co.		Occupation Sr Account Exec-Retirement Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1425.00		

B.	Full Name (Last, First, Middle Initial) Patrick Gregory Halter		Date of Receipt	
	Mailing Address 711 High St		M M / D D / Y Y Y Y Y 09 / 03 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-910
	Des Moines	IA	50392-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		31.74	
	Name of Employer Principal Life Ins Co.		Occupation Head of PrinREI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 603.06		

C.	Full Name (Last, First, Middle Initial) Patrick Gregory Halter		Date of Receipt	
	Mailing Address 711 High St		M M / D D / Y Y Y Y Y 09 / 17 / 2010	
	City	State	Zip Code	Transaction ID: 20101005563-911
	Des Moines	IA	50392-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		31.74	
	Name of Employer Principal Life Ins Co.		Occupation Head of PrinREI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 603.06		

SUBTOTAL of Receipts This Page (optional)	▶	138.48
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 91

(check only one)

<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 St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-734

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mark A. Hanrahan

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-735

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Lorraine N. Hardin

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP - PIng, Compl and Prod Dev

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 665.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-694

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 91

(check only one)

<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) Loraine N. Hardin		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-695		
	City Des Moines	State IA	Zip Code 50392-0001	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 - PIng, Compl and Prod Dev			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 665.00			

B.	Full Name (Last, First, Middle Initial) Monica L. Haun		Date of Receipt MM / DD / YYYY 09 / 03 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-868		
	City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation AVP-IT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.37			

C.	Full Name (Last, First, Middle Initial) Monica L. Haun		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-869		
	City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 19.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation AVP-IT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 365.37			

SUBTOTAL of Receipts This Page (optional)	▶	73.46
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 91
(check only one)

<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 G. Hayne

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 226.48

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-942

Amount of Each Receipt this Period
11.92

B.

Full Name (Last, First, Middle Initial)
Philip G. Hayne

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 226.48

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-943

Amount of Each Receipt this Period
11.92

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-160

Amount of Each Receipt this Period
32.00

SUBTOTAL of Receipts This Page (optional) ► **55.84**

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

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

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

FOR LINE NUMBER: PAGE 39 / 91
(check only one)
 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. Henderson
 Mailing Address 711 High St
 City State Zip Code
Des Moines IA 50392-0001
 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 ▼ 608.00
 Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-161
 Amount of Each Receipt this Period 32.00

B. Full Name (Last, First, Middle Initial)
Timothy Allen Hill
 Mailing Address 3727 S Hills Way
 City State Zip Code
Eagan MN 55123-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Principal Life Ins Co. Occupation National Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00
 Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-1194
 Amount of Each Receipt this Period 18.00

C. Full Name (Last, First, Middle Initial)
Timothy Allen Hill
 Mailing Address 3727 S Hills Way
 City State Zip Code
Eagan MN 55123-1215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Principal Life Ins Co. Occupation National Sales Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 342.00
 Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-1195
 Amount of Each Receipt this Period 18.00

SUBTOTAL of Receipts This Page (optional) ► 68.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 91 (check only one)
	<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) Jill Marie Hittner</p> <p>Mailing Address 711 High St</p> <p>City State Zip Code Des Moines IA 50392-0001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Chief Financial Officer-PGI</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 603.06</p>	<p>Date of Receipt 09 / 03 / 2010</p> <p>Transaction ID: 20101005563-490</p> <p>Amount of Each Receipt this Period 31.74</p>
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<p>B. Full Name (Last, First, Middle Initial) Jill Marie Hittner</p> <p>Mailing Address 711 High St</p> <p>City State Zip Code Des Moines IA 50392-0001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: Chief Financial Officer-PGI</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 603.06</p>	<p>Date of Receipt 09 / 17 / 2010</p> <p>Transaction ID: 20101005563-491</p> <p>Amount of Each Receipt this Period 31.74</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Joyce N. Hoffman</p> <p>Mailing Address 711 High St</p> <p>City State Zip Code Des Moines IA 50392-0001</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer: Principal Life Ins Co. Occupation: SVP & Corporate Secretary</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1205.74</p>	<p>Date of Receipt 09 / 03 / 2010</p> <p>Transaction ID: 20101005563-550</p> <p>Amount of Each Receipt this Period 63.46</p>
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SUBTOTAL of Receipts This Page (optional)	126.94
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 1205.74

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-551

Amount of Each Receipt this Period
63.46

B.

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

Mailing Address 7077 Bonneval Rd Ste 380

City State Zip Code
Jacksonville FL 32216-6055

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2010

Transaction ID: 20101005563-1022

Amount of Each Receipt this Period
16.50

C.

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

Mailing Address 7077 Bonneval Rd Ste 380

City State Zip Code
Jacksonville FL 32216-6055

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 297.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2010

Transaction ID: 20101005563-1023

Amount of Each Receipt this Period
16.50

SUBTOTAL of Receipts This Page (optional) ► **96.46**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Daniel Joseph Houston

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer
Principal Life Ins Co. Occupation
President - Ret, Ins & Fin Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2223.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-204

Amount of Each Receipt this Period
117.00

B.

Full Name (Last, First, Middle Initial)
Daniel Joseph Houston

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer
Principal Life Ins Co. Occupation
President - Ret, Ins & Fin Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2223.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-205

Amount of Each Receipt this Period
117.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-992

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► **246.00**

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 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Richard C. Johnson	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 711 High St	Transaction ID: 20101005563-993
	City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 12.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co.	Occupation Dir IDI Oper-New & Exist Bus	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	
B.	Full Name (Last, First, Middle Initial) Roman E. Kalpas	Date of Receipt MM / DD / YYYY 09 / 17 / 2010
	Mailing Address 1013 Centre Rd Ste 300	Transaction ID: 20101005563-1027
	City State Zip Code Wilmington DE 19805-1265	Amount of Each Receipt this Period 11.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Trust Company	Occupation IT Application Analyst-Sr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	
C.	Full Name (Last, First, Middle Initial) Clifford P. Karthausser	Date of Receipt MM / DD / YYYY 09 / 28 / 2010
	Mailing Address 19407 Camden Ave	Transaction ID: 7DA2F64645907F1E09B
	City State Zip Code Elkhorn NE 68022-1124	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
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 ▼ 495.00	

SUBTOTAL of Receipts This Page (optional) ▶

78.00

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 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Principal Life Insurance Company Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Monica Jean Kirgan

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-870

Amount of Each Receipt this Period
36.00

B.

Full Name (Last, First, Middle Initial)
Monica Jean Kirgan

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 684.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-871

Amount of Each Receipt this Period
36.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-181

Amount of Each Receipt this Period
11.00

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

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

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

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

FOR LINE NUMBER: PAGE 45 / 91
(check only one)
 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 Ruth Lamale

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-350
Amount of Each Receipt this Period: 70.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-351
Amount of Each Receipt this Period: 70.00

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

Mailing Address 4141 Parklake Ave Ste 400

City State Zip Code
Raleigh NC 27612-2333

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-76
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 46 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <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)
Blaine William Laverick

Mailing Address 4141 Parklake Ave
Ste 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-Executive Benefit Services

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-77

Amount of Each Receipt this Period

15.38

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1045.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-556

Amount of Each Receipt this Period

55.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 1045.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-557

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

125.38

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 47 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 1350 I St NW
Ste 880

City State Zip Code
Washington DC 20005-7207

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

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

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

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-994

Amount of Each Receipt this Period

38.46

B.

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

Mailing Address 1350 I St NW
Ste 880

City State Zip Code
Washington DC 20005-7207

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

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

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

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-995

Amount of Each Receipt this Period

38.46

C.

Full Name (Last, First, Middle Initial)
Scott Patrick Leiberton

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

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

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1068

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 48 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Scott Patrick Leiberton

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 380.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-1069
Amount of Each Receipt this Period: 20.00

B.

Full Name (Last, First, Middle Initial)
Terrance Joseph Lillis

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 760.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-1162
Amount of Each Receipt this Period: 40.00

C.

Full Name (Last, First, Middle Initial)
Terrance Joseph Lillis

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 760.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-1163
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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 49 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Gregory Allen Linde
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 475.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-392
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Gregory Allen Linde
Mailing Address 711 High St
City Des Moines State IA Zip Code 50392-0001
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 ▼ 475.00
Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-393
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Denise A. Loomis
Mailing Address 999 5th Ave Ste 490
City San Rafael State CA Zip Code 94901-2995
FEC ID number of contributing federal political committee. **C**
Name of Employer Principal Life Ins Co. Occupation Reg Client Svc Dir-Retirement
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 285.00
Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-274
Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 65.00
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 50 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A.

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

Mailing Address 999 5th Ave
Ste 490

City San Rafael State CA Zip Code 94901-2995

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-275
Amount of Each Receipt this Period 15.00

B.

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

Mailing Address 5500 Main St
Principal Financial Group

City Williamsville State NY Zip Code 14221-6755

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-540
Amount of Each Receipt this Period 15.00

C.

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

Mailing Address 5500 Main St
Principal Financial Group

City Williamsville State NY Zip Code 14221-6755

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

Name of Employer Principal Life Ins Co. Occupation VP Consulting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-541
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 51 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

A.

Full Name (Last, First, Middle Initial)
Chris Lee Mayer

Mailing Address 6200 Park Ave

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 CFO-Bank & Trust Segment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-146

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Chris Lee Mayer

Mailing Address 6200 Park Ave

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 CFO-Bank & Trust Segment

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 338.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-147

Amount of Each Receipt this Period
5.00

C.

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

Mailing Address 888 7th Ave
Fl 11

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 ▼ 1300.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-416

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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

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

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

FOR LINE NUMBER: PAGE 52 / 91
(check only one)
 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)
James P. McCaughan

Mailing Address 888 7th Ave
Fl 11

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 ▼ 1300.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-417
Amount of Each Receipt this Period 100.00

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

Mailing Address 13860 Ballantyne Corp PI
Principal Financial Group, Ste 400

City State Zip Code
Charlotte NC 28277-3167

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

Name of Employer Principal Life Ins Co. Occupation VP-Managing Dir, RIS Distrib

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-208
Amount of Each Receipt this Period 40.00

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

Mailing Address 13860 Ballantyne Corp PI
Principal Financial Group, Ste 400

City State Zip Code
Charlotte NC 28277-3167

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

Name of Employer Principal Life Ins Co. Occupation VP-Managing Dir, RIS Distrib

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-209
Amount of Each Receipt this Period 40.00

SUBTOTAL of Receipts This Page (optional) ► 180.00

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 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

A.

Full Name (Last, First, Middle Initial)
Barbara Ann McKenzie

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-61

Amount of Each Receipt this Period
32.00

B.

Full Name (Last, First, Middle Initial)
Barbara Ann McKenzie

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-62

Amount of Each Receipt this Period
32.00

C.

Full Name (Last, First, Middle Initial)
Shelly Marie Meighan

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation AVP-Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1088

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **89.00**

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 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation AVP-Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1089

Amount of Each Receipt this Period
25.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-13

Amount of Each Receipt this Period
38.46

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.74

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-14

Amount of Each Receipt this Period
38.46

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<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)
Timothy Jon Minard

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1196

Amount of Each Receipt this Period
65.00

B.

Full Name (Last, First, Middle Initial)
Timothy Jon Minard

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1235.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1197

Amount of Each Receipt this Period
65.00

C.

Full Name (Last, First, Middle Initial)
Jacque Sue Mohs

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-404

Amount of Each Receipt this Period
32.00

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

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

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

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

FOR LINE NUMBER: PAGE 56 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt 09 / 17 / 2010
Transaction ID: 20101005563-405
Amount of Each Receipt this Period 32.00

B. Full Name (Last, First, Middle Initial)
Barbara Carlson Mueller

Mailing Address 6200 Park Ave

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 Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 262.46

Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-63
Amount of Each Receipt this Period 1.00

C. Full Name (Last, First, Middle Initial)
Naim A. Munir

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP & Sr Chief Medical Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt 09 / 03 / 2010
Transaction ID: 20101005563-872
Amount of Each Receipt this Period 32.00

SUBTOTAL of Receipts This Page (optional) ▶ 65.00

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 57 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Naim A. Munir		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-873		
	City Des Moines	State IA	Zip Code 50392-0001	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 VP & Sr Chief Medical Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 608.00			

B.	Full Name (Last, First, Middle Initial) Mary Agnes O'Keefe		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-782		
	City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 44.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Marketing Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.37			

C.	Full Name (Last, First, Middle Initial) Mary Agnes O'Keefe		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2010		
	Mailing Address 711 High St		Transaction ID: 20101005563-783		
	City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 44.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Marketing Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.37			

SUBTOTAL of Receipts This Page (optional)	▶	120.46
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 58 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Director-Consumer Health

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.80

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1145

Amount of Each Receipt this Period
20.00

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

Mailing Address 521 5th Ave
5th Floor - Nlia

City State Zip Code
New York NY 10175-0003

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 ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-376

Amount of Each Receipt this Period
28.85

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

Mailing Address 521 5th Ave
5th Floor - Nlia

City State Zip Code
New York NY 10175-0003

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 ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-377

Amount of Each Receipt this Period
28.85

SUBTOTAL of Receipts This Page (optional) ► **77.70**

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 59 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

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

A.

Full Name (Last, First, Middle Initial)
Karen Arlene Pearston

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 535.66

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-582

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Karen Arlene Pearston

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 535.66

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-583

Amount of Each Receipt this Period
25.00

C.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-812

Amount of Each Receipt this Period
32.00

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 60 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-813

Amount of Each Receipt this Period
32.00

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

Mailing Address 11821 Palm Beach Blvd
Unit 126

City State Zip Code
Fort Myers FL 33905-5908

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 ▼ 365.37

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-938

Amount of Each Receipt this Period
19.23

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

Mailing Address 11821 Palm Beach Blvd
Unit 126

City State Zip Code
Fort Myers FL 33905-5908

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 ▼ 365.37

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-939

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ► **70.46**

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 61 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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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 St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Executive Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-460

Amount of Each Receipt this Period
16.00

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Executive Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-461

Amount of Each Receipt this Period
16.00

C.

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

Mailing Address 888 7th Ave
Fl 25

City State Zip Code
New York NY 10106-2599

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

Name of Employer Principal Life Ins Co. Occupation Chief Admin Officer-PGI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 428.73

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-162

Amount of Each Receipt this Period
22.77

SUBTOTAL of Receipts This Page (optional) ► 54.77

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: (check only one)	PAGE 62 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Christopher J. Reddy		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 888 7th Ave Fl 25		Transaction ID: 20101005563-163		
	City New York	State NY	Zip Code 10106-2599	Amount of Each Receipt this Period 22.83	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Principal Life Ins Co.	Occupation Chief Admin Officer-PGI			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 428.73			

B.	Full Name (Last, First, Middle Initial) R. Lucia Riddle		Date of Receipt MM / DD / YYYY 09 / 03 / 2010		
	Mailing Address 1350 I St NW Ste 880		Transaction ID: 20101005563-952		
	City Washington	State DC	Zip Code 20005-7207	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 950.00			

C.	Full Name (Last, First, Middle Initial) R. Lucia Riddle		Date of Receipt MM / DD / YYYY 09 / 17 / 2010		
	Mailing Address 1350 I St NW Ste 880		Transaction ID: 20101005563-953		
	City Washington	State DC	Zip Code 20005-7207	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	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 ▼ 950.00			

SUBTOTAL of Receipts This Page (optional)	122.83
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 63 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Full Name (Last, First, Middle Initial)
Michael Dennis Roughton

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 608.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-840
Amount of Each Receipt this Period: 32.00

B. Full Name (Last, First, Middle Initial)
Michael Dennis Roughton

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 608.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-841
Amount of Each Receipt this Period: 32.00

C. Full Name (Last, First, Middle Initial)
Angela Rae Sanders

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 380.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-31
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: (check only one)	PAGE 64 / 91
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Angela Rae Sanders		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-32
Name of Employer Principal Life Ins Co.		Occupation Chief Accounting 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 ▼ 380.00	<input type="text"/> 20.00

B.	Full Name (Last, First, Middle Initial) Irene Susan Scalfani		Date of Receipt
	Mailing Address 888 7th Ave FI 25		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010
	City	State	Zip Code
	New York	NY	10106-2599
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-402
Name of Employer Principal Life Ins Co.		Occupation Dir-Alliance Mgmt Group, RIS	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 ▼ 292.22	<input type="text"/> 15.38

C.	Full Name (Last, First, Middle Initial) Irene Susan Scalfani		Date of Receipt
	Mailing Address 888 7th Ave FI 25		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	New York	NY	10106-2599
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-403
Name of Employer Principal Life Ins Co.		Occupation Dir-Alliance Mgmt Group, RIS	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 ▼ 292.22	<input type="text"/> 15.38

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 50.76
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 65 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1275 NW 128th St
Ste 100

City State Zip Code
Clive IA 50325-7450

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

Name of Employer Principal Life Ins Co. Occupation VP-Natl Accts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-974
Amount of Each Receipt this Period: 32.00

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

Mailing Address 1275 NW 128th St
Ste 100

City State Zip Code
Clive IA 50325-7450

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

Name of Employer Principal Life Ins Co. Occupation VP-Natl Accts

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-975
Amount of Each Receipt this Period: 32.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-514
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 104.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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

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

A.

Full Name (Last, First, Middle Initial)
John Dennis Schmidt

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-515

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Gary Paul Scholten

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 855.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-370

Amount of Each Receipt this Period
45.00

C.

Full Name (Last, First, Middle Initial)
Gary Paul Scholten

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 855.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-371

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 67 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

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

Mailing Address 201 Jones Rd
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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 ▼ 292.22

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-462

Amount of Each Receipt this Period
15.38

B.

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

Mailing Address 201 Jones Rd
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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 ▼ 292.22

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-463

Amount of Each Receipt this Period
15.38

C.

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

Mailing Address 2732 Daniel Ave

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 Sr Investment Splcst-External

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-340

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► **46.76**

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 68 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2732 Daniel Ave

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 Sr Investment Spclst-External

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-341
Amount of Each Receipt this Period: 16.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 2090.00

Date of Receipt: 09 / 03 / 2010
Transaction ID: 20101005563-584
Amount of Each Receipt this Period: 110.00

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 2090.00

Date of Receipt: 09 / 17 / 2010
Transaction ID: 20101005563-585
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 69 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A.

Full Name (Last, First, Middle Initial)

Laurel Jean Shultz

Mailing Address 111 W State St

City State Zip Code
Mason City IA 50401-3131

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

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 627.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-654

Amount of Each Receipt this Period

33.00

B.

Full Name (Last, First, Middle Initial)

Laurel Jean Shultz

Mailing Address 111 W State St

City State Zip Code
Mason City IA 50401-3131

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

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

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 627.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-655

Amount of Each Receipt this Period

33.00

C.

Full Name (Last, First, Middle Initial)

Ellen Wilson Shumway

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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) ▼ 608.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-352

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

98.00

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 70 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Ellen Wilson Shumway

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Exec Director- Affiliate Op

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 608.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-353

Amount of Each Receipt this Period
32.00

B.

Full Name (Last, First, Middle Initial)
Tom Smith

Mailing Address 2000 Riveredge Pkwy NW
Ste 1000

City State Zip Code
Atlanta GA 30328-4657

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

Name of Employer Principal Life Ins Co. Occupation Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1206

Amount of Each Receipt this Period
28.85

C.

Full Name (Last, First, Middle Initial)
Tom Smith

Mailing Address 2000 Riveredge Pkwy NW
Ste 1000

City State Zip Code
Atlanta GA 30328-4657

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

Name of Employer Principal Life Ins Co. Occupation Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 548.15

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1207

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 71 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal International, Inc. Occupation Pres Int'l Asset Mgmt & Accum

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1461.48

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-896

Amount of Each Receipt this Period
76.92

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal International, Inc. Occupation Pres Int'l Asset Mgmt & Accum

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1461.48

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-897

Amount of Each Receipt this Period
76.92

C.

Full Name (Last, First, Middle Initial)
Kathleen M. Souhrada

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.22

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-598

Amount of Each Receipt this Period
15.38

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 72 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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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 St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.22

Date of Receipt 09 / 17 / 2010

Transaction ID: 20101005563-599

Amount of Each Receipt this Period 15.38

B.

Full Name (Last, First, Middle Initial)
Deanna Dawnette Strable-Soethout

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP Ind Life & Spec Benefits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.74

Date of Receipt 09 / 03 / 2010

Transaction ID: 20101005563-250

Amount of Each Receipt this Period 63.46

C.

Full Name (Last, First, Middle Initial)
Deanna Dawnette Strable-Soethout

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP Ind Life & Spec Benefits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1205.74

Date of Receipt 09 / 17 / 2010

Transaction ID: 20101005563-251

Amount of Each Receipt this Period 63.46

SUBTOTAL of Receipts This Page (optional) ► 142.30

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 73 / 91
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael Jerome Streck

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.60

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-842

Amount of Each Receipt this Period
15.40

B. Full Name (Last, First, Middle Initial)
Michael Jerome Streck

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 292.60

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-843

Amount of Each Receipt this Period
15.40

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

Mailing Address 888 7th Ave
Fl 25

City State Zip Code
New York NY 10106-2599

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 ▼ 261.75

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-802

Amount of Each Receipt this Period
9.62

SUBTOTAL of Receipts This Page (optional) ► **40.42**

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 74 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A.	Full Name (Last, First, Middle Initial) Maurice Randall Strickland		Date of Receipt
	Mailing Address 888 7th Ave Fl 25		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	New York	NY	10106-2599
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-803
Name of Employer Principal Life Ins Co.		Occupation Mng Dir-Consultant Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 261.75	<input type="text"/> 9.62

B.	Full Name (Last, First, Middle Initial) Karen S. Thomann		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2010
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-588
Name of Employer Principal Life Ins Co.		Occupation VP & CIO-Retire Investor Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 603.06	<input type="text"/> 31.74

C.	Full Name (Last, First, Middle Initial) Karen S. Thomann		Date of Receipt
	Mailing Address 711 High St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 17 / 2010
	City	State	Zip Code
	Des Moines	IA	50392-0001
	FEC ID number of contributing federal political committee. C		Transaction ID: 20101005563-589
Name of Employer Principal Life Ins Co.		Occupation VP & CIO-Retire Investor Svcs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 603.06	<input type="text"/> 31.74

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 73.10
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 75 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

A.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Asst Dir - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-212

Amount of Each Receipt this Period
15.38

B.

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

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Asst Dir - IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.22

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-213

Amount of Each Receipt this Period
15.38

C.

Full Name (Last, First, Middle Initial)
Terrence Michael Tobin

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Director-Prin Enterprise Cap

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1164

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 55.76

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 76 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)
Terrence Michael Tobin

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Director-Prin Enterprise Cap

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1165

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Leanne M. Valentine

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 603.06

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-664

Amount of Each Receipt this Period
31.74

C.

Full Name (Last, First, Middle Initial)
Leanne M. Valentine

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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 ▼ 603.06

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-665

Amount of Each Receipt this Period
31.74

SUBTOTAL of Receipts This Page (optional) ► **88.48**

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 77 / 91
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A.

Full Name (Last, First, Middle Initial)
Luke Joseph Vandermillen

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP RIS Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-712

Amount of Each Receipt this Period
35.00

B.

Full Name (Last, First, Middle Initial)
Luke Joseph Vandermillen

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP RIS Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 665.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-713

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Joseph B. Wallace

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Director-Capital Markets

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-546

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **85.00**

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 / 91

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial)

Joseph B. Wallace

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. Director-Capital Markets

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-547

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP Corporate Marketing

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: 20101005563-1134

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)

Steven Whitty

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Life Ins Co. VP Corporate Marketing

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

Date of Receipt

M M / D D / Y Y Y Y
09 / 17 / 2010

Transaction ID: 20101005563-1135

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

79.00

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 / 91
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

A.

Full Name (Last, First, Middle Initial)
Richard Harrison Wireman, II

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer
Principal Life Ins Co. Occupation
AVP-Tax Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-1002

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Richard Harrison Wireman, II

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer
Principal Life Ins Co. Occupation
AVP-Tax Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
MM / DD / YYYY
09 / 17 / 2010

Transaction ID: 20101005563-1003

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Larry Donald Zimpleman

Mailing Address 711 High St

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer
Principal Life Ins Co. Occupation
Chairman, President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3446.07

Date of Receipt
MM / DD / YYYY
09 / 03 / 2010

Transaction ID: 20101005563-650

Amount of Each Receipt this Period
192.30

SUBTOTAL of Receipts This Page (optional) ► **232.30**

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 80 / 91	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Larry Donald Zimpleman		Date of Receipt																					
	Mailing Address 711 High St		<table border="1"> <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>0</td><td>9</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	7		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		1	7		2	0	1	0														
	City	State	Zip Code		Transaction ID: 20101005563-651																			
	Des Moines	IA	50392-0001																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Principal Life Ins Co.		Occupation Chairman, President & CEO		<input type="text" value="192.30"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		<input type="text" value="3446.07"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="192.30"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7756.36"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Adrian Smith for Congress</p> <p>Mailing Address 3321 Avenue I Suite 6</p> <p>City State Zip Code Scottsbluff NE 69361</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Adrian M. Smith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NE District: 03</p>	<p>Transaction ID: 0BC5A86AE891E8BABDF</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Barney Frank for Congress Committee</p> <p>Mailing Address PO Box 260</p> <p>City State Zip Code Newtonville MA 02460</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Barney Frank</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MA District: 04</p>	<p>Transaction ID: F1FA4228FB6DE1C0C1D</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Boswell for Congress</p> <p>Mailing Address PO Box 6220</p> <p>City State Zip Code Des Moines IA 50309</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Leonard L. Boswell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 03</p>	<p>Transaction ID: 2BDFBAEA446625C7716</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Boswell for Congress <hr/> Mailing Address PO Box 6220 <hr/> City Des Moines State IA Zip Code 50309 <hr/> Purpose of Disbursement 2010 General Candidate Name Leonard L. Boswell <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 03 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3F3E35A6B94CAC9F8A5 Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Chris Coons for Delaware <hr/> Mailing Address PO Box 9900 <hr/> City Newark State DE Zip Code 19714 <hr/> Purpose of Disbursement 2010 General Candidate Name Christopher A. Coons <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 51CA431BFC9EDB04A9B Date of Disbursement 09 / 30 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Crowley for Congress <hr/> Mailing Address 84-56 Grand Avenue <hr/> City Elmhurst State NY Zip Code 11373 <hr/> Purpose of Disbursement 2010 General Candidate Name Joseph Crowley <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A246BA6490492D0C2EB Date of Disbursement 09 / 29 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Full Name (Last, First, Middle Initial) Grassley Committee Inc <hr/> Mailing Address PO Box 1000 <hr/> City Des Moines State IA Zip Code 50304 <hr/> Purpose of Disbursement 2010 General Candidate Name Charles E. Grassley <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 72D127261EA9F959A38 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Hoyer for Congress <hr/> Mailing Address 607 14th Street, NW Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2010 General Candidate Name Steny H. Hoyer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F11BEC13531352BEAF2 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Latham for Congress <hr/> Mailing Address PO Box 71 PO Box 71 <hr/> City Clarion State IA Zip Code 50525 <hr/> Purpose of Disbursement 2010 General Candidate Name Tom Latham <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 22BD253DF5C15936DD5 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

<p>A. Full Name (Last, First, Middle Initial) Loebsack for Congress</p> <p>Mailing Address PO Box 2720</p> <p>City Cedar Rapids State IA Zip Code 52406</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name David Loebsack</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 02</p>	<p>Transaction ID: 951FD617FB9889ED4A8</p> <p>Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B. Full Name (Last, First, Middle Initial) Mortgage Bankers Association Political Action Committee</p> <p>Mailing Address 1717 Rhode Island Ave NW Suite 400</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name Mortgage Bankers Association Political Action Comm- ittee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 0A0208670E1019C04F4</p> <p>Date of Disbursement 09 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>
<p>C. Full Name (Last, First, Middle Initial) Tim Johnson for South Dakota Inc</p> <p>Mailing Address PO Box 1536</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement 2014 Primary</p> <p>Candidate Name Tim Johnson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SD District:</p>	<p>Transaction ID: 2677F039D8CBCBA82BB</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 85 / 91

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A.

Full Name (Last, First, Middle Initial)
Tim Johnson for South Dakota Inc

Transaction ID: 0DEF3AF18E2EA929A8B

Date of Disbursement

Mailing Address PO Box 1536

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

City State Zip Code
Sioux Falls SD 57101

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2014 Primary

011

Category/
Type

Candidate Name
Tim Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SD District:

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

12000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<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) Amanda Ragan for Iowa Senate <hr/> Mailing Address 20 Granite Court SE <hr/> City Mason City State IA Zip Code 50401 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: E203132B0EF975F8616 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Concerned Taxpayers for Schulte <hr/> Mailing Address 1734 Chestnut Lane NE <hr/> City Cedar Rapids State IA Zip Code 52402 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EBD804F650B5D966717 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Heckroth for Senate <hr/> Mailing Address 416 West Bremer Avenue <hr/> City Waverly State IA Zip Code 50677 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4170ACCEBB00FD3E905 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 750.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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)

<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

<p>A. Full Name (Last, First, Middle Initial) Oldson for State Representative</p> <p>Mailing Address 418 38th Place</p> <p>City Des Moines State IA Zip Code 50312</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 821839B1CE443DE689C</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Paulsen for State House Committee</p> <p>Mailing Address P.O. Box 250</p> <p>City Hiawatha State IA Zip Code 52233</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5DE1CF943B75BA11B32</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1250.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Paustian for State House</p> <p>Mailing Address 389 West Parkview Drive</p> <p>City Walcott State IA Zip Code 52773</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</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5398E1FA66C690B96BD</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

<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) Pettengill for Iowans <hr/> Mailing Address P.O. Box 76 <hr/> City Mt. Auburn State IA Zip Code 52313 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5D3878963D0D04630F8 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Raecker for State Representative Committee <hr/> Mailing Address 9011 Iltis Drive <hr/> City Urbandale State IA Zip Code 50322 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 69BC2E934D420CCE008 Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 750.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Republican Party of Iowa <hr/> Mailing Address 621 E. Ninth Street <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EA05E205482977BFA7E Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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)

<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) Sands for State House <hr/> Mailing Address 134 Orchard Lane <hr/> City Columbus Junction State IA Zip Code 52738 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3CC854E603C123B4780 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 750.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Shomshor for Iowa House <hr/> Mailing Address 3018 Avenue M <hr/> City Council Bluffs State IA Zip Code 51501 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7460E4FE78EABC9B73C Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 750.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Soderberg for House <hr/> Mailing Address 800 2nd Street SE <hr/> City LeMars State IA Zip Code 51031 <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: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 03A92B42281984FB8FD Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 750.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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)

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<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)

Upmeyer for House

Mailing Address 2175 Pine Avenue

City State Zip Code
Garner IA 50438

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 9C4FFF0E23057DA2E59

Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

12000.00