

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 711 HIGH STREET  
GOVERNMENT RELATIONS  
 Check if different than previously reported. (ACC)  
DES MOINES IA 50392-0220

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

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

5. Covering Period 08 01 2006 through 08 31 2006

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

Type or Print Name of Treasurer LOUISE BILLMEYER

Signature of Treasurer Electronically Filed by LOUISE BILLMEYER Date 09 12 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		30840.82
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	12315.17									
(c) Total Receipts (from Line 19) .....	11751.03	103767.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	24066.20	134608.00								
7. Total Disbursements (from Line 31) .....	11600.00	122141.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12466.20	12466.20								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5988.18	39520.82
(i) Itemized (use Schedule A) .....	5762.85	64246.36
(ii) Unitemized .....	11751.03	103767.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	11751.03	103767.18
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	11751.03	103767.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11751.03	103767.18

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	31.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	31.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	73000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	10.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	10.00
29. Other Disbursements.....	11600.00	49100.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11600.00	122141.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	11600.00	122141.80

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	11751.03	103767.18
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11751.03	103757.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	31.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	31.80

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. MICHAEL BEER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.17359
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL BEER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.17360
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation VP-Mutual Funds & Broker Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>C. LOUISE BILLMEYER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.17390
City State Zip Code Des Moines IA 50392-5880	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 39.00
Name of Employer Principal Financial Group	Occupation VP - CIO Financials & Corp Sys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 624.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	89.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 66
	<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 BILLMEYER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17391</b>
City State Zip Code Des Moines IA 50392-5880	Amount of Each Receipt this Period 39.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP - CIO Financials & Corp Sys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 663.00	

Full Name (Last, First, Middle Initial) <b>B. PAULA BINKLEY-BITTICK</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17393</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 11.90	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.30	

Full Name (Last, First, Middle Initial) <b>C. KIM BLAUGHER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17404</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	70.90
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 66
	<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. KIM BLAUGHER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17405</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>B. PATTI BLUMER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17413</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 44.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Asst Fed Legis Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 704.00	

Full Name (Last, First, Middle Initial) <b>C. PATTI BLUMER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17412</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 44.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Asst Fed Legis Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 748.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	108.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 66
	<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 BOWMAN</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17430</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER BOWMAN</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17431</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- Sales Engineering	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>C. KRAIG BOYSEN</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17435</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP - Insured Health Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	91.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. KRAIG BOYSEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17434</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP - Insured Health Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) <b>B. NED BURMEISTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17493</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vice President- Trustar	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. NED BURMEISTER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17492</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vice President- Trustar	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. GREGORY BURROWS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17496
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- RIS Mktg & Strategy Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) <b>B. GREGORY BURROWS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17497
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- RIS Mktg & Strategy Dvlpmnt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>C. TERESA BUTTON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17504
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP & Chief Accting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	91.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. TERESA BUTTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17505</b>
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 15.00
Name of Employer Principal Financial Group Occupation 2nd VP & Chief Accting Officer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00

Full Name (Last, First, Middle Initial) <b>B. NICHOLAS CECERE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17519</b>
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group Occupation VP-Proprietary Distribution	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36

Full Name (Last, First, Middle Initial) <b>C. NICHOLAS CECERE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17518</b>
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group Occupation VP-Proprietary Distribution	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	91.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. JAMES CHARLING</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17523</b>
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.50
Name of Employer Principal Financial Group	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 616.00	

Full Name (Last, First, Middle Initial) <b>B. JAMES CHARLING</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17522</b>
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.50
Name of Employer Principal Financial Group	Occupation VP-Natl Accts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 654.50	

Full Name (Last, First, Middle Initial) <b>C. BARRIE CHRISTMAN</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17535</b>
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group	Occupation Pres & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.47
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 66
	<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. BARRIE CHRISTMAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17534</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 38.47	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation Pres & CEO			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 653.99	

Full Name (Last, First, Middle Initial) <b>B. CHARLES CHRISTOFILIS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17537</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation Director-Compliance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 307.84	

Full Name (Last, First, Middle Initial) <b>C. CHARLES CHRISTOFILIS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17536</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 19.24	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation Director-Compliance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 327.08	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	76.95
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 66
	<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. TIMOTHY CLEARY</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17553</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.23
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY CLEARY</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17552</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 19.23
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) <b>C. CATHY CORY</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17577</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 14.00
Name of Employer Principal Financial Group	Occupation State/Fed Compl Consult	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	52.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
CATHY CORY

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation State/Fed Compl Consult

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.17576

Amount of Each Receipt this Period  
14.00

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL CUMINGS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Counsel

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: SA11A1.17602

Amount of Each Receipt this Period  
15.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL CUMINGS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Counsel

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.17603

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 44.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
RONALD DANILSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 640.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.17621

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
RONALD DANILSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.17620

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
JAMES DEVRIES

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation SVP - Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 615.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.17645

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	118.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 66
	<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. JAMES DEVRIES</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17644
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation SVP - Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>B. GREGORY ELMING</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17684
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15.00
Name of Employer Principal Financial Group	Occupation VP & Controller	
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>C. GREGORY ELMING</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17685
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 15.00
Name of Employer Principal Financial Group	Occupation VP & Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	68.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. RALPH EUCHER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17690</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. RALPH EUCHER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17691</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		

Full Name (Last, First, Middle Initial) <b>C. NORA EVERETT</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17696</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation SVP & Deputy General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	88.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 66
	<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. NORA EVERETT</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17697</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP & Deputy General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS FELTZ</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17703</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.15	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Dir of Sales-Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 258.40	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS FELTZ</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17702</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.15	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Dir of Sales-Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.55	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	70.76
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. DOUGLAS FICK</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17710</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.75		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation 2nd VP-IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00		

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS FICK</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17711</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.75		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation 2nd VP-IT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 488.75		

Full Name (Last, First, Middle Initial) <b>C. MICHAEL FINNEGAN</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17716</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation 2nd VP--Investment Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	76.73
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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. MICHAEL FINNEGAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17717</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP--Investment Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) <b>B. ROBERT FORD</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17739</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.43	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Sr Actuary and Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 342.88	

Full Name (Last, First, Middle Initial) <b>C. ROBERT FORD</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17738</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.43	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Sr Actuary and Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 364.31	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	62.09
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. PAUL FROMM</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17777</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP Marketing- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) <b>B. PAUL FROMM</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17776</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP Marketing- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL GERSIE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17791</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Exec VP & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1280.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	118.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 66
	<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. MICHAEL GERSIE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17790</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 80.00
Name of Employer Principal Financial Group	Occupation Exec VP & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1360.00	

Full Name (Last, First, Middle Initial) <b>B. THOMAS GRAF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17821</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Principal Financial Group	Occupation Sr VP-Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

Full Name (Last, First, Middle Initial) <b>C. THOMAS GRAF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17820</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Principal Financial Group	Occupation Sr VP-Investor Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	380.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 66
	<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. LYNN GRAVES</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17826
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer Principal Financial Group	Occupation VP-Executive Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	

Full Name (Last, First, Middle Initial) <b>B. LYNN GRAVES</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17827
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 35.00
Name of Employer Principal Financial Group	Occupation VP-Executive Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 595.00	

Full Name (Last, First, Middle Initial) <b>C. J BARRY GRISWELL</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17835
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer Principal Financial Group	Occupation Chairman-President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3076.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	262.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
J BARRY GRISWELL

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Chairman-President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3269.10

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.17834

Amount of Each Receipt this Period  
192.30

**B.** Full Name (Last, First, Middle Initial)  
DOUGLAS GROVE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

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

Transaction ID: SA11A1.17839

Amount of Each Receipt this Period  
20.00

**C.** Full Name (Last, First, Middle Initial)  
DOUGLAS GROVE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.17838

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	232.30
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 66
	<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. STEPHEN HAMILTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17857
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 17.45
Name of Employer Principal Financial Group	Occupation VP of Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.20	

Full Name (Last, First, Middle Initial) <b>B. STEPHEN HAMILTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17856
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 17.45
Name of Employer Principal Financial Group	Occupation VP of Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 296.65	

Full Name (Last, First, Middle Initial) <b>C. LORAINNE HARDIN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17870
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Principal Financial Group	Occupation SVP-Production-PRMI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	59.90
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 66
	<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. LORAIN HARDIN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17869</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP-Production-PRMI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) <b>B. MONICA HAUN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17882</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) <b>C. MONICA HAUN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17881</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP-IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 326.91	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	63.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. PHILIP HAYNE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17889</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 11.92	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Assoc Dir-Advanced Mkt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.64	

Full Name (Last, First, Middle Initial) <b>B. JOYCE HOFFMAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17925</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP & Corporate Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) <b>C. JOYCE HOFFMAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17926</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP & Corporate Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	88.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. DENNIS HOLLAND</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17929</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Special Mkt Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. ROGER HOLTON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17937</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Managing Director-Unit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. ROGER HOLTON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17936</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Managing Director-Unit	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 66
	<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 HOUSTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17946
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 18.46
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 295.36	

Full Name (Last, First, Middle Initial) <b>B. DANIEL HOUSTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17947
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 18.46
Name of Employer Principal Financial Group	Occupation Sr VP Retirement & Invest Svc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 313.82	

Full Name (Last, First, Middle Initial) <b>C. BRADLEY JENSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.17973
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 21.15
Name of Employer Principal Financial Group	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.40	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	58.07
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 66
	<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. BRADLEY JENSEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17974</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 21.15	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 359.55	

Full Name (Last, First, Middle Initial) <b>B. RICHARD JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.17985</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 12.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Operations Director-Life & DI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

Full Name (Last, First, Middle Initial) <b>C. CAREY JURY</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18002</b>
City State Zip Code Des Moines IA 50392-6100	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Group Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	108.15
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 66
	<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. CAREY JURY</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18001
City State Zip Code Des Moines IA 50392-6100	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Group Underwriting	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1275.00	

Full Name (Last, First, Middle Initial) <b>B. CLIFFORD KARTHAUSER</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18021
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 55.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Regional Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. MONICA KIRGAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18039
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 33.24	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Individual Investor Mkt Seg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 517.99	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	163.24
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MONICA KIRGAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18038</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 33.24	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Individual Investor Mkt Seg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 551.23	

Full Name (Last, First, Middle Initial) <b>B. PETER KORNWEISS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18053</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Preferred Product Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 412.50	

Full Name (Last, First, Middle Initial) <b>C. PETER KORNWEISS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18052</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 27.50	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Preferred Product Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	88.24
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
ELLEN LAMALE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP & Chief Actuary

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1120.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.18070

Amount of Each Receipt this Period  
70.00

**B.** Full Name (Last, First, Middle Initial)  
ELLEN LAMALE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP & Chief Actuary

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1190.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.18071

Amount of Each Receipt this Period  
70.00

**C.** Full Name (Last, First, Middle Initial)  
JULIA LAWLER-JOHNSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP & Chief Inv Officer

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.18082

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	190.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
JULIA LAWLER-JOHNSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Sr VP & Chief Inv Officer

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.18083

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
RICHARD LAWSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP-Federal Govt Relations

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 615.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.18085

Amount of Each Receipt this Period  
38.46

**C.** Full Name (Last, First, Middle Initial)  
RICHARD LAWSON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP-Federal Govt Relations

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 653.82

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.18084

Amount of Each Receipt this Period  
38.46

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	126.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
SCOTT LEIBERTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

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

Transaction ID: SA11A1.18090

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
SCOTT LEIBERTON

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.18091

Amount of Each Receipt this Period  
20.00

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

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

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

Transaction ID: SA11A1.18106

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	70.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. GREGORY LINDE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18107</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation VP-Product Mgmt & Service		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00		

Full Name (Last, First, Middle Initial) <b>B. DENNIS LONG</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18111</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation Vice President-ESG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36		

Full Name (Last, First, Middle Initial) <b>C. DENNIS LONG</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18110</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation Vice President-ESG		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	106.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 66
	<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. JOSEPH MARX</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18137
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 12.00
Name of Employer Principal Financial Group	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

Full Name (Last, First, Middle Initial) <b>B. CHRIS MAYER</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18146
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 17.00
Name of Employer Principal Financial Group	Occupation 2nd VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00	

Full Name (Last, First, Middle Initial) <b>C. CHRIS MAYER</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18147
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 17.00
Name of Employer Principal Financial Group	Occupation 2nd VP & Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	46.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 66
	<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. JAMES MCCAUGHAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18154
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Principal Financial Group	Occupation President-Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1846.08	

Full Name (Last, First, Middle Initial) <b>B. JAMES MCCAUGHAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18155
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 115.38
Name of Employer Principal Financial Group	Occupation President-Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1961.46	

Full Name (Last, First, Middle Initial) <b>C. SONYA MCKAY</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18166
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer Principal Financial Group	Occupation Sr Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	260.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 66
	<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. BARBARA MCKENZIE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18168</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Exec Dir-Int'l Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. BARBARA MCKENZIE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18167</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Exec Dir-Int'l Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) <b>C. ARTHUR MCMAHON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18172</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 23.87	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP - Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 381.92	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	83.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. ARTHUR MCMAHON</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18171</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 23.87	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP - Product Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.79	

Full Name (Last, First, Middle Initial) <b>B. SHELLY MEIGHAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18178</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP Product Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. SHELLY MEIGHAN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18177</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd VP Product Portfolio Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	73.87
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 43 / 66
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. DAVID MILES</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18187</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP Prod Dvlpmnt - Mutual Funds	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID MILES</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18188</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SVP Prod Dvlpmnt - Mutual Funds	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) <b>C. AMY MILLS</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18198</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP & Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	98.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. AMY MILLS</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18197
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group Occupation VP & Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82

Full Name (Last, First, Middle Initial) <b>B. MARK MOVIC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18231
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group Occupation VP-Insured Medical Products	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.52

Full Name (Last, First, Middle Initial) <b>C. MARK MOVIC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18232
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 38.47
Name of Employer Principal Financial Group Occupation VP-Insured Medical Products	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.99

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.40
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. LUIS NUNES</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18262</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP Corp & Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) <b>B. LUIS NUNES</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18261</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP Corp & Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>C. MARY O'KEEFE</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18273</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SrVP & Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 66
	<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. MARY O'KEEFE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18274</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SrVP & Chief Marketing Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>B. HUGH O'TOOLE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18284</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- Registered Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. HUGH O'TOOLE</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18285</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP- Registered Product	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	138.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 66
	<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. MERLE PEDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18303</b>
City State Zip Code Des Moines IA 50392-0220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>B. MERLE PEDERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18302</b>
City State Zip Code Des Moines IA 50392-0220	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

Full Name (Last, First, Middle Initial) <b>C. PETER PRODOEHL</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18350</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation 2nd Vice President-ESG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	59.23
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 66
	<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. PETER PRODOEHL</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18349</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 19.23	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation 2nd Vice President-ESG			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 326.91	

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER REDDY</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18376</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 22.17	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation 2nd VP (Pen Admin)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. CHRISTOPHER REDDY</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18375</b>	
City State Zip Code Des Moines IA 50392-0001		Amount of Each Receipt this Period 22.17	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group Occupation 2nd VP (Pen Admin)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 462.17	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	63.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. R LUCIA RIDDLE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18402
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. R LUCIA RIDDLE</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18401
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Vp-Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL ROUGHTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18420
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP & Sr. Securities Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MICHAEL ROUGHTON</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18421
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 15.00
Name of Employer Principal Financial Group	Occupation VP & Sr. Securities Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Full Name (Last, First, Middle Initial) <b>B. ROBERT SALVA</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18447
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer Principal Financial Group	Occupation 2nd VP Preferred Prod Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) <b>C. ROBERT SALVA</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID:</b> SA11A1.18446
City State Zip Code Des Moines IA 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 20.00
Name of Employer Principal Financial Group	Occupation 2nd VP Preferred Prod Network	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	55.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. JOHN SCHMIDT</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18477
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation VP & Sr. Tax Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 640.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN SCHMIDT</b>		Date of Receipt MM / DD / YYYY 08 / 25 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18476
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation VP & Sr. Tax Counsel	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 680.00	

Full Name (Last, First, Middle Initial) <b>C. GARY SCHOLTEN</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18483
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 40.00
Name of Employer Principal Financial Group Occupation SR VP & CIO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	Aggregate Year-to-Date ▼ 640.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 66
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. GARY SCHOLTEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18482</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation SR VP & CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 680.00	

Full Name (Last, First, Middle Initial) <b>B. EDWARD SCHUH</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18491</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Investment Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.00	

Full Name (Last, First, Middle Initial) <b>C. EDWARD SCHUH</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18490</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 16.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Investment Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	72.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 66
	<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. KAREN SHAFF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18498</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Principal Financial Group	Occupation Exec VP - General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	

Full Name (Last, First, Middle Initial) <b>B. KAREN SHAFF</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18497</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Principal Financial Group	Occupation Exec VP - General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	

Full Name (Last, First, Middle Initial) <b>C. MARTHA SHEPARD</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18500</b>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP & General Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	238.46
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. MARTHA SHEPARD</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18499</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 38.46		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation VP & General Auditor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82		

Full Name (Last, First, Middle Initial) <b>B. MEG SKINNER</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18511</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 57.69		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation SVP Life & Health Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 923.04		

Full Name (Last, First, Middle Initial) <b>C. MEG SKINNER</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18510</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 57.69		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation SVP Life & Health Distribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 980.73		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	153.84
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 66
	<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. TOM SMITH</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18519</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.85	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.60	

Full Name (Last, First, Middle Initial) <b>B. TOM SMITH</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18518</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 28.85	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP of Sales - Retirement Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.45	

Full Name (Last, First, Middle Initial) <b>C. NORMAN SORENSEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18522</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Sr VP-Int'l Asset Accumulation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1230.72	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	134.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 66
	<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. NORMAN SORENSEN</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18523</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 76.92	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation Sr VP-Int'l Asset Accumulation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1307.64	

Full Name (Last, First, Middle Initial) <b>B. DEANNA STRABLE-SOETHOUT</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18555</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Speciality Benefits Div	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name (Last, First, Middle Initial) <b>C. DEANNA STRABLE-SOETHOUT</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18555</b>
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Financial Group	Occupation VP-Speciality Benefits Div	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	146.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
DANIEL THOMAS

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Program Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.18599

Amount of Each Receipt this Period  
19.23

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

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Program Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 326.91

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2006

Transaction ID: SA11A1.18600

Amount of Each Receipt this Period  
19.23

**C.** Full Name (Last, First, Middle Initial)  
TERRENCE TOBIN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Director-Prin Enterprise Cap

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 11 / 2006

Transaction ID: SA11A1.18619

Amount of Each Receipt this Period  
15.00

<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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 66
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
TERRENCE TOBIN

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation Director-Prin Enterprise Cap

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.18620

Amount of Each Receipt this Period  
15.00

**B.** Full Name (Last, First, Middle Initial)  
HARVEY WEINBERG

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation 2nd VP - Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.42

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 2 5 / 2 0 0 6

Transaction ID: SA11A1.18680

Amount of Each Receipt this Period  
12.26

**C.** Full Name (Last, First, Middle Initial)  
HUGH WHITE

Mailing Address Principal Financial Group  
711 High Street

City State Zip Code  
Des Moines IA 50392-0001

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

Name of Employer Principal Financial Group Occupation VP of Sales - Group Benefits

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

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

Transaction ID: SA11A1.18710

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	47.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. HUGH WHITE</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18711</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation VP of Sales - Group Benefits		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) <b>B. STEVEN WHITTY</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18714</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation VP Group Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) <b>C. STEVEN WHITTY</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2006	
Mailing Address Principal Financial Group 711 High Street		<b>Transaction ID: SA11A1.18715</b>	
City State Zip Code Des Moines IA 50392-0001	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation VP Group Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	80.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 66
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. WILLIAM WORKMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18736
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP-IT Life & Disability	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 615.36	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM WORKMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18737
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.46
Name of Employer Principal Financial Group	Occupation VP-IT Life & Disability	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 653.82	

Full Name (Last, First, Middle Initial) <b>C. LARRY ZIMPLEMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 6
Mailing Address Principal Financial Group 711 High Street		Transaction ID: SA11A1.18750
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.20
Name of Employer Principal Financial Group	Occupation President-Ret & Investor Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	102.12
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 61 / 66	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
**LARRY ZIMPLEMAN**

Mailing Address **Principal Financial Group**  
**711 High Street**

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **428.40**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	5	/	2	0	0	6

**Transaction ID: SA11A1.18751**

Amount of Each Receipt this Period  

<b>25.20</b>
--------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>25.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>5988.18</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 62 / 66

<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) <b>A. Citizens for Gronstal</b>		<b>Transaction ID:</b> SB29.17259 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 220 Bennett Avenue		Amount of Each Disbursement this Period 3000.00
City Council Bluffs	State IA Zip Code 51503	
Purpose of Disbursement Contribution		
Candidate Name Mike Gronstal		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 42		

Full Name (Last, First, Middle Initial) <b>B. Citizens for Heaton</b>		<b>Transaction ID:</b> SB29.17256 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 510 E. Washington Street		Amount of Each Disbursement this Period 300.00
City Mount Pleasant	State IA Zip Code 52641-1939	
Purpose of Disbursement Contribution		
Candidate Name David Heaton		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 91		

Full Name (Last, First, Middle Initial) <b>C. Clute for State House Committee</b>		<b>Transaction ID:</b> SB29.17269 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 1671 N.W. 122nd Court		Amount of Each Disbursement this Period 400.00
City Clive	State IA Zip Code 50325	
Purpose of Disbursement Contribution		
Candidate Name Dan Clute		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 59		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 66

<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) <b>A. Committee to Elect Robert E. Dvorsky</b>		<b>Transaction ID: SB29.17252</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 412 6th Street		Amount of Each Disbursement this Period 750.00
City Coralville State IA Zip Code 52241	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Robert Dvorsky		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Dolecheck for Representative</b>		<b>Transaction ID: SB29.17253</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 703 N. Filmore		Amount of Each Disbursement this Period 300.00
City Mount Ayr State IA Zip Code 50854	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Cecil Dolecheck		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 96	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. George Eichhorn for Iowa House</b>		<b>Transaction ID: SB29.17251</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 140		Amount of Each Disbursement this Period 500.00
City Stratford State IA Zip Code 50249	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name George Eichhorn		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> 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) <b>A. Hoffman for Iowa House</b>		<b>Transaction ID: SB29.17257</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 616 Parkview Drive		Amount of Each Disbursement this Period 1000.00
City Denison State IA Zip Code 51442	Purpose of Disbursement Contribution Candidate Name Clarence Hoffman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 55 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Horbach for House of Representatives</b>		<b>Transaction ID: SB29.17258</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 1014 Oakland Drive		Amount of Each Disbursement this Period 500.00
City Tama State IA Zip Code 52339	Purpose of Disbursement Contribution Candidate Name Lance Horbach Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 40 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Kibbie for Senate</b>		<b>Transaction ID: SB29.17260</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 190		Amount of Each Disbursement this Period 750.00
City Emmetsburg State IA Zip Code 50536	Purpose of Disbursement Contribution Candidate Name Jack Kibbie Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 4 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 66

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A.** Full Name (Last, First, Middle Initial)  
McKibben for Senate Committee

Mailing Address P.O. Box 308

City Marshalltown State IA Zip Code 50158

Purpose of Disbursement  
Contribution

Candidate Name  
Larry McKibben

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IA District: 22

Transaction ID: SB29.17261

Date of Disbursement

08 / 01 / 2006

Amount of Each Disbursement this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Murphy for State Representative

Mailing Address 155 North Grandview Avenue

City Dubuque State IA Zip Code 52001-6325

Purpose of Disbursement  
Contribution

Candidate Name  
Pat Murphy

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IA District: 28

Transaction ID: SB29.17254

Date of Disbursement

08 / 01 / 2006

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
Neighbors for Hatch

Mailing Address 1623 Woodland Avenue

City Des Moines State IA Zip Code 50309

Purpose of Disbursement  
Contribution

Candidate Name  
Jack Hatch

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: IA District: 33

Transaction ID: SB29.17249

Date of Disbursement

08 / 01 / 2006

Amount of Each Disbursement this Period

600.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

2900.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 66

<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) <b>A. Oldson for State Representative</b>		<b>Transaction ID:</b> SB29.17250 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 418 38th Place		Amount of Each Disbursement this Period 500.00
City Des Moines	State IA	
Zip Code 50312	Purpose of Disbursement Contribution	
Candidate Name Jo Oldson	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 61		

Full Name (Last, First, Middle Initial) <b>B. Upmeyer for House</b>		<b>Transaction ID:</b> SB29.17255 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 2175 Pine Avenue		Amount of Each Disbursement this Period 200.00
City Garner	State IA	
Zip Code 50438	Purpose of Disbursement Contribution	
Candidate Name Linda Upmeyer	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 12		

Full Name (Last, First, Middle Initial) <b>C. Watts for House</b>		<b>Transaction ID:</b> SB29.17270 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 6
Mailing Address 2824 Prospect Avenue		Amount of Each Disbursement this Period 500.00
City Adel	State IA	
Zip Code 50003	Purpose of Disbursement Contribution	
Candidate Name Ralph Watts	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 47		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	11600.00