

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Principal Life Insurance Company Political Action Committee

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

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

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

5. Covering Period 07 / 01 / 2013 through 07 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Rich Wireman

Signature of Treasurer Mr. Rich Wireman [Electronically Filed] Date 08 / 07 / 2013

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="54878.67"/>	<input type="text" value="54878.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="94941.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="18923.17"/>	<input type="text" value="143317.98"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="113864.67"/>	<input type="text" value="198196.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33250.00"/>	<input type="text" value="117581.98"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="80614.67"/>	<input type="text" value="80614.67"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Principal Life Insurance Company Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11277.40	57410.58
(ii) Unitemized .....	7645.77	82407.40
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18923.17	139817.98
(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) .....	18923.17	139817.98
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	3500.00
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 Transfers (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))..... ▶	18923.17	143317.98
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18923.17	143317.98

**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) Allocated 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	81.98
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	81.98
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	108000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	7250.00	9500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	33250.00	117581.98
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33250.00	117581.98

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	18923.17	139817.98
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18923.17	139817.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	81.98
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	81.98

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 201 Jones Rd  
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-1338**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 201 Jones Rd  
Principal Financial Grp

City Waltham State MA Zip Code 02451-1600

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
07 / 19 / 2013  
**Transaction ID : 201308065737-1339**

Amount of Each Receipt this Period  
20.00

**c. Matthew Douglas Annenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 888 7th Ave  
FI 25

City New York State NY Zip Code 10106-2599

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

Name of Employer Occupation Mng Director, Asset Allocation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 634.50

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-1201**

Amount of Each Receipt this Period  
42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 82.30

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

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

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

FOR LINE NUMBER: PAGE 7 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 888 7th Ave  
 FI 25

City State Zip Code  
 New York NY 10106-2599

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

Name of Employer Occupation  
 Mng Director, Asset Allocation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1202**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. Head - Hong Kong Group

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-96**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. Head - Hong Kong Group

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-97**

Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.90

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 106
	<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) <b>A. Randall J. Bachman</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-1428</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 22.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation AVP-Life & SBD Marketing		Aggregate Year-to-Date ▼ 330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Randall J. Bachman</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1429</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 22.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation AVP-Life & SBD Marketing		Aggregate Year-to-Date ▼ 330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Daniel Bradford Barry</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-318</b>
Mailing Address 14045 Ballantyne Corporate Pl Ste 500		Amount of Each Receipt this Period 20.83
City Charlotte	State NC	Zip Code 28277-3868
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation Reg VP - Nonqualified Plans		Aggregate Year-to-Date ▼ 312.45
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	64.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Daniel Bradford Barry**

Mailing Address 14045 Ballantyne Corporate Pl  
 Ste 500

City State Zip Code  
 Charlotte NC 28277-3868

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 312.45

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-319**

Amount of Each Receipt this Period  
 20.83

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1232**

Amount of Each Receipt this Period  
 35.00

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1233**

Amount of Each Receipt this Period  
 35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.83

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 106
	<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) <b>A. Candence Sue Bidler Hurley</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-192</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.38"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Nat'l VP - IDI Sales		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.70"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Candence Sue Bidler Hurley</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-193</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.38"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Nat'l VP - IDI Sales		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.70"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Louise A. Billmeyer</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1070</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="42.30"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & CIO - SCBU		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="634.50"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="73.06"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 106
	<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) <b>A. Louise A. Billmeyer</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1071</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP & CIO - SCBU	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 634.50	

Full Name (Last, First, Middle Initial) <b>B. Kim M. Blaugher</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-942</b>
Mailing Address 121 N 9th St Ste 303		Amount of Each Receipt this Period 20.00
City Boise	State ID	Zip Code 83702-5822
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Kim M. Blaugher</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-943</b>
Mailing Address 121 N 9th St Ste 303		Amount of Each Receipt this Period 20.00
City Boise	State ID	Zip Code 83702-5822
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP Consulting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	82.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 106
	<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) <b>A. Patti R. Blumer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-1368</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 20.00
City Washington	State DC	
	Zip Code 20005-7207	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation Director, Federal Gov Rel-DC	
Receipt For: <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>B. Patti R. Blumer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : 201308065737-1369</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 20.00
City Washington	State DC	
	Zip Code 20005-7207	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation Director, Federal Gov Rel-DC	
Receipt For: <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>C. Randy Doran Bolin</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-1436</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 15.38
City Des Moines	State IA	
	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.70	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Randy Doran Bolin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.70**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-1437**  
 Amount of Each Receipt this Period **15.38**

**B. Christopher Joseph Bowman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-256**  
 Amount of Each Receipt this Period **50.00**

**C. Christopher Joseph Bowman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-257**  
 Amount of Each Receipt this Period **50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.38</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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) <b>A. David James Brown</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-366</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation VP - Compliance		Aggregate Year-to-Date ▼ 634.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. David James Brown</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-367</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation VP - Compliance		Aggregate Year-to-Date ▼ 634.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jill Renae Brown</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-740</b>
Mailing Address 1100 Investment Blvd		Amount of Each Receipt this Period 15.38
City El Dorado Hills	State CA	Zip Code 95762-5710
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation AVP-Principal Funds		Aggregate Year-to-Date ▼ 230.70
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	99.98
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 1100 Investment Blvd

City El Dorado Hills State CA Zip Code 95762-5710

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt **07 / 19 / 2013**

**Transaction ID : 201308065737-741**

Amount of Each Receipt this Period **15.38**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt **07 / 05 / 2013**

**Transaction ID : 201308065737-1370**

Amount of Each Receipt this Period **42.30**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt **07 / 19 / 2013**

**Transaction ID : 201308065737-1371**

Amount of Each Receipt this Period **42.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>99.98</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 106
	<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. Ned Alan Burmeister**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

Name of Employer Principal International, Inc.	Occupation SVP & COO - PI
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-1320**

Amount of Each Receipt this Period  
100.00

**B. Ned Alan Burmeister**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

Name of Employer Principal International, Inc.	Occupation SVP & COO - PI
---	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-1321**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-108**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	220.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-109**

Amount of Each Receipt this Period  
 20.00

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

Mailing Address 18101 Von Karman Ave  
 Ste 1170

City State Zip Code  
 Irvine CA 92612-7169

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 432.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-110**

Amount of Each Receipt this Period  
 28.85

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

Mailing Address 18101 Von Karman Ave  
 Ste 1170

City State Zip Code  
 Irvine CA 92612-7169

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 432.75

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-1711**

Amount of Each Receipt this Period  
 28.85

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 77.70

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

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

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

FOR LINE NUMBER: PAGE 18 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. SVP - Retirement & Invest Svcs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1427.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-574**

Amount of Each Receipt this Period  
 95.19

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. SVP - Retirement & Invest Svcs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1427.85

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-575**

Amount of Each Receipt this Period  
 95.19

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. VP & Treasurer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 476.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1690**

Amount of Each Receipt this Period  
 31.76

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.14

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 106
	<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. Teresa Marie Button**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP & Treasurer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **476.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1691**

Amount of Each Receipt this Period  
**31.76**

**B. James Joseph Carbone**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-606**

Amount of Each Receipt this Period  
**19.23**

**C. James Joseph Carbone**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-607**

Amount of Each Receipt this Period  
**19.23**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **70.22**

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

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

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

FOR LINE NUMBER: PAGE 20 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1322**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1323**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. VP- Chmn Prin Bank & Trust

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-114**

Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 134.60

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

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

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

FOR LINE NUMBER: PAGE 21 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. VP- Chmn Prin Bank & Trust

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-115**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 11100 Wayzata Blvd  
 Ste 170

City State Zip Code  
 Minnetonka MN 55305-5530

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

Name of Employer Occupation  
 Principal Life Ins Co. VP Consulting

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-1718**

Amount of Each Receipt this Period  
 15.38

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

Mailing Address 11100 Wayzata Blvd  
 Ste 170

City State Zip Code  
 Minnetonka MN 55305-5530

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

Name of Employer Occupation  
 Principal Life Ins Co. VP Consulting

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-1719**

Amount of Each Receipt this Period  
 15.38

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 80.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 106
	<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. Eileen Mary Conroy**

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-510**

Amount of Each Receipt this Period  
15.38

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-511**

Amount of Each Receipt this Period  
15.38

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

Mailing Address 4141 Parklake Ave  
Ste 400

City Raleigh	State NC	Zip Code 27612-2333
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-52**

Amount of Each Receipt this Period  
15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Andrew Piper Dalglish**

Mailing Address 4141 Parklake Ave  
 Ste 400

City Raleigh State NC Zip Code 27612-2333

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-53**

Amount of Each Receipt this Period  
 15.00

Full Name (Last, First, Middle Initial)  
**B. Michael John Daugherty**

Mailing Address 1100 Technology Pkwy

City Cedar Falls State IA Zip Code 50613-6955

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

Name of Employer Principal Life Ins Co. Occupation VP Client Management - FSA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 595.00

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1240**

Amount of Each Receipt this Period  
 45.00

Full Name (Last, First, Middle Initial)  
**C. Michael John Daugherty**

Mailing Address 1100 Technology Pkwy

City Cedar Falls State IA Zip Code 50613-6955

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

Name of Employer Principal Life Ins Co. Occupation VP Client Management - FSA

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 595.00

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1241**

Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Douglas Scott Dornacker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-474**  
 Amount of Each Receipt this Period  
 25.00

**B. Douglas Scott Dornacker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-475**  
 Amount of Each Receipt this Period  
 25.00

**C. Gary Lane Dorton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4141 Parklake Ave Ste 400  
 City Raleigh State NC Zip Code 27612-2333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Employer Solutions & Serv  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-544**  
 Amount of Each Receipt this Period  
 45.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 106
	<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) <b>A. Gary Lane Dorton</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-545</b>
Mailing Address 4141 Parklake Ave Ste 400		Amount of Each Receipt this Period 45.00
City Raleigh	State NC	Zip Code 27612-2333
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP-Employer Solutions & Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

Full Name (Last, First, Middle Initial) <b>B. Alan L. Dukes</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-9</b>
Mailing Address 8910 Purdue Rd Ste 700		Amount of Each Receipt this Period 35.00
City Indianapolis	State IN	Zip Code 46268-6136
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Wellness Company	Occupation AVP-Wellness	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

Full Name (Last, First, Middle Initial) <b>C. Timothy Mark Dunbar</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-1724</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 63.46
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Inv Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 951.90	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	143.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 106
	<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) <b>A. Timothy Mark Dunbar</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : 201308065737-1725</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 63.46
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Inv Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 951.90		

Full Name (Last, First, Middle Initial) <b>B. John Michael Egan</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-774</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 31.74
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP - Investor Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.10		

Full Name (Last, First, Middle Initial) <b>C. John Michael Egan</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : 201308065737-775</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 31.74
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP - Investor Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.10		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.94
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Gregory Bernard Elming**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Chief Risk Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1427.85

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-576**  
 Amount of Each Receipt this Period 95.19

**B. Gregory Bernard Elming**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Chief Risk Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1427.85

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-577**  
 Amount of Each Receipt this Period 95.19

**C. John P. Emanuel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1155 Avenue of the Americas Suite 1021-30; Pfg  
 City New York State NY Zip Code 10036-2711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Disability Income RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-776**  
 Amount of Each Receipt this Period 19.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 209.61  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 106
	<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	<input type="checkbox"/> 17

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

**A. John P. Emanuel**  
Full Name (Last, First, Middle Initial)

Mailing Address 1155 Avenue of the Americas  
Suite 1021-30; Pfg

City New York State NY Zip Code 10036-2711

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.45

Date of Receipt  
07 / 19 / 2013  
**Transaction ID : 201308065737-777**

Amount of Each Receipt this Period  
19.23

**B. Wendell Epps**  
Full Name (Last, First, Middle Initial)

Mailing Address 5080 Spectrum Dr  
Ste 700E

City Addison State TX Zip Code 75001-4636

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.45

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-1770**

Amount of Each Receipt this Period  
19.23

**C. Wendell Epps**  
Full Name (Last, First, Middle Initial)

Mailing Address 5080 Spectrum Dr  
Ste 700E

City Addison State TX Zip Code 75001-4636

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
288.45

Date of Receipt  
07 / 19 / 2013  
**Transaction ID : 201308065737-1771**

Amount of Each Receipt this Period  
19.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 57.69

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 106
	<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. Ralph Craig Eucher**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-1426**

Amount of Each Receipt this Period  
190.00

**B. Ralph Craig Eucher**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-1427**

Amount of Each Receipt this Period  
190.00

**C. James A. Farden**  
Full Name (Last, First, Middle Initial)

Mailing Address 269 Waller St

City San Francisco	State CA	Zip Code 94102-6134
-----------------------	-------------	------------------------

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

Name of Employer Principal Life Ins Co.	Occupation Disability Income RVP
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-614**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. James A. Farden**

Mailing Address 269 Waller St

City State Zip Code  
 San Francisco CA 94102-6134

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-615**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. Kevin Patrick Farley**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-928**

Amount of Each Receipt this Period  
 45.00

Full Name (Last, First, Middle Initial)  
**C. Kevin Patrick Farley**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-929**

Amount of Each Receipt this Period  
 45.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 106
	<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 Alan Fick**

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-476**

Amount of Each Receipt this Period  

55.00
-------

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-477**

Amount of Each Receipt this Period  

55.00
-------

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-1246**

Amount of Each Receipt this Period  

50.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>160.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 106
	<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. Michael Patrick Finnegan**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **606.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1247**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP Corp Real Estate & Aviation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-676**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP Corp Real Estate & Aviation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-677**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **90.00**

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

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

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

FOR LINE NUMBER: PAGE 33 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1068**

Amount of Each Receipt this Period  
**42.30**

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1069**

Amount of Each Receipt this Period  
**42.30**

Full Name (Last, First, Middle Initial)  
**C. Aaron M. Friedman**

Mailing Address 4 Research Dr  
 Ste 402

City State Zip Code  
 Shelton CT 06484-6242

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

Name of Employer Occupation  
 Principal Life Ins Co. National Leader-Non Profit

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **322.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1**

Amount of Each Receipt this Period  
**21.50**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **106.10**

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

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

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

FOR LINE NUMBER: PAGE 34 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Aaron M. Friedman**

Mailing Address 4 Research Dr  
 Ste 402

City Shelton State CT Zip Code 06484-6242

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

Name of Employer Principal Life Ins Co. Occupation National Leader-Non Profit

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 322.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-2**

Amount of Each Receipt this Period  
 21.50

Full Name (Last, First, Middle Initial)  
**B. Amy Christine Friedrich**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP-Specialty Benefits Division

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 456.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-28**

Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**C. Amy Christine Friedrich**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP-Specialty Benefits Division

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 456.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-29**

Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.10

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

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

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

FOR LINE NUMBER: PAGE 35 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. VP - Ind. Disability Ins

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 449.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1376**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. VP - Ind. Disability Ins

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 449.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1377**

Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**C. Cary Allan Fuchs**

Mailing Address 1100 Investment Blvd

City State Zip Code  
 El Dorado Hills CA 95762-5710

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

Name of Employer Occupation  
 Principal Life Ins Co. Dir-Transfer Agent & Adm Svcs

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-218**

Amount of Each Receipt this Period  
 22.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name (Last, First, Middle Initial)  
**A. Cary Allan Fuchs**

Mailing Address 1100 Investment Blvd

City El Dorado Hills State CA Zip Code 95762-5710

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

Name of Employer Principal Life Ins Co. Occupation Dir-Transfer Agent & Adm Svcs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-219**

Amount of Each Receipt this Period  
**22.00**

Full Name (Last, First, Middle Initial)  
**B. Ronald P. Giardini**

Mailing Address 28411 Northwestern Hwy  
Principal Financial Group

City Southfield State MI Zip Code 48034-5526

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1518**

Amount of Each Receipt this Period  
**15.38**

Full Name (Last, First, Middle Initial)  
**C. Ronald P. Giardini**

Mailing Address 28411 Northwestern Hwy  
Principal Financial Group

City Southfield State MI Zip Code 48034-5526

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1519**

Amount of Each Receipt this Period  
**15.38**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>52.76</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 37 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Gina Lynnette Graham**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. VP & CFO - Principal Intl

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-562**

Amount of Each Receipt this Period  
 32.00

Full Name (Last, First, Middle Initial)  
**B. Gina Lynnette Graham**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. VP & CFO - Principal Intl

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-563**

Amount of Each Receipt this Period  
 32.00

Full Name (Last, First, Middle Initial)  
**C. Jon M. Graves**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-798**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 84.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 106
	<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. Jon M. Graves**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-IT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **300.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-799**  
 Amount of Each Receipt this Period **200.00**

**B. Victoria Whitaker Gray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 Germantown Ct  
 Principal Financial Group, Ste 101  
 City Cordova State TN Zip Code 38018-4278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Sr Account Exec-Retirement Svc  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1125.00**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-1760**  
 Amount of Each Receipt this Period **75.00**

**C. Victoria Whitaker Gray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 51 Germantown Ct  
 Principal Financial Group, Ste 101  
 City Cordova State TN Zip Code 38018-4278  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Sr Account Exec-Retirement Svc  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1125.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-1761**  
 Amount of Each Receipt this Period **75.00**

**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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 3025 Highland Pkwy  
 Ste 425

City Downers Grove State IL Zip Code 60515-5660

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-478**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 3025 Highland Pkwy  
 Ste 425

City Downers Grove State IL Zip Code 60515-5660

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 750.00

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-479**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1360**

Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 142.30

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

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

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

FOR LINE NUMBER: PAGE 40 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Patrick Gregory Halter**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. Head of PrinREI  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1361**  
 Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**B. Mark A. Hanrahan**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. Mng Dir-CRE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1114**  
 Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Mark A. Hanrahan**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. Mng Dir-CRE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1115**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 242.30  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 41 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. Mng Director - Global Equities

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1213**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**B. Melinda Lea Hanrahan**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. Mng Director - Global Equities

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1214**

Amount of Each Receipt this Period  
 25.00

Full Name (Last, First, Middle Initial)  
**C. Elizabeth Bandoli Happe**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 476.40

Date of Receipt  
 07 / 05 / 2013  
**Transaction ID : 201308065737-512**

Amount of Each Receipt this Period  
 31.76

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 81.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Elizabeth Bandoli Happe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Chief Compliance Officer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **476.40**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-513**  
 Amount of Each Receipt this Period **31.76**

**B. Christopher J. Henderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **634.50**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-262**  
 Amount of Each Receipt this Period **42.30**

**c. Christopher J. Henderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **634.50**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-263**  
 Amount of Each Receipt this Period **42.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>116.36</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 106
	<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) <b>A. Bruce Russell Hentschel</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-184</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 15.38
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 230.70
Name of Employer Principal Life Ins Co.		Occupation AVP-Dental/Vision Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Bruce Russell Hentschel</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : 201308065737-185</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 15.38
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 230.70
Name of Employer Principal Life Ins Co.		Occupation AVP-Dental/Vision Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Timothy Allen Hill</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-1726</b>
Mailing Address 3727 S Hills Way			Amount of Each Receipt this Period 42.30
City Eagan	State MN	Zip Code 55123-1215	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 456.10
Name of Employer Principal Life Ins Co.		Occupation VP-Nat'l Sales Dir, Prin Funds	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	73.06
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 44 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. Timothy Allen Hill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3727 S Hills Way  
 City Eagan State MN Zip Code 55123-1215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Nat'l Sales Dir, Prin Funds  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 456.10

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-1727**  
 Amount of Each Receipt this Period 42.30

**B. Jeffrey Hiller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 180 S Main St  
 City Yardley State PA Zip Code 19067-1642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chief Compliance Officer-PGI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-688**  
 Amount of Each Receipt this Period 32.00

**C. Jeffrey Hiller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 180 S Main St  
 City Yardley State PA Zip Code 19067-1642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chief Compliance Officer-PGI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-689**  
 Amount of Each Receipt this Period 32.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 106.30  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. Jill Marie Hittner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation Chief Financial Officer-PGI  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **476.10**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-742**  
Amount of Each Receipt this Period **31.74**

**B. Jill Marie Hittner**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation Chief Financial Officer-PGI  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **476.10**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-743**  
Amount of Each Receipt this Period **31.74**

**C. Joyce N. Hoffman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation SVP & Corporate Secretary  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **951.90**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-832**  
Amount of Each Receipt this Period **63.46**

**SUBTOTAL** of Receipts This Page (optional)..... **126.94**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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) <b>A. Joyce N. Hoffman</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.		<b>Transaction ID : 201308065737-833</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="63.46"/>
Name of Employer	Occupation	
Principal Life Ins Co.	SVP & Corporate Secretary	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="951.90"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Roger D. Holton</b>		Date of Receipt
Mailing Address 7077 Bonneval Rd Ste 380		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2013"/>
City	State	Zip Code
Jacksonville	FL	32216-6055
FEC ID number of contributing federal political committee.		<b>Transaction ID : 201308065737-1512</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="16.50"/>
Name of Employer	Occupation	
Principal Life Ins Co.	Managing Director-Unit	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="231.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Roger D. Holton</b>		Date of Receipt
Mailing Address 7077 Bonneval Rd Ste 380		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2013"/>
City	State	Zip Code
Jacksonville	FL	32216-6055
FEC ID number of contributing federal political committee.		<b>Transaction ID : 201308065737-1513</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="16.50"/>
Name of Employer	Occupation	
Principal Life Ins Co.	Managing Director-Unit	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="231.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="96.46"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 106
	<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. Daniel Joseph Houston**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2884.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-332**

Amount of Each Receipt this Period  
 192.30

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2884.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-333**

Amount of Each Receipt this Period  
 192.30

**C. Angela M. Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation AVP-Group Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-62**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 399.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 106
	<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) <b>A. Angela M. Johnson</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-63</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	AVP-Group Operations		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Susan A. Jordan</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1665</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Director-Consumer Health		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Susan A. Jordan</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1666</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Director-Consumer Health		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="55.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 106
	<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. Lisa M. Karabinus**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Dir-Exec/Global Comp & HR Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1042**

Amount of Each Receipt this Period  
**15.00**

**B. Lisa M. Karabinus**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Dir-Exec/Global Comp & HR Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1043**

Amount of Each Receipt this Period  
**15.00**

**C. Clifford P. Karthaus**  
Full Name (Last, First, Middle Initial)

Mailing Address 19407 Camden Ave

City Elkhorn State NE Zip Code 68022-1124

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 29 / 2013**

**Transaction ID : 489D85BD747646FD8C7C**

Amount of Each Receipt this Period  
**55.00**

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

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

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

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

FOR LINE NUMBER: PAGE 50 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 405 Grove St

City Worcester State MA Zip Code 01605-1270

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
**07 / 05 / 2013**  
**Transaction ID : 201308065737-1118**

Amount of Each Receipt this Period  
**15.38**

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

Mailing Address 405 Grove St

City Worcester State MA Zip Code 01605-1270

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
**07 / 19 / 2013**  
**Transaction ID : 201308065737-1119**

Amount of Each Receipt this Period  
**15.38**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Regional VP

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
**07 / 05 / 2013**  
**Transaction ID : 201308065737-1296**

Amount of Each Receipt this Period  
**42.30**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **73.06**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 106
	<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) <b>A. Monica Jean Kirgan</b>			Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1297</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 634.50
Name of Employer Principal Life Ins Co.		Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Janet Diane Kubik</b>			Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-646</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 19.23
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 253.80
Name of Employer Principal Life Ins Co.		Occupation AVP-Retirement & Investor Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Janet Diane Kubik</b>			Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-647</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 19.23
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 253.80
Name of Employer Principal Life Ins Co.		Occupation AVP-Retirement & Investor Serv	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.76
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 106
	<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) <b>A. Mark Seth Lagomarcino</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1122</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="31.76"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & Assoc Gen Counsel-Litig.		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="476.40"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mark Seth Lagomarcino</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1123</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="31.76"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & Assoc Gen Counsel-Litig.		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="476.40"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Blaine William Laverick</b>			Date of Receipt
Mailing Address 4141 Parklake Ave Ste 400			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-136</b>
Raleigh	NC	27612-2333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.38"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP-Executive Benefit Services		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="230.70"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="78.90"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Blaine William Laverick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4141 Parklake Ave  
 Ste 400  
 City Raleigh State NC Zip Code 27612-2333  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Executive Benefit Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-137**  
 Amount of Each Receipt this Period  
 15.38

**B. Julia M. Lawler-Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP - Investment Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1174.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-840**  
 Amount of Each Receipt this Period  
 95.19

**C. Julia M. Lawler-Johnson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP - Investment Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1174.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-841**  
 Amount of Each Receipt this Period  
 95.19

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 205.76  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 106
	<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) <b>A. Richard C. Lawson</b>		Date of Receipt 07 / 05 / 2013 <b>Transaction ID : 201308065737-1478</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 42.30
City Washington	State DC	
Zip Code 20005-7207		Amount of Each Receipt this Period 634.50
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP-Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Richard C. Lawson</b>		Date of Receipt 07 / 19 / 2013 <b>Transaction ID : 201308065737-1479</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 42.30
City Washington	State DC	
Zip Code 20005-7207		Amount of Each Receipt this Period 634.50
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP-Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Scott Patrick Leiberton</b>		Date of Receipt 07 / 05 / 2013 <b>Transaction ID : 201308065737-1568</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 20.00
City Des Moines	State IA	
Zip Code 50392-0001		Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation Mng Director, Portfolio Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	104.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 106
	<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) <b>A. Scott Patrick Leiberton</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1569</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 400.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	Occupation Mng Director, Portfolio Mgr
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>B. Terrance Joseph Lillis</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-1696</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 192.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Financial Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

Full Name (Last, First, Middle Initial) <b>C. Terrance Joseph Lillis</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1697</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 192.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	Occupation SVP & Chief Financial Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2884.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	404.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 106
	<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. Gregory Allen Linde**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-580**

Amount of Each Receipt this Period  
**42.30**

Full Name (Last, First, Middle Initial)  
**B. Gregory Allen Linde**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-581**

Amount of Each Receipt this Period  
**42.30**

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

Mailing Address 2000 Powell St Ste 520

City Emeryville State CA Zip Code 94608-1886

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-422**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **104.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 106
	<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. Denise A. Loomis**

Mailing Address 2000 Powell St  
Ste 520

City Emeryville State CA Zip Code 94608-1886

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**07 / 19 / 2013**

**Transaction ID : 201308065737-423**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**B. Mark C. Marwede**

Mailing Address 101 Oak Ter

City Lake Bluff State IL Zip Code 60044-2717

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

Name of Employer Principal Life Ins Co. Occupation Mging Dir - AMG - Invstmt Solu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1124**

Amount of Each Receipt this Period  
**19.23**

Full Name (Last, First, Middle Initial)  
**c. Mark C. Marwede**

Mailing Address 101 Oak Ter

City Lake Bluff State IL Zip Code 60044-2717

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

Name of Employer Principal Life Ins Co. Occupation Mging Dir - AMG - Invstmt Solu

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.45**

Date of Receipt  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1125**

Amount of Each Receipt this Period  
**19.23**

**SUBTOTAL** of Receipts This Page (optional)..... **58.46**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 106
	<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. Joseph E. Marx**  
Full Name (Last, First, Middle Initial)

Mailing Address 5500 Main St  
Principal Financial Group

City State Zip Code  
Williamsville NY 14221-6755

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

Name of Employer Occupation  
Principal Life Ins Co. VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-820**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 5500 Main St  
Principal Financial Group

City State Zip Code  
Williamsville NY 14221-6755

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

Name of Employer Occupation  
Principal Life Ins Co. VP Consulting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
07 / 19 / 2013  
**Transaction ID : 201308065737-821**

Amount of Each Receipt this Period  
20.00

**C. Gregory David Mazzei**  
Full Name (Last, First, Middle Initial)

Mailing Address 4010 W Boy Scout Blvd  
Principal Financial Group

City State Zip Code  
Tampa FL 33607-5795

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-582**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 106
	<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. Gregory David Mazzei**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4010 W Boy Scout Blvd  
 Principal Financial Group  
 City Tampa State FL Zip Code 33607-5795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Disability Income RVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-583**  
 Amount of Each Receipt this Period  
 50.00

**B. James P. McCaughan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation President Global Asset Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-624**  
 Amount of Each Receipt this Period  
 192.30

**C. James P. McCaughan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation President Global Asset Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-625**  
 Amount of Each Receipt this Period  
 192.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	434.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 106
	<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) <b>A. Edward L. McDermott, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-502</b>
Mailing Address 28411 Northwestern Hwy Principal Financial Group		Amount of Each Receipt this Period 25.00
City Southfield	State MI	Zip Code 48034-5526
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>B. Edward L. McDermott, Jr.</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2013 <b>Transaction ID : 201308065737-503</b>
Mailing Address 28411 Northwestern Hwy Principal Financial Group		Amount of Each Receipt this Period 25.00
City Southfield	State MI	Zip Code 48034-5526
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Full Name (Last, First, Middle Initial) <b>C. Barbara Ann McKenzie</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 05 / 2013 <b>Transaction ID : 201308065737-112</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 95.19
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation Exec Dir - COO & Boutique Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1427.85	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	145.19
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 106
	<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. Barbara Ann McKenzie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Exec Dir - COO & Boutique Ops  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1427.85**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-113**  
 Amount of Each Receipt this Period **95.19**

**B. Shelly Marie Meighan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-Business Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-1609**  
 Amount of Each Receipt this Period **32.00**

**c. Shelly Marie Meighan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-Business Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-1610**  
 Amount of Each Receipt this Period **32.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>159.19</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 106
	<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 Joan Mills**

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
634.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013

**Transaction ID : 201308065737-34**

Amount of Each Receipt this Period  
42.30

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

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
634.50

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 19 / 2013

**Transaction ID : 201308065737-35**

Amount of Each Receipt this Period  
42.30

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

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013

**Transaction ID : 201308065737-1728**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 184.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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. Timothy Jon Minard**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1729**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Dan Harris Mohr**

Mailing Address 500 N Brand Blvd  
Principal Financial Group, Ste 180

City Glendale State CA Zip Code 91203-3305

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

Name of Employer Principal Life Ins Co. Occupation Dir of Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-312**

Amount of Each Receipt this Period  
**20.00**

Full Name (Last, First, Middle Initial)  
**C. Dan Harris Mohr**

Mailing Address 500 N Brand Blvd  
Principal Financial Group, Ste 180

City Glendale State CA Zip Code 91203-3305

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

Name of Employer Principal Life Ins Co. Occupation Dir of Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-313**

Amount of Each Receipt this Period  
**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>140.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 106
	<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. Wayne C. Mohr**  
Full Name (Last, First, Middle Initial)

Mailing Address 6500 West Fwy  
One Ridgmar Centre, Suite 555

City Fort Worth State TX Zip Code 76116-2167

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.70

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-1768**

Amount of Each Receipt this Period  
15.38

**B. Wayne C. Mohr**  
Full Name (Last, First, Middle Initial)

Mailing Address 6500 West Fwy  
One Ridgmar Centre, Suite 555

City Fort Worth State TX Zip Code 76116-2167

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.70

Date of Receipt  
07 / 19 / 2013  
**Transaction ID : 201308065737-1769**

Amount of Each Receipt this Period  
15.38

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP Client Management - FSA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
634.50

Date of Receipt  
07 / 05 / 2013  
**Transaction ID : 201308065737-602**

Amount of Each Receipt this Period  
42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 73.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Jacquie Sue Mohs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Client Management - FSA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 634.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-603**  
 Amount of Each Receipt this Period  
 42.30

**B. Kevin James Morris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Investment Blvd  
 City El Dorado Hills State CA Zip Code 95762-5710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Marketing Head-Principal Funds  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-934**  
 Amount of Each Receipt this Period  
 15.38

**C. Kevin James Morris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 Investment Blvd  
 City El Dorado Hills State CA Zip Code 95762-5710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Marketing Head-Principal Funds  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-935**  
 Amount of Each Receipt this Period  
 15.38

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 73.06  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 106
	<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. Mindy Lea Moss**

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-1288**

Amount of Each Receipt this Period  

15.00
-------

Full Name (Last, First, Middle Initial)  
**B. Mindy Lea Moss**

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-1289**

Amount of Each Receipt this Period  

15.00
-------

Full Name (Last, First, Middle Initial)  
**C. Joseph A. Nagy**

Mailing Address 4010 W Boy Scout Blvd  
Ste 700

City Tampa	State FL	Zip Code 33607-5735
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

**Transaction ID : 201308065737-825**

Amount of Each Receipt this Period  

10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>40.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 106
	<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. David Naugler**  
Full Name (Last, First, Middle Initial)

Mailing Address 301 Georgetowne Ct

City Wexford State PA Zip Code 15090-8660

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-374**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 301 Georgetowne Ct

City Wexford State PA Zip Code 15090-8660

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-375**

Amount of Each Receipt this Period  
**20.00**

**C. Jodi L. Neumann**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal International, Inc. Occupation Assistant VP and CAO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-754**

Amount of Each Receipt this Period  
**15.38**

**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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Jodi L. Neumann**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal International, Inc. Occupation Assistant VP and CAO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-755**

Amount of Each Receipt this Period  
**15.38**

**B. Mary Agnes O'Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **663.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1181**

Amount of Each Receipt this Period  
**44.23**

**c. Mary Agnes O'Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **663.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1182**

Amount of Each Receipt this Period  
**44.23**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>103.84</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 106
	<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) <b>A. Randall B. Odzer</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1432</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="42.30"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Chief Financial Officer - USIS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="386.10"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Randall B. Odzer</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1433</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="42.30"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Chief Financial Officer - USIS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="386.10"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mary Susan Ondack</b>			Date of Receipt
Mailing Address 2837 S Clarkson St			<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201308065737-1183</b>
Englewood	CO	80113-1703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="15.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	Disability Income RVP		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="99.60"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 70 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Mary Susan Ondack**

Mailing Address 2837 S Clarkson St

City State Zip Code  
 Englewood CO 80113-1703

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1184**

Amount of Each Receipt this Period  
 15.00

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 476.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-556**

Amount of Each Receipt this Period  
 31.76

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 476.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-557**

Amount of Each Receipt this Period  
 31.76

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 78.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 106
	<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) <b>A. Christopher David Payne</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-266</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 42.30
City Washington	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP - Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 634.50	

Full Name (Last, First, Middle Initial) <b>B. Christopher David Payne</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-267</b>
Mailing Address 1350 I St NW Ste 880		Amount of Each Receipt this Period 42.30
City Washington	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP - Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 634.50	

Full Name (Last, First, Middle Initial) <b>C. Karen Arlene Pearston</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-886</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 25.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	109.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 106
	<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. Karen Arlene Pearston**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-887**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **552.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1228**

Amount of Each Receipt this Period  
**42.30**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **552.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1229**

Amount of Each Receipt this Period  
**42.30**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **109.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 106
	<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	<input type="checkbox"/> 17

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

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

**A. Carl Christopher Powers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

Name of Employer Principal Life Ins Co.	Occupation Benefits Director
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-196**

Amount of Each Receipt this Period  

20.00
-------

**B. Carl Christopher Powers**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
--------------------	-------------	------------------------

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

Name of Employer Principal Life Ins Co.	Occupation Benefits Director
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	19	/	2013

**Transaction ID : 201308065737-197**

Amount of Each Receipt this Period  

20.00
-------

**C. R. Kelly Prey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6701 Westown Pkwy  
Ste 160

City West Des Moines	State IA	Zip Code 50266-7706
-------------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	05	/	2013

**Transaction ID : 201308065737-1422**

Amount of Each Receipt this Period  

15.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>55.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. R. Kelly Prey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6701 Westown Pkwy  
 Ste 160  
 City West Des Moines State IA Zip Code 50266-7706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP of Sales - Retirement Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1423**  
 Amount of Each Receipt this Period  
 15.00

**B. Peter John Prodoehl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11821 Palm Beach Blvd  
 Unit 126  
 City Fort Myers State FL Zip Code 33905-5908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Consulting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1400**  
 Amount of Each Receipt this Period  
 19.23

**C. Peter John Prodoehl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11821 Palm Beach Blvd  
 Unit 126  
 City Fort Myers State FL Zip Code 33905-5908  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Consulting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1401**  
 Amount of Each Receipt this Period  
 19.23

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	53.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

**A. William J. Quinn, III**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 Interpace Pkwy  
Principal Financial Group

City Parsippany State NJ Zip Code 07054-1100

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

Name of Employer Principal Life Ins Co. Occupation Sr Account Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013  
**Transaction ID : 201308065737-1784**

Amount of Each Receipt this Period  
20.00

**B. William J. Quinn, III**  
Full Name (Last, First, Middle Initial)

Mailing Address 300 Interpace Pkwy  
Principal Financial Group

City Parsippany State NJ Zip Code 07054-1100

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

Name of Employer Principal Life Ins Co. Occupation Sr Account Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 19 / 2013  
**Transaction ID : 201308065737-1785**

Amount of Each Receipt this Period  
20.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Executive Advisor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2013  
**Transaction ID : 201308065737-694**

Amount of Each Receipt this Period  
16.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 56.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 106
	<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) <b>A. Jeffrey K. Rader</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013
Mailing Address 711 High St			<b>Transaction ID : 201308065737-695</b>
City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 16.00
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation Executive Advisor		
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) <b>B. Elizabeth L. Raymond</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 05 / 2013
Mailing Address 711 High St			<b>Transaction ID : 201308065737-516</b>
City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 31.76
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP-Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.40		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth L. Raymond</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 19 / 2013
Mailing Address 711 High St			<b>Transaction ID : 201308065737-517</b>
City Des Moines	State IA	Zip Code 50392-0001	Amount of Each Receipt this Period 31.76
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP-Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 476.40		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	79.52
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 77 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. President & COO-PGIE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 408.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-268**

Amount of Each Receipt this Period  
 26.52

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. President & COO-PGIE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 408.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-269**

Amount of Each Receipt this Period  
 26.52

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-1264**

Amount of Each Receipt this Period  
 32.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.04

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 106
	<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. Michael Dennis Roughton**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1265**

Amount of Each Receipt this Period  
**32.00**

Full Name (Last, First, Middle Initial)  
**B. Scott M. Sams**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1574**

Amount of Each Receipt this Period  
**1.00**

Full Name (Last, First, Middle Initial)  
**C. Scott M. Sams**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1575**

Amount of Each Receipt this Period  
**1.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **34.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Angela Rae Sanders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-68**  
 Amount of Each Receipt this Period  
**35.00**

**B. Angela Rae Sanders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-69**  
 Amount of Each Receipt this Period  
**35.00**

**C. Irene Susan Scalfani**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mging Dir - AMG - RIS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **230.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-600**  
 Amount of Each Receipt this Period  
**15.38**

**SUBTOTAL** of Receipts This Page (optional)..... **85.38**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 80 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Irene Susan Scalfani**

Mailing Address 888 7th Ave  
 FI 25

City State Zip Code  
 New York NY 10106-2599

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

Name of Employer Occupation  
 Principal Life Ins Co. Mging Dir - AMG - RIS

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-601**

Amount of Each Receipt this Period  
 15.38

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. VP - Strat. Plan & Bus Dvlpmnt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013

**Transaction ID : 201308065737-1456**

Amount of Each Receipt this Period  
 32.00

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal International, Inc. VP - Strat. Plan & Bus Dvlpmnt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013

**Transaction ID : 201308065737-1457**

Amount of Each Receipt this Period  
 32.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 79.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Gary Paul Scholten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2538.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-548**  
 Amount of Each Receipt this Period  
 169.23

**B. Gary Paul Scholten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2538.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-549**  
 Amount of Each Receipt this Period  
 169.23

**C. Edward M. Schuh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2732 Daniel Ave  
 City Dallas State TX Zip Code 75205-1512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Sr Investment Spclst-External  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-506**  
 Amount of Each Receipt this Period  
 16.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	354.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 2732 Daniel Ave

City Dallas State TX Zip Code 75205-1512

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

Name of Employer Principal Life Ins Co. Occupation Sr Investment Spclst-External

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-507**

Amount of Each Receipt this Period 16.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-888**

Amount of Each Receipt this Period 110.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-889**

Amount of Each Receipt this Period 110.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 236.00

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

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

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

FOR LINE NUMBER: PAGE 83 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Laurel Jean Shultz**

Mailing Address 111 W State St

City State Zip Code  
 Mason City IA 50401-3131

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1000**

Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**B. Laurel Jean Shultz**

Mailing Address 111 W State St

City State Zip Code  
 Mason City IA 50401-3131

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1001**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. Exec Dir-Strategy&Boutique Ops

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-518**

Amount of Each Receipt this Period  
 32.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 116.60

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Ellen Wilson Shumway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Exec Dir-Strategy&Boutique Ops  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **480.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-519**  
 Amount of Each Receipt this Period **32.00**

**B. Paul Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mgr-Learning and Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 05 / 2013**  
**Transaction ID : 201308065737-1384**  
 Amount of Each Receipt this Period **15.00**

**C. Paul Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mgr-Learning and Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt **07 / 19 / 2013**  
**Transaction ID : 201308065737-1385**  
 Amount of Each Receipt this Period **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... **62.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Tom Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Riveredge Pkwy NW  
Ste 1000

City Atlanta State GA Zip Code 30328-4657

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

Name of Employer Principal Life Ins Co. Occupation VP, Full Svc Accum. Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1740**

Amount of Each Receipt this Period  
**28.85**

**B. Tom Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Riveredge Pkwy NW  
Ste 1000

City Atlanta State GA Zip Code 30328-4657

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

Name of Employer Principal Life Ins Co. Occupation VP, Full Svc Accum. Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **432.75**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1741**

Amount of Each Receipt this Period  
**28.85**

**c. Dwight N. Soethout**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP Financial Risk Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-498**

Amount of Each Receipt this Period  
**42.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Dwight N. Soethout**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Financial Risk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 634.50

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-499**  
 Amount of Each Receipt this Period 42.30

**B. Kathleen M. Souhrada**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-Recruiting & Diversity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.70

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-897**  
 Amount of Each Receipt this Period 15.38

**C. Kathleen M. Souhrada**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-Recruiting & Diversity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.70

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-898**  
 Amount of Each Receipt this Period 15.38

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 73.06  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 87 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Occupation  
Principal Life Ins Co. SVP - U.S. Insurance Solutions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1440.00**

Date of Receipt  
**07 / 05 / 2013**

**Transaction ID : 201308065737-386**

Amount of Each Receipt this Period  
**96.00**

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

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Occupation  
Principal Life Ins Co. SVP - U.S. Insurance Solutions

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1440.00**

Date of Receipt  
**07 / 19 / 2013**

**Transaction ID : 201308065737-387**

Amount of Each Receipt this Period  
**96.00**

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

Mailing Address 711 High St

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Occupation  
Principal Life Ins Co. AVP & Corporate Actuary

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **231.00**

Date of Receipt  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1268**

Amount of Each Receipt this Period  
**15.40**

**SUBTOTAL** of Receipts This Page (optional)..... **207.40**

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

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

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

FOR LINE NUMBER: PAGE 88 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

Name of Employer Occupation  
 Principal Life Ins Co. AVP & Corporate Actuary

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 231.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1269**

Amount of Each Receipt this Period  
 15.40

Full Name (Last, First, Middle Initial)  
**B. Karen S. Thomann**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-890**

Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**C. Karen S. Thomann**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 634.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-891**

Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 106
	<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) <b>A. Daniel J. Thomas</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013
Mailing Address 4141 Parklake Ave Ste 400		<b>Transaction ID : 201308065737-344</b>
City Raleigh	State NC	Zip Code 27612-2333
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 19.23
Name of Employer Principal Life Ins Co.	Occupation Asst Dir-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	

Full Name (Last, First, Middle Initial) <b>B. Daniel J. Thomas</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013
Mailing Address 4141 Parklake Ave Ste 400		<b>Transaction ID : 201308065737-345</b>
City Raleigh	State NC	Zip Code 27612-2333
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 19.23
Name of Employer Principal Life Ins Co.	Occupation Asst Dir-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	

Full Name (Last, First, Middle Initial) <b>C. Joni Lynn Tibbetts</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013
Mailing Address 711 High St		<b>Transaction ID : 201308065737-814</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 45.00
Name of Employer Principal Life Ins Co.	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.46
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 90 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Joni Lynn Tibbetts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. VP- Sales Engineering  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-815**  
 Amount of Each Receipt this Period  
 45.00

**B. Terrence Michael Tobin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. Director-Prin Enterprise Cap  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1698**  
 Amount of Each Receipt this Period  
 25.00

**C. Terrence Michael Tobin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. Director-Prin Enterprise Cap  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 375.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1699**  
 Amount of Each Receipt this Period  
 25.00

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

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

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

FOR LINE NUMBER: PAGE 91 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. John N. Urban**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mng Dir-Portfolio Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-790**  
 Amount of Each Receipt this Period  
 19.23

**B. John N. Urban**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mng Dir-Portfolio Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 288.45

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-791**  
 Amount of Each Receipt this Period  
 19.23

**C. Leanne M. Valentine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 476.10

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-1014**  
 Amount of Each Receipt this Period  
 31.74

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.20  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 92 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Leanne M. Valentine**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. VP & Associate General Counsel  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 476.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-1015**  
 Amount of Each Receipt this Period  
 31.74

Full Name (Last, First, Middle Initial)  
**B. Jeffrey Alan Van Baale**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. AVP-IT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 288.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 05 / 2013  
**Transaction ID : 201308065737-702**  
 Amount of Each Receipt this Period  
 19.23

Full Name (Last, First, Middle Initial)  
**C. Jeffrey Alan Van Baale**  
 Mailing Address 711 High St  
 City State Zip Code  
 Des Moines IA 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. AVP-IT  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 288.45

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : 201308065737-703**  
 Amount of Each Receipt this Period  
 19.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.20  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 106
	<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) <b>A. Luke Joseph Vandermillen</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 201308065737-1076</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP RIS Marketing		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="630.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Luke Joseph Vandermillen</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 201308065737-1077</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP RIS Marketing		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="630.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Traci Lea Weldon</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2013"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 201308065737-1744</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. Chief Compl Officer-Princor		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Traci Lea Weldon**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Chief Compl Officer-Princor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1745**

Amount of Each Receipt this Period  
**20.00**

**B. Steven C. Whitty**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 05 / 2013**

**Transaction ID : 201308065737-1655**

Amount of Each Receipt this Period  
**42.30**

**C. Steven C. Whitty**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **634.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 19 / 2013**

**Transaction ID : 201308065737-1656**

Amount of Each Receipt this Period  
**42.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>104.60</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 106
	<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) <b>A. Richard Harrison Wireman, II</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-1484</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 45.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 675.00	
Name of Employer Principal Life Ins Co.	Occupation VP Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Richard Harrison Wireman, II</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 201308065737-1485</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 45.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 675.00	
Name of Employer Principal Life Ins Co.	Occupation VP Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Douglas E. Younkin</b>		Date of Receipt MM / DD / YYYY 07 / 05 / 2013 <b>Transaction ID : 201308065737-492</b>
Mailing Address PO Box 676304 6946 Circo Diegueno Court		Amount of Each Receipt this Period 42.30
City Rancho Santa Fe	State CA	Zip Code 92067-6304
FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date 634.50	
Name of Employer Principal Life Ins Co.	Occupation Mng Dir-3rd Party Distribut	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	132.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 106
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Douglas E. Younkin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 676304  
 6946 Circo Diegueno Court  
 City Rancho Santa Fe State CA Zip Code 92067-6304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Mng Dir-3rd Party Distribut  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 634.50

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-493**  
 Amount of Each Receipt this Period 42.30

**B. Larry Donald Zimpleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.50

Date of Receipt 07 / 05 / 2013  
**Transaction ID : 201308065737-988**  
 Amount of Each Receipt this Period 192.30

**C. Larry Donald Zimpleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.50

Date of Receipt 07 / 19 / 2013  
**Transaction ID : 201308065737-989**  
 Amount of Each Receipt this Period 192.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.90
<b>TOTAL</b> This Period (last page this line number only).....▶	11277.40

**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. Adrian Smith for Congress**

Mailing Address 3321 Avenue I  
Suite 6

City State Zip Code  
Scottsbluff NE 69361-4587

Purpose of Disbursement  
2014 Primary

011  
Category/  
Type

Candidate Name

**Adrian M. Smith**

Office Sought:  House  
 Senate  
 President  
State: NE District: 03

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2013

**Transaction ID : 9EC9D7D32E03549E5CE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Austin Scott for Congress Inc**

Mailing Address PO Box 2530

City State Zip Code  
Tifton GA 31793

Purpose of Disbursement  
2014 Primary

011  
Category/  
Type

Candidate Name

**James Austin Scott**

Office Sought:  House  
 Senate  
 President  
State: GA District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2013

**Transaction ID : 4D96213C47BBC88AFA6**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Brady for Congress**

Mailing Address PO Box 8277

City State Zip Code  
the Woodlands TX 77387-8277

Purpose of Disbursement  
2014 Primary

011  
Category/  
Type

Candidate Name

**Kevin Brady**

Office Sought:  House  
 Senate  
 President  
State: TX District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : D0EA86FADA08A6AF018**

Amount of Each Disbursement this Period

1000.00

**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. Charles Boustany Jr. Md for Congress, Inc.**

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Charles W. Boustany Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 03

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : 04CE98F59376472D193**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Cleaver for Congress**

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Emanuel Cleaver II**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 05

Date of Disbursement

MM / DD / YYYY  
07 / 24 / 2013

**Transaction ID : 0122A53E1E29D27B3C0**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Collins for Senator**

Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Susan Margaret Collins**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: ME District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : 29AABCFC388534B0305**

Amount of Each Disbursement this Period

1000.00

**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. Crowley for Congress**

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Joseph Crowley**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 14

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : CF2E00187B99C4021B6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Fitzpatrick for Congress**

Mailing Address PO Box 185

City Langhorne State PA Zip Code 19047-0185

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Michael G. Fitzpatrick**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 25 / 2013

Transaction ID : 6CD3FDB45045A71A3CA

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Carolyn McCarthy**

Mailing Address 151 Linden Road

City Mineola State NY Zip Code 11501

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Carolyn McCarthy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 04

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2013

Transaction ID : 8BFA8C48CCEBB5CA033

Amount of Each Disbursement this Period

2500.00

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

4500.00

**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. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Ron Kind**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	25	/	2013

Transaction ID : CA6E78DEA667A28118E

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Mike Thompson for Congress**

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Michael C. Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	18	/	2013

Transaction ID : A400000951F15E5FCA6

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Pat Roberts for U.S. Senate, Inc.**

Mailing Address PO Box 433

City Great Bend State KS Zip Code 67530

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Pat Roberts**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	16	/	2013

Transaction ID : 9E387D44071624BABD1

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
---------

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**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. Reed Committee**

Mailing Address PO Box 8628

City Cranston State RI Zip Code 02920

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Jack Francis Reed**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: RI District:

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2013

**Transaction ID : 623BEBE83CA151C0DBE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Richard E Neal for Congress Committee**

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Richard Edmund Neal**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2013

**Transaction ID : 7FA251EE8B54D8DD83C**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Stivers for Congress**

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43220-8113

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Steve Stivers**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

MM / DD / YYYY  
07 / 23 / 2013

**Transaction ID : 1E2FAB738774A80BE9B**

Amount of Each Disbursement this Period

1000.00

**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. Terri Sewell for Congress**

Mailing Address PO Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Terri A. Sewell**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AL District: 07

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : 6B62F22EEAD9B843868

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Tim Scott for Senate**

Mailing Address 1405 Ashley River Road

City Charleston State SC Zip Code 29407

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**Timothy Eugene Scott**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 24 / 2013

Transaction ID : 6DAF511F138A43AE2BF

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2000.00

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

26000.00

**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

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. Friends of Bill Anderson**

Mailing Address 1138 Mason Avenue

City Pierson State IA Zip Code 51048

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 17 / 2013

Transaction ID : B0A0E37643FEA7CE7F0

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Governor Branstad Committee**

Mailing Address 1324 274th Lane

City Boone State IA Zip Code 50036

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 17 / 2013

Transaction ID : 89FCFACF052D3F77DC5

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. People for Jochum**

Mailing Address 2368 Jackson Street

City Dubuque State IA Zip Code 52001

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2013

Transaction ID : CBAAFDEA7B07BC41B4C

Amount of Each Disbursement this Period

750.00

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

6250.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

### A. Team Bertrand

Mailing Address 1501 Peavey Street

City State Zip Code  
Sioux City IA 51105

Purpose of Disbursement  
Nonfederal Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Transaction ID : AFA22EDC71535C9686F

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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