

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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 06 01 2006 through 06 30 2006

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 MERLE PEDERSON

Signature of Treasurer Electronically Filed by MERLE PEDERSON Date 07 11 2006

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

**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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		30840.82
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	29741.12									
(c) Total Receipts (from Line 19)	21379.08	79871.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	51120.20	110712.00								
7. Total Disbursements (from Line 31)	31900.00	91491.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	19220.20	19220.20								
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	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	12318.90	27133.44
(i) Itemized (use Schedule A)	9060.18	52737.74
(ii) Unitemized	21379.08	79871.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	21379.08	79871.18
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))	21379.08	79871.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21379.08	79871.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	31.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	31.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15500.00	67500.00
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	10.00
(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	10.00
29. Other Disbursements.....	16400.00	23950.00
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))..	31900.00	91491.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	31900.00	91491.80

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	21379.08	79871.18
34. Total Contribution Refunds (from Line 28(d))	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21379.08	79861.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	31.80
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	31.80

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 89
	<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

Full Name (Last, First, Middle Initial) A. JOHN ASCHENBRENNER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13522
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer Principal Financial Group	Occupation President Ins & Fin Svcs	Lump Sum Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. MICHAEL BEER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13655
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. MICHAEL BEER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13654
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	3050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 89
	<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

Full Name (Last, First, Middle Initial) A. MICHAEL BEER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13656
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) B. LOUISE BILLMEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13699
City State Zip Code Des Moines IA 50392-5880	Amount of Each Receipt this Period 39.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP - CIO Financials & Corp Sys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 429.00	

Full Name (Last, First, Middle Initial) C. LOUISE BILLMEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13700
City State Zip Code Des Moines IA 50392-5880	Amount of Each Receipt this Period 39.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP - CIO Financials & Corp Sys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 468.00	

SUBTOTAL of Receipts This Page (optional) ▶	103.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 89
	<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

Full Name (Last, First, Middle Initial) A. LOUISE BILLMEYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13701
City State Zip Code Des Moines IA 50392-5880	Amount of Each Receipt this Period 39.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP - CIO Financials & Corp Sys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 507.00	

Full Name (Last, First, Middle Initial) B. KIM BLAUGHER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13721
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. KIM BLAUGHER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13720
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 89
	<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

Full Name (Last, First, Middle Initial) A. KIM BLAUGHER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13722
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. PATTI BLUMER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13732
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 44.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Asst Fed Legis Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 484.00	

Full Name (Last, First, Middle Initial) C. PATTI BLUMER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13734
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 44.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Asst Fed Legis Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 528.00	

SUBTOTAL of Receipts This Page (optional) ▶	108.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 89
	<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

Full Name (Last, First, Middle Initial) A. PATTI BLUMER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13733
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.00
Name of Employer Principal Financial Group	Occupation Asst Fed Legis Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 572.00	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER BOWMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13759
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER BOWMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13760
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional)	▶	120.92
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 89
	<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

Full Name (Last, First, Middle Initial) A. CHRISTOPHER BOWMAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13761
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. NED BURMEISTER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13854
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Principal Financial Group	Occupation Vice President- Trustar	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. NED BURMEISTER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13852
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Principal Financial Group	Occupation Vice President- Trustar	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	138.46
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 89
	<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

Full Name (Last, First, Middle Initial) A. NED BURMEISTER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13853	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation Vice President- Trustar			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. GREGORY BURROWS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13859	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation VP- RIS Mktg & Strategy Dvlpmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. GREGORY BURROWS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13860	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation VP- RIS Mktg & Strategy Dvlpmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional) ▶	126.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 89
	<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

Full Name (Last, First, Middle Initial) A. GREGORY BURROWS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13858
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP- RIS Mktg & Strategy Dvlpmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. NICHOLAS CECERE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13890
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Proprietary Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. NICHOLAS CECERE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13889
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Proprietary Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional) ▶	115.38
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 89
	<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

Full Name (Last, First, Middle Initial) A. NICHOLAS CECERE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13888	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP-Proprietary Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) B. JAMES CHARLING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13894	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP-Natl Accts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.50		

Full Name (Last, First, Middle Initial) C. JAMES CHARLING		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13896	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.50		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP-Natl Accts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 462.00		

SUBTOTAL of Receipts This Page (optional) ▶	115.46
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 89
	<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

Full Name (Last, First, Middle Initial) A. JAMES CHARLING		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13895
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.50
Name of Employer Principal Financial Group	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.50	

Full Name (Last, First, Middle Initial) B. BARRIE CHRISTMAN		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13914
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.17	

Full Name (Last, First, Middle Initial) C. BARRIE CHRISTMAN		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13912
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.64	

SUBTOTAL of Receipts This Page (optional)	▶	115.44
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 89
	<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

Full Name (Last, First, Middle Initial) A. BARRIE CHRISTMAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13913
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.11	

Full Name (Last, First, Middle Initial) B. CHARLES CHRISTOFILIS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13915
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Director-Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.64	

Full Name (Last, First, Middle Initial) C. CHARLES CHRISTOFILIS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13916
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Director-Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.88	

SUBTOTAL of Receipts This Page (optional) ▶	76.95
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 89
	<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)
CHARLES CHRISTOFILIS

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Director-Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.12

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.13917

Amount of Each Receipt this Period
19.24

B. Full Name (Last, First, Middle Initial)
TIMOTHY CLEARY

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation 2nd Vice President-ESG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 211.53

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

Transaction ID: SA11A1.13939

Amount of Each Receipt this Period
19.23

C. Full Name (Last, First, Middle Initial)
TIMOTHY CLEARY

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation 2nd Vice President-ESG

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

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

Transaction ID: SA11A1.13941

Amount of Each Receipt this Period
19.23

SUBTOTAL of Receipts This Page (optional) ▶ 57.70

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 89
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. TIMOTHY CLEARY		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.13940
City Des Moines	State IA	Amount of Each Receipt this Period 19.23
Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) B. RONALD DANILSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14039
City Des Moines	State IA	Amount of Each Receipt this Period 40.00
Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) C. RONALD DANILSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14038
City Des Moines	State IA	Amount of Each Receipt this Period 40.00
Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	▶	99.23
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 89
	<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

Full Name (Last, First, Middle Initial) A. RONALD DANILSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14040	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) B. JAMES DEVRIES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14074	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP - Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06		

Full Name (Last, First, Middle Initial) C. JAMES DEVRIES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14075	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP - Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52		

SUBTOTAL of Receipts This Page (optional) ▶	116.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 89
	<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)
JAMES DEVRIES

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation SVP - Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.98

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: SA11A1.14076

Amount of Each Receipt this Period
38.46

B. Full Name (Last, First, Middle Initial)
DAVID DRURY

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Retiree

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 13 / 2006

Transaction ID: SA11A1.13525

Amount of Each Receipt this Period
1000.00

Lump Sum Contribution

C. Full Name (Last, First, Middle Initial)
RALPH EUCHER

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP Retirement & Invest Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 02 / 2006

Transaction ID: SA11A1.14140

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 1063.46

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 89
	<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

Full Name (Last, First, Middle Initial) A. RALPH EUCHER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14141
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. RALPH EUCHER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14142
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. NORA EVERETT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14151
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional) ▶	88.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 89
	<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

Full Name (Last, First, Middle Initial) A. NORA EVERETT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14150
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) B. NORA EVERETT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14149
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) C. DOUGLAS FELTZ		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14159
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Dir of Sales-Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.95	

SUBTOTAL of Receipts This Page (optional) ▶	93.07
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 89
	<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

Full Name (Last, First, Middle Initial) A. DOUGLAS FICK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14170
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.25	

Full Name (Last, First, Middle Initial) B. DOUGLAS FICK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14171
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	

Full Name (Last, First, Middle Initial) C. DOUGLAS FICK		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14172
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.75	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 373.75	

SUBTOTAL of Receipts This Page (optional) ▶	86.25
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 89
	<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

Full Name (Last, First, Middle Initial) A. MICHAEL FINNEGAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14180	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation 2nd VP--Investment Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53		

Full Name (Last, First, Middle Initial) B. MICHAEL FINNEGAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14179	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation 2nd VP--Investment Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76		

Full Name (Last, First, Middle Initial) C. MICHAEL FINNEGAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14181	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation 2nd VP--Investment Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99		

SUBTOTAL of Receipts This Page (optional) ▶	57.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 89
	<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

Full Name (Last, First, Middle Initial) A. ROBERT FORD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14211	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Sr Actuary and Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.73		

Full Name (Last, First, Middle Initial) B. ROBERT FORD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14212	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Sr Actuary and Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.16		

Full Name (Last, First, Middle Initial) C. ROBERT FORD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14213	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.43		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Sr Actuary and Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 278.59		

SUBTOTAL of Receipts This Page (optional) ▶	64.29
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 89
	<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

Full Name (Last, First, Middle Initial) A. PAUL FROMM		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14269
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Marketing- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

Full Name (Last, First, Middle Initial) B. PAUL FROMM		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14268
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Marketing- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) C. PAUL FROMM		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14270
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Marketing- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

SUBTOTAL of Receipts This Page (optional) ▶	57.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 27 / 89
	<input checked="" 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

Full Name (Last, First, Middle Initial) A. MICHAEL GERSIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14293
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 80.00
Name of Employer Principal Financial Group Occupation Exec VP & CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00

Full Name (Last, First, Middle Initial) B. MICHAEL GERSIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14291
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 80.00
Name of Employer Principal Financial Group Occupation Exec VP & CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00

Full Name (Last, First, Middle Initial) C. MICHAEL GERSIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14292
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 80.00
Name of Employer Principal Financial Group Occupation Exec VP & CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1040.00

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 89
	<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)
THOMAS GRAF

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP-Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: SA11A1.14341

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
THOMAS GRAF

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP-Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2006

Transaction ID: SA11A1.14339

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
THOMAS GRAF

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP-Investor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.14340

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)	▶	450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 89
	<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

Full Name (Last, First, Middle Initial) A. LYNN GRAVES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14350
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Executive Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

Full Name (Last, First, Middle Initial) B. LYNN GRAVES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14349
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Executive Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. LYNN GRAVES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14348
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Executive Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00	

SUBTOTAL of Receipts This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 89
	<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

Full Name (Last, First, Middle Initial) A. J BARRY GRISWELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14361
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Principal Financial Group	Occupation Chairman-President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2115.30	

Full Name (Last, First, Middle Initial) B. J BARRY GRISWELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14362
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Principal Financial Group	Occupation Chairman-President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2307.60	

Full Name (Last, First, Middle Initial) C. J BARRY GRISWELL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14360
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer Principal Financial Group	Occupation Chairman-President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	

SUBTOTAL of Receipts This Page (optional)	▶	576.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 89
	<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

Full Name (Last, First, Middle Initial) A. DOUGLAS GROVE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14366
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. DOUGLAS GROVE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14367
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. DOUGLAS GROVE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14368
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 89
	<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

Full Name (Last, First, Middle Initial) A. STEPHEN HAMILTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14396
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 17.45	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP of Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.40	

Full Name (Last, First, Middle Initial) B. STEPHEN HAMILTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14397
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 17.45	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP of Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.85	

Full Name (Last, First, Middle Initial) C. LORAINNE HARDIN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14414
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP-Production-PRMI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) ▶	59.90
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 89
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. LORAINÉ HARDIN		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14415
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation SVP-Production-PRMI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. LORAINÉ HARDIN		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14413
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation SVP-Production-PRMI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. MONICA HAUN		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14434
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

SUBTOTAL of Receipts This Page (optional)	69.23
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 89
	<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

Full Name (Last, First, Middle Initial) A. MONICA HAUN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14433	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation 2nd VP-IT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) B. MONICA HAUN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14435	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation 2nd VP-IT			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) C. JOYCE HOFFMAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14498	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group Occupation SVP & Corporate Secretary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 423.06	

SUBTOTAL of Receipts This Page (optional) ▶	76.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 89
	<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

Full Name (Last, First, Middle Initial) A. JOYCE HOFFMAN		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14496
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation SVP & Corporate Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) B. JOYCE HOFFMAN		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14497
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation SVP & Corporate Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) C. DENNIS HOLLAND		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14502
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Principal Financial Group	Occupation Special Mkt Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	126.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 89
	<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

Full Name (Last, First, Middle Initial) A. DANIEL HOUSTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14527
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 18.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.06	

Full Name (Last, First, Middle Initial) B. DANIEL HOUSTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14526
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 18.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.52	

Full Name (Last, First, Middle Initial) C. DANIEL HOUSTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14525
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 18.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 239.98	

SUBTOTAL of Receipts This Page (optional) ▶	55.38
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 89
	<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

Full Name (Last, First, Middle Initial) A. BRADLEY JENSEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14562
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 232.65	

Full Name (Last, First, Middle Initial) B. BRADLEY JENSEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14563
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 253.80	

Full Name (Last, First, Middle Initial) C. BRADLEY JENSEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14564
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.15	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.95	

SUBTOTAL of Receipts This Page (optional) ▶	63.45
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 89
	(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

Full Name (Last, First, Middle Initial) A. CAREY JURY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14604
City State Zip Code Des Moines IA 50392-6100	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Group Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

Full Name (Last, First, Middle Initial) B. CAREY JURY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14606
City State Zip Code Des Moines IA 50392-6100	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Group Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. CAREY JURY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14605
City State Zip Code Des Moines IA 50392-6100	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Group Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 89
	<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

Full Name (Last, First, Middle Initial) A. CLIFFORD KARTHAUSER		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14633
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer Principal Financial Group	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. MONICA KIRGAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14659
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.24
Name of Employer Principal Financial Group	Occupation VP-Individual Investor Mkt Seg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.69	

Full Name (Last, First, Middle Initial) C. MONICA KIRGAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14660
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.24
Name of Employer Principal Financial Group	Occupation VP-Individual Investor Mkt Seg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.93	

SUBTOTAL of Receipts This Page (optional)	▶	121.48
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 40 / 89
	<input checked="" 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

Full Name (Last, First, Middle Initial) A. MONICA KIRGAN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14661
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 33.24	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Individual Investor Mkt Seg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.17	

Full Name (Last, First, Middle Initial) B. PETER KORNWEISS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14680
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Preferred Product Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. PETER KORNWEISS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14681
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Preferred Product Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 302.50	

SUBTOTAL of Receipts This Page (optional) ▶	88.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 89
	<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

Full Name (Last, First, Middle Initial) A. PETER KORNWEISS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14682
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Preferred Product Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. ELLEN LAMALE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14704
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) C. ELLEN LAMALE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14703
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

SUBTOTAL of Receipts This Page (optional) ▶	167.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 89
	<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

Full Name (Last, First, Middle Initial) A. ELLEN LAMALE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14705
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	

Full Name (Last, First, Middle Initial) B. JULIA LAWLER-JOHNSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14722
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Inv Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. JULIA LAWLER-JOHNSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14723
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Inv Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional) ▶	170.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 89
	<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

Full Name (Last, First, Middle Initial) A. JULIA LAWLER-JOHNSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14721
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Principal Financial Group	Occupation Sr VP & Chief Inv Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. RICHARD LAWSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14724
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP-Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. RICHARD LAWSON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14726
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP-Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional)	▶	126.92
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 89
	<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

Full Name (Last, First, Middle Initial) A. RICHARD LAWSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14725
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. SCOTT LEIBERTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14733
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Mng Dir-Mktg & Product Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. SCOTT LEIBERTON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14734
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Mng Dir-Mktg & Product Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	78.46
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 89
	<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)
SCOTT LEIBERTON

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Mng Dir-Mktg & Product Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.14735

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
GREGORY LINDE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP-Product Mgmt & Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

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

Transaction ID: SA11A1.14761

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
GREGORY LINDE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP-Product Mgmt & Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

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

Transaction ID: SA11A1.14760

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 89
	<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)
GREGORY LINDE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP-Product Mgmt & Service

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.14762

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
DENNIS LONG

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Vice President-ESG

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 423.06

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

Transaction ID: SA11A1.14768

Amount of Each Receipt this Period
38.46

C. Full Name (Last, First, Middle Initial)
DENNIS LONG

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Vice President-ESG

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 461.52

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

Transaction ID: SA11A1.14767

Amount of Each Receipt this Period
38.46

SUBTOTAL of Receipts This Page (optional)	▶	106.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 89
	<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

Full Name (Last, First, Middle Initial) A. DENNIS LONG		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14766	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Vice President-ESG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98		

Full Name (Last, First, Middle Initial) B. CHRIS MAYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14819	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 17.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation 2nd VP & Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00		

Full Name (Last, First, Middle Initial) C. CHRIS MAYER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14820	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 17.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation 2nd VP & Actuary		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00		

SUBTOTAL of Receipts This Page (optional) ▶	72.46
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 89
	<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

Full Name (Last, First, Middle Initial) A. JAMES MCCAUGHAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14833
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer Principal Financial Group	Occupation President-Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1269.18	

Full Name (Last, First, Middle Initial) B. JAMES MCCAUGHAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14831
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer Principal Financial Group	Occupation President-Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.56	

Full Name (Last, First, Middle Initial) C. JAMES MCCAUGHAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14832
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer Principal Financial Group	Occupation President-Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.94	

SUBTOTAL of Receipts This Page (optional)	▶	346.14
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 89
	<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

Full Name (Last, First, Middle Initial) A. BARBARA MCKENZIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14850
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Principal Financial Group	Occupation Exec Dir-Int'l Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. BARBARA MCKENZIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14852
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Principal Financial Group	Occupation Exec Dir-Int'l Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. BARBARA MCKENZIE		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14851
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Principal Financial Group	Occupation Exec Dir-Int'l Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 89
	<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

Full Name (Last, First, Middle Initial) A. ARTHUR MCMAHON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14858
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.87
Name of Employer Principal Financial Group	Occupation 2nd VP - Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.57	

Full Name (Last, First, Middle Initial) B. ARTHUR MCMAHON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14859
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.87
Name of Employer Principal Financial Group	Occupation 2nd VP - Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 286.44	

Full Name (Last, First, Middle Initial) C. ARTHUR MCMAHON		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14860
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.87
Name of Employer Principal Financial Group	Occupation 2nd VP - Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.31	

SUBTOTAL of Receipts This Page (optional)	▶	71.61
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 89
	<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

Full Name (Last, First, Middle Initial) A. SHELLY MEIGHAN		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14868
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation 2nd VP Product Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. SHELLY MEIGHAN		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14869
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation 2nd VP Product Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. SHELLY MEIGHAN		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14867
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation 2nd VP Product Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 89
	<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

Full Name (Last, First, Middle Initial) A. DAVID MILES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14883	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP Prod Dvlpmnt - Mutual Funds		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) B. DAVID MILES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14882	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP Prod Dvlpmnt - Mutual Funds		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. DAVID MILES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14884	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP Prod Dvlpmnt - Mutual Funds		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 89
	<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

Full Name (Last, First, Middle Initial) A. AMY MILLS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14898
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP & Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. AMY MILLS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14897
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP & Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) C. AMY MILLS		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14896
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP & Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional)	▶	115.38
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 89
	<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

Full Name (Last, First, Middle Initial) A. MARK MOVIC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14947
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation VP-Insured Medical Products	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.17	

Full Name (Last, First, Middle Initial) B. MARK MOVIC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14948
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation VP-Insured Medical Products	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.64	

Full Name (Last, First, Middle Initial) C. MARK MOVIC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14949
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation VP-Insured Medical Products	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.11	

SUBTOTAL of Receipts This Page (optional)	▶	115.41
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 89
	<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

Full Name (Last, First, Middle Initial) A. LUIS NUNES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14995
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP Corp & Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. LUIS NUNES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14997
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP Corp & Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) C. LUIS NUNES		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.14996
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP Corp & Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional) ▶	115.38
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 89
	<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

Full Name (Last, First, Middle Initial) A. MARY O'KEEFE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15014
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SrVP & Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) B. MARY O'KEEFE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15015
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SrVP & Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

Full Name (Last, First, Middle Initial) C. MARY O'KEEFE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15013
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SrVP & Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

SUBTOTAL of Receipts This Page (optional) ▶	115.38
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 89
	<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)
HUGH O'TOOLE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP- Registered Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2006

Transaction ID: SA11A1.15030

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
HUGH O'TOOLE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP- Registered Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2006

Transaction ID: SA11A1.15031

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
HUGH O'TOOLE

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP- Registered Product

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: SA11A1.15029

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 89
	<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

Full Name (Last, First, Middle Initial) A. MERLE PEDERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15056
City State Zip Code Des Moines IA 50392-0220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. MERLE PEDERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15057
City State Zip Code Des Moines IA 50392-0220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. MERLE PEDERSON		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15058
City State Zip Code Des Moines IA 50392-0220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 89
	<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

Full Name (Last, First, Middle Initial) A. PETER PRODOEHL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15135
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

Full Name (Last, First, Middle Initial) B. PETER PRODOEHL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15134
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

Full Name (Last, First, Middle Initial) C. PETER PRODOEHL		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15133
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

SUBTOTAL of Receipts This Page (optional) ▶	57.69
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 89
	<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

Full Name (Last, First, Middle Initial) A. CHRISTOPHER REDDY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15170
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 22.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP (Pen Admin)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 329.15	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER REDDY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15169
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 22.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP (Pen Admin)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 351.32	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER REDDY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15171
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 22.17	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP (Pen Admin)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 373.49	

SUBTOTAL of Receipts This Page (optional) ▶	66.51
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 89
	<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

Full Name (Last, First, Middle Initial) A. R LUCIA RIDDLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15209
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

Full Name (Last, First, Middle Initial) B. R LUCIA RIDDLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15210
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) C. R LUCIA RIDDLE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15208
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional) ▶	90.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 89
	<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

Full Name (Last, First, Middle Initial) A. ROBERT SALVA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15272
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Preferred Prod Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. ROBERT SALVA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15273
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Preferred Prod Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. ROBERT SALVA		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15274
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation 2nd VP Preferred Prod Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional) ▶	60.00
TOTAL This Period (last page this line number only) ▶	60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 89
	<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

Full Name (Last, First, Middle Initial) A. JOHN SCHMIDT		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15316
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation VP & Sr. Tax Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00

Full Name (Last, First, Middle Initial) B. JOHN SCHMIDT		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15317
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation VP & Sr. Tax Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00

Full Name (Last, First, Middle Initial) C. JOHN SCHMIDT		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15318
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation VP & Sr. Tax Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 89
	<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

Full Name (Last, First, Middle Initial) A. GARY SCHOLTEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15327
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SR VP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) B. GARY SCHOLTEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15325
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SR VP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) C. GARY SCHOLTEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15326
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SR VP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 89
	<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

Full Name (Last, First, Middle Initial) A. EDWARD SCHUH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15336	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Investment Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

Full Name (Last, First, Middle Initial) B. KAREN SHAFF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15344	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Exec VP - General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) C. KAREN SHAFF		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15346	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Exec VP - General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional) ▶	216.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 89
	<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

Full Name (Last, First, Middle Initial) A. KAREN SHAFF		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15345
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Exec VP - General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) B. MARTHA SHEPARD		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15349
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP & General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. MARTHA SHEPARD		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15347
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP & General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional) ▶	176.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 89
	<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

Full Name (Last, First, Middle Initial) A. MARTHA SHEPARD		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15348
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP & General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. MEG SKINNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15362
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 57.69	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP Life & Health Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 634.59	

Full Name (Last, First, Middle Initial) C. MEG SKINNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15364
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 57.69	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation SVP Life & Health Distribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

SUBTOTAL of Receipts This Page (optional) ▶	153.84
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 89
	<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

Full Name (Last, First, Middle Initial) A. MEG SKINNER		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15363	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 57.69		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation SVP Life & Health Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.97		

Full Name (Last, First, Middle Initial) B. TOM SMITH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15374	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.85		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP of Sales - Retirement Svcs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.35		

Full Name (Last, First, Middle Initial) C. TOM SMITH		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15376	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.85		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP of Sales - Retirement Svcs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.20		

SUBTOTAL of Receipts This Page (optional) ▶	115.39
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 89
	<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

Full Name (Last, First, Middle Initial) A. TOM SMITH		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15375
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 28.85
Name of Employer Principal Financial Group	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.05	

Full Name (Last, First, Middle Initial) B. NORMAN SORENSEN		Date of Receipt MM / DD / YYYY 06 / 02 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15380
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92
Name of Employer Principal Financial Group	Occupation Sr VP-Int'l Asset Accumulation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) C. NORMAN SORENSEN		Date of Receipt MM / DD / YYYY 06 / 16 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15382
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 76.92
Name of Employer Principal Financial Group	Occupation Sr VP-Int'l Asset Accumulation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.04	

SUBTOTAL of Receipts This Page (optional)	182.69
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 89
	<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

Full Name (Last, First, Middle Initial) A. NORMAN SORENSEN		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15381	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 76.92		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation Sr VP-Int'l Asset Accumulation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 999.96		

Full Name (Last, First, Middle Initial) B. DEANNA STRABLE-SOETHOUT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15432	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP-Speciality Benefits Div		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) C. DEANNA STRABLE-SOETHOUT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15433	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP-Speciality Benefits Div		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	126.92
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 89
	<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

Full Name (Last, First, Middle Initial) A. DEANNA STRABLE-SOETHOUT		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15431
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-Speciality Benefits Div	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

Full Name (Last, First, Middle Initial) B. DANIEL THOMAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15497
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 211.53	

Full Name (Last, First, Middle Initial) C. DANIEL THOMAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15498
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 89
	<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

Full Name (Last, First, Middle Initial) A. DANIEL THOMAS		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15496
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation Program Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 249.99	

Full Name (Last, First, Middle Initial) B. HUGH WHITE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15662
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP of Sales - Group Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. HUGH WHITE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15663
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP of Sales - Group Benefits	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	59.23
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 89
	<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

Full Name (Last, First, Middle Initial) A. HUGH WHITE		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15664	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP of Sales - Group Benefits		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) B. STEVEN WHITTY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15668	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP Group Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

Full Name (Last, First, Middle Initial) C. STEVEN WHITTY		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15669	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Financial Group	Occupation VP Group Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional) ▶	80.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 89
	<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

Full Name (Last, First, Middle Initial) A. STEVEN WHITTY		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15670
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP Group Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) B. WILLIAM WORKMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15700
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-IT Life & Disability	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	

Full Name (Last, First, Middle Initial) C. WILLIAM WORKMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15698
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Financial Group	Occupation VP-IT Life & Disability	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.52	

SUBTOTAL of Receipts This Page (optional) ▶	106.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 89
	<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

Full Name (Last, First, Middle Initial) A. WILLIAM WORKMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15699
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group Occupation VP-IT Life & Disability	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 499.98	

Full Name (Last, First, Middle Initial) B. LARRY ZIMPLEMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15718
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.20
Name of Employer Principal Financial Group Occupation President-Ret & Investor Svcs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 277.20	

Full Name (Last, First, Middle Initial) C. LARRY ZIMPLEMAN		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.15720
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.20
Name of Employer Principal Financial Group Occupation President-Ret & Investor Svcs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 302.40	

SUBTOTAL of Receipts This Page (optional)	88.86
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 76 / 89	
	(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 ZIMPLEMAN

Mailing Address Principal Financial Group
711 High Street

City State Zip Code
Des Moines IA 50392-0001

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

Name of Employer Occupation
Principal Financial Group President-Ret & Investor Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
327.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: SA11A1.15719

Amount of Each Receipt this Period
25.20

SUBTOTAL of Receipts This Page (optional)	▶	25.20
TOTAL This Period (last page this line number only)	▶	12318.90

**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

Full Name (Last, First, Middle Initial) A. Barney Frank for Congress		Transaction ID: SB23.13505 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 38 Ivy Street SE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Barney Frank		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Blue Dog PAC		Transaction ID: SB23.13478 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 236 Massachusetts Avenue, NE Suite 508		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement PAC to PAC		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Boswell for Congress		Transaction ID: SB23.13511 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 301 4th Street, NE Suite 202		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Leonard Boswell		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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

Full Name (Last, First, Middle Initial) A. Crowley for Congress		Transaction ID: SB23.13503 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 426 C Street, NE		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Joseph Crowley	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 7			

Full Name (Last, First, Middle Initial) B. ERIC PAC		Transaction ID: SB23.13508 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address c/o Eric Cantor 209 Pennsylvania Avenue, SE		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement PAC to PAC	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Friends of Joe Lieberman		Transaction ID: SB23.13502 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 236 Massachusetts Avenue NE Suite 206		Amount of Each Disbursement this Period 1000.00	
City Washington State DC Zip Code 20002	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Joe Lieberman	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District:			

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

Full Name (Last, First, Middle Initial) A. Friends of John Tanner		Transaction ID: SB23.13474 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 236 Massachusetts Avenue, NE Suite 208		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20002		
Purpose of Disbursement Contribution Candidate Name John Tanner Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 8		

Full Name (Last, First, Middle Initial) B. Friends of Max Baucus		Transaction ID: SB23.13509 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 818 Connecticut Avenue, NW Suite 1100		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20006		
Purpose of Disbursement Contribution Candidate Name Max Baucus Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District:		

Full Name (Last, First, Middle Initial) C. Moore for Congress		Transaction ID: SB23.13501 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address P.O. Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013-5214		
Purpose of Disbursement Contribution Candidate Name Dennis Moore Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KS District: 3		

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)

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<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

Full Name (Last, First, Middle Initial) A. Royce Campaign Committee		Transaction ID: SB23.13477 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 2525		Amount of Each Disbursement this Period 1000.00
City Orange State CA Zip Code 92859	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Ed Royce		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Snowe for Senate		Transaction ID: SB23.13476 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 2006		Amount of Each Disbursement this Period 1000.00
City Portland State ME Zip Code 04101	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Olympia Snowe		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Team Sununu		Transaction ID: SB23.13475 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address 1331 H Street, NW 12th Floor		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20005	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Sununu		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input 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

Full Name (Last, First, Middle Initial) A. TOMPAC - c/o Representative Tom Reynolds		Transaction ID: SB23.13504 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address P.O. Box 16488		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22215	Purpose of Disbursement PAC to PAC	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Trent Lott for Mississippi		Transaction ID: SB23.13473 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6
Mailing Address P.O. Box 22824		Amount of Each Disbursement this Period 1000.00
City Jackson State MS Zip Code 39225	Purpose of Disbursement Contribution	
Candidate Name Trent Lott	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Washington Senate Victory		Transaction ID: SB23.13506 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address c/o Tracey Buckman Whaley 1602 Belle View Boulevard, #510		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22307	Purpose of Disbursement Contribution	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District:	Disbursement For: 2006 <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) ▶	15500.00

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

Full Name (Last, First, Middle Initial) A. Angelo for Senate		Transaction ID: SB29.13520 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 808 W. Jefferson		Amount of Each Disbursement this Period 750.00
City Creston State IA Zip Code 50801		
Purpose of Disbursement Contribution Candidate Name Jeff Angelo Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 48		
Category/Type		

Full Name (Last, First, Middle Initial) B. Boal For Iowa House		Transaction ID: SB29.13519 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 3301 S.W. Timbergreen Road		Amount of Each Disbursement this Period 500.00
City Ankeny State IA Zip Code 50021		
Purpose of Disbursement Contribution Candidate Name Carmine Boal Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 65		
Category/Type		

Full Name (Last, First, Middle Initial) C. Brian Quirk for State Representative		Transaction ID: SB29.13493 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 1011 Sunset		Amount of Each Disbursement this Period 300.00
City New Hampton State IA Zip Code 50659		
Purpose of Disbursement Contribution Candidate Name Brian Quirk Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 30		
Category/Type		

SUBTOTAL of Disbursements This Page (optional) ▶	1550.00
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

Full Name (Last, First, Middle Initial) A. Danielson for Senate		Transaction ID: SB29.13517 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 3906 Monterey Drive		Amount of Each Disbursement this Period 750.00
City Waterloo State IA Zip Code 50701-3527		
Purpose of Disbursement Contribution Candidate Name Jeff Danielson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:		
Category/Type		

Full Name (Last, First, Middle Initial) B. Gipp for Representative Committee		Transaction ID: SB29.13490 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 212 High		Amount of Each Disbursement this Period 1500.00
City Decorah State IA Zip Code 52101		
Purpose of Disbursement Contribution Candidate Name Chuck Gipp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 16		
Category/Type		

Full Name (Last, First, Middle Initial) C. Huser for State Representative		Transaction ID: SB29.13516 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 213 7th Street NW		Amount of Each Disbursement this Period 750.00
City Altoona State IA Zip Code 50009		
Purpose of Disbursement Contribution Candidate Name Geri Huser Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 42		
Category/Type		

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 84 / 89

<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

Full Name (Last, First, Middle Initial) A. Iowa Democratic Party		Transaction ID: SB29.13495 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address c/o Molly Scherrman 5661 Fleur Drive		Amount of Each Disbursement this Period 2000.00
City Des Moines State IA Zip Code 50321	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Jim Van Fossen for State House		Transaction ID: SB29.13514 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address #13 Enchanted Island		Amount of Each Disbursement this Period 250.00
City Davenport State IA Zip Code 52802	Purpose of Disbursement Contribution	
Candidate Name James (Jim) Van Fossen		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 84		

Full Name (Last, First, Middle Initial) C. Lundby for Iowa Senate		Transaction ID: SB29.13488 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 563		Amount of Each Disbursement this Period 1000.00
City Marion State IA Zip Code 52302	Purpose of Disbursement Contribution	
Candidate Name Mary Lundby		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3250.00
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

Full Name (Last, First, Middle Initial) A. McCarthy for State Representative		Transaction ID: SB29.13486 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 5220 SE 31st Court		Amount of Each Disbursement this Period 600.00
City Des Moines State IA Zip Code 50320	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Kevin McCarthy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 67	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. People for Beall		Transaction ID: SB29.13484 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 1928 N 22nd Street		Amount of Each Disbursement this Period 250.00
City Ft. Dodge State IA Zip Code 50501	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Daryl Beall		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Petersen for State Representative		Transaction ID: SB29.13491 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 4300 Beaver Hills Drive		Amount of Each Disbursement this Period 500.00
City Des Moines State IA Zip Code 50310-6300	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Janet Petersen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 64	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1350.00
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)

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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

Full Name (Last, First, Middle Initial) A. Pettengill for lowans		Transaction ID: SB29.13492 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address P.O. Box 76		Amount of Each Disbursement this Period 500.00
City Mt. Auburn	State IA	
Zip Code 52313		
Purpose of Disbursement Contribution Candidate Name Dawn Pettengill Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 39		

Full Name (Last, First, Middle Initial) B. Rants for State House		Transaction ID: SB29.13487 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 2740 South Glass Street		Amount of Each Disbursement this Period 1500.00
City Sioux City	State IA	
Zip Code 51106		
Purpose of Disbursement Contribution Candidate Name Christopher Rants Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 54		

Full Name (Last, First, Middle Initial) C. Reasoner for State Representative		Transaction ID: SB29.13512 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6
Mailing Address 702 New York Avenue		Amount of Each Disbursement this Period 450.00
City Creston	State IA	
Zip Code 50801		
Purpose of Disbursement Contribution Candidate Name Mike Reasoner Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 95		

SUBTOTAL of Disbursements This Page (optional) ▶	2450.00
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 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. Rielly for Senate Full Name (Last, First, Middle Initial) Mailing Address 113 North Market Street City Oskaloosa State IA Zip Code 52577 Purpose of Disbursement Contribution Candidate Name Tom Rielly Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29.13518 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6 Amount of Each Disbursement this Period 750.00
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B. Senate Truman Fund Full Name (Last, First, Middle Initial) Mailing Address c/o Senator Mike Gronstal 5661 Fleur Drive City Des Moines State IA Zip Code 50321 Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29.13496 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6 Amount of Each Disbursement this Period 2000.00
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C. Shull Election Committee Full Name (Last, First, Middle Initial) Mailing Address 901 Scott Felton Road City Indianola State IA Zip Code 50125 Purpose of Disbursement Contribution Candidate Name Doug Shull Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 37 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: SB29.13472 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period 300.00
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SUBTOTAL of Disbursements This Page (optional) ▶	3050.00
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

Full Name (Last, First, Middle Initial) A. Steve Olson for State Representative		Transaction ID: SB29.13513 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 2176 210th Street		Amount of Each Disbursement this Period 300.00
City Grand Mound	State IA	
Zip Code 52751		
Purpose of Disbursement Contribution Candidate Name Steve Olson Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 83		

Full Name (Last, First, Middle Initial) B. Swati Dandekar Campaign Committee		Transaction ID: SB29.13515 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6
Mailing Address 2731 28th Avenue		Amount of Each Disbursement this Period 300.00
City Marion	State IA	
Zip Code 52302		
Purpose of Disbursement Contribution Candidate Name Swati Dandekar Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 36		

Full Name (Last, First, Middle Initial) C. Warnstadt for Senate Committee		Transaction ID: SB29.13485 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 3301 Chambers Street		Amount of Each Disbursement this Period 750.00
City Sioux City	State IA	
Zip Code 51104		
Purpose of Disbursement Contribution Candidate Name Steve Warnstadt Category/Type		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 1		

SUBTOTAL of Disbursements This Page (optional) ▶	1350.00
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)

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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

Full Name (Last, First, Middle Initial)

A. Wise Voters

Mailing Address 503 Grand Avenue

City Keokuk State IA Zip Code 52632

Purpose of Disbursement
Contribution

Candidate Name
Phil Wise

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: IA District: 92

Transaction ID: SB29.13494

Date of Disbursement

/ /

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

400.00

TOTAL This Period (last page this line number only)

16400.00