



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		67637.26
(b) Cash on Hand at Beginning of Reporting Period.....	83828.34	
(c) Total Receipts (from Line 19) .....	21353.99	46795.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	105182.33	114432.33
7. Total Disbursements (from Line 31).....	28500.00	37750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	76682.33	76682.33
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Principal Life Insurance Company Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7683.54	10689.07
(ii) Unitemized .....	13670.45	36106.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21353.99	46795.07
(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) .....	21353.99	46795.07
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	21353.99	46795.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21353.99	46795.07

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28500.00	37000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28500.00	37750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28500.00	37750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21353.99	46795.07
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21353.99	46795.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 51
<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. Arthur John Bacci</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-107</b>
Mailing Address 6200 Park Ave		Amount of Each Receipt this Period 32.00
City Des Moines State IA Zip Code 50321-1270	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation VP-CEO/President PTC & Bank	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00

Full Name (Last, First, Middle Initial) <b>B. Michael Jon Beer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 16 / 2012 <b>Transaction ID : 20120403172918-1389</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 35.00
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation VP-Mutual Funds & Broker Dealer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

Full Name (Last, First, Middle Initial) <b>C. Michael Jon Beer</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-1390</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 35.00
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation VP-Mutual Funds & Broker Dealer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	102.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Louise A. Billmeyer</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 16 / 2012 <b>Transaction ID : 20120403172918-1201</b>		
Mailing Address 711 High St			Amount of Each Receipt this Period 98.00		
City Des Moines	State IA	Zip Code 50392-0001			
FEC ID number of contributing federal political committee. C					
Name of Employer Principal Life Ins Co.		Occupation VP & CIO - SCBU			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.00			

Full Name (Last, First, Middle Initial) <b>B. Louise A. Billmeyer</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-1202</b>		
Mailing Address 711 High St			Amount of Each Receipt this Period 39.00		
City Des Moines	State IA	Zip Code 50392-0001			
FEC ID number of contributing federal political committee. C					
Name of Employer Principal Life Ins Co.		Occupation VP & CIO - SCBU			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 273.00			

Full Name (Last, First, Middle Initial) <b>C. Patti R. Blumer</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 16 / 2012 <b>Transaction ID : 20120403172918-1534</b>		
Mailing Address 1350 I St NW Ste 880			Amount of Each Receipt this Period 20.00		
City Washington	State DC	Zip Code 20005-7207			
FEC ID number of contributing federal political committee. C					
Name of Employer Principal Life Ins Co.		Occupation Director, Federal Gov Rel-DC			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.20			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	98.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Patti R. Blumer</b>		Date of Receipt
Mailing Address 1350 I St NW Ste 880		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City Washington	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20120403172918-1535</b>
Name of Employer Principal Life Ins Co.	Occupation Director, Federal Gov Rel-DC	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2000"/>
	<input type="text" value="225.20"/>	

Full Name (Last, First, Middle Initial) <b>B. Christopher Joseph Bowman</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20120403172918-277</b>
Name of Employer Principal Life Ins Co.	Occupation VP-Corp Strategy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="350.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Christopher Joseph Bowman</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20120403172918-278</b>
Name of Employer Principal Life Ins Co.	Occupation VP-Corp Strategy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
	<input type="text" value="350.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="120.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
	<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. Christopher Joseph Bowman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-279**  
 Amount of Each Receipt this Period  
 50.00

**B. David James Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP - Compliance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.18

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-412**  
 Amount of Each Receipt this Period  
 31.74

**C. Paul Alvin Brown**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP- Institutional Mkt Segment  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-1537**  
 Amount of Each Receipt this Period  
 39.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 120.74  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Principal Life Insurance Company Political Action Committee**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **273.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-1538**

Amount of Each Receipt this Period  
**39.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2012**

**Transaction ID : 20120403172918-1483**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**

**Transaction ID : 20120403172918-1484**

Amount of Each Receipt this Period  
**75.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>189.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-1485**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 18101 Von Karman Ave Ste 1170

City Irvine State CA Zip Code 92612-7169

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.95**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-1953**

Amount of Each Receipt this Period  
**28.85**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2012**

**Transaction ID : 20120403172918-659**

Amount of Each Receipt this Period  
**63.45**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **167.30**

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

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

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

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

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**

**Transaction ID : 20120403172918-660**

Amount of Each Receipt this Period  
**63.45**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.15**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-661**

Amount of Each Receipt this Period  
**63.45**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **269.22**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**

**Transaction ID : 20120403172918-1487**

Amount of Each Receipt this Period  
**38.46**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **165.36**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 51
	<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. Nicholas M. Cecere**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP - USIS Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.22

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-1488**  
 Amount of Each Receipt this Period  
 38.46

**B. Barrie Gibb Christman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Individual Investor Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 342.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 20120403172918-129**  
 Amount of Each Receipt this Period  
 50.00

**C. Barrie Gibb Christman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Individual Investor Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 342.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-130**  
 Amount of Each Receipt this Period  
 50.00

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 51
	<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. Barrie Gibb Christman**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.32**

Date of Receipt **03 / 30 / 2012**

**Transaction ID : 20120403172918-131**

Amount of Each Receipt this Period **50.00**

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

Mailing Address 6525 Chancellor Dr  
Cedar Falls Industrial Park

City Cedar Falls State IA Zip Code 50613-6957

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **03 / 16 / 2012**

**Transaction ID : 20120403172918-1398**

Amount of Each Receipt this Period **35.00**

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

Mailing Address 6525 Chancellor Dr  
Cedar Falls Industrial Park

City Cedar Falls State IA Zip Code 50613-6957

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **03 / 30 / 2012**

**Transaction ID : 20120403172918-1399**

Amount of Each Receipt this Period **35.00**

**SUBTOTAL** of Receipts This Page (optional)..... **120.00**

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

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

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

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

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

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

Mailing Address 4141 Parklake Ave  
Ste 400

City Raleigh State NC Zip Code 27612-2333

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.18

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-622**

Amount of Each Receipt this Period  
31.74

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP - Strategy & Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.22

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 20120403172918-1971**

Amount of Each Receipt this Period  
63.46

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP - Strategy & Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 444.22

Date of Receipt  
03 / 16 / 2012  
**Transaction ID : 20120403172918-1972**

Amount of Each Receipt this Period  
63.46

**SUBTOTAL** of Receipts This Page (optional).....▶ 158.66

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 51
	<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. Timothy Mark Dunbar**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP - Strategy & Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.22**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-1973**

Amount of Each Receipt this Period  
**63.46**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **222.18**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-873**

Amount of Each Receipt this Period  
**31.74**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **448.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2012**

**Transaction ID : 20120403172918-662**

Amount of Each Receipt this Period  
**64.00**

**SUBTOTAL** of Receipts This Page (optional)..... **159.20**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 51
	<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. Gregory Bernard Elming</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 16 / 2012 <b>Transaction ID : 20120403172918-663</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 64.00
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 448.00
Name of Employer Principal Life Ins Co.		Occupation SVP & Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gregory Bernard Elming</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-664</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 64.00
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 448.00
Name of Employer Principal Life Ins Co.		Occupation SVP & Chief Risk Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Ralph Craig Eucher</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-1601</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 190.00
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 340.00
Name of Employer Principal Life Ins Co.		Occupation SVP HR & Corp Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	318.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Nora Mary Everett**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
**03 / 02 / 2012**  
**Transaction ID : 20120403172918-1498**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**B. Nora Mary Everett**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
**03 / 16 / 2012**  
**Transaction ID : 20120403172918-1499**

Amount of Each Receipt this Period  
**45.00**

Full Name (Last, First, Middle Initial)  
**C. Nora Mary Everett**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt  
**03 / 30 / 2012**  
**Transaction ID : 20120403172918-1500**

Amount of Each Receipt this Period  
**45.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **135.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 51
	<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. Douglas Alan Fick</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-534</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & CIO - US Ins. Solutions		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="314.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Douglas Alan Fick</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-535</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & CIO - US Ins. Solutions		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="314.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Douglas Alan Fick</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-536</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & CIO - US Ins. Solutions		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="314.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 51
	<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 Patrick Finnegan</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-1405</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="32.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & Chief Invest Officer- PMC		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="224.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Louis E. Flori</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-1199</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="31.76"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP - Capital Markets		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="222.32"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Brent Eugene Fritz</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 20120403172918-187</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="31.74"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP & Actuary-Individual		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="222.18"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="95.50"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 51
	<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. Victoria Whitaker Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 51 Germantown Ct  
Principal Financial Group, Ste 101

City Cordova State TN Zip Code 38018-4278

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 20120403172918-2019**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 51 Germantown Ct  
Principal Financial Group, Ste 101

City Cordova State TN Zip Code 38018-4278

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
03 / 16 / 2012  
**Transaction ID : 20120403172918-2020**

Amount of Each Receipt this Period  
75.00

**C. Victoria Whitaker Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 51 Germantown Ct  
Principal Financial Group, Ste 101

City Cordova State TN Zip Code 38018-4278

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-2021**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 51
	<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. Douglas E. Grove**  
Full Name (Last, First, Middle Initial)

Mailing Address 3025 Highland Pkwy  
Ste 425

City Downers Grove State IL Zip Code 60515-5660

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.50

Date of Receipt  
03 / 16 / 2012  
**Transaction ID : 20120403172918-538**

Amount of Each Receipt this Period  
38.50

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

Mailing Address 3025 Highland Pkwy  
Ste 425

City Downers Grove State IL Zip Code 60515-5660

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.50

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-539**

Amount of Each Receipt this Period  
38.50

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.18

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-1526**

Amount of Each Receipt this Period  
31.74

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 108.74

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) <b>A. Mark A. Hanrahan</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1239</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. Mng Dir-CRE		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="700.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Mark A. Hanrahan</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1240</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. Mng Dir-CRE		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="700.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Mark A. Hanrahan</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1241</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. Mng Dir-CRE		<input type="text" value="100.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="700.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 51
	<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 J. Henderson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-288</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 32.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Hiller</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-775</b>
Mailing Address 502 Kathy Dr		Amount of Each Receipt this Period 32.00
City Yardley	State PA	Zip Code 19067-1707
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Life Ins Co.	Occupation Chief Compliance Officer-PGI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) <b>C. Jill Marie Hittner</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 30 / 2012 <b>Transaction ID : 20120403172918-841</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 31.74
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Principal Life Ins Co.	Occupation Chief Financial Officer-PGI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.18	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.74
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 51
	<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. Joyce N. Hoffman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

Name of Employer Principal Life Ins Co.	Occupation SVP & Corporate Secretary
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.22**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2012

**Transaction ID : 20120403172918-930**

Amount of Each Receipt this Period  

63.46
-------

**B. Joyce N. Hoffman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

Name of Employer Principal Life Ins Co.	Occupation SVP & Corporate Secretary
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.22**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2012

**Transaction ID : 20120403172918-931**

Amount of Each Receipt this Period  

63.46
-------

**C. Joyce N. Hoffman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

Name of Employer Principal Life Ins Co.	Occupation SVP & Corporate Secretary
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.22**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 20120403172918-932**

Amount of Each Receipt this Period  

63.46
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>190.38</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

**A. Daniel Joseph Houston**

Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1190.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 20120403172918-362**

Amount of Each Receipt this Period  
170.00

**B. Daniel Joseph Houston**

Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1190.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-363**

Amount of Each Receipt this Period  
170.00

**C. Daniel Joseph Houston**

Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1190.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-364**

Amount of Each Receipt this Period  
170.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	510.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**  
**Transaction ID : 20120403172918-1461**

Amount of Each Receipt this Period  
**36.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : 20120403172918-1462**

Amount of Each Receipt this Period  
**36.00**

Full Name (Last, First, Middle Initial)  
**C. Mark Seth Lagomarcino**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation VP & Assoc Gen Counsel-Litig.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **222.32**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : 20120403172918-1251**

Amount of Each Receipt this Period  
**31.76**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>103.76</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 51
<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. Julia M. Lawler-Johnson</b>		Date of Receipt MM / DD / YYYY 03 / 02 / 2012 <b>Transaction ID : 20120403172918-939</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 63.46
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation Svp & Chief Inv Officer		Aggregate Year-to-Date ▼ 444.22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Julia M. Lawler-Johnson</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2012 <b>Transaction ID : 20120403172918-940</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 63.46
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation Svp & Chief Inv Officer		Aggregate Year-to-Date ▼ 444.22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Julia M. Lawler-Johnson</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 <b>Transaction ID : 20120403172918-941</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 63.46
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation Svp & Chief Inv Officer		Aggregate Year-to-Date ▼ 444.22
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.38
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 51
	<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. Richard C. Lawson**  
Full Name (Last, First, Middle Initial)

Mailing Address 1350 I St NW  
Ste 880

City Washington State DC Zip Code 20005-7207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **269.22**

Date of Receipt  
**03 / 16 / 2012**  
Transaction ID : **20120403172918-1669**

Amount of Each Receipt this Period  
**38.46**

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

Mailing Address 1350 I St NW  
Ste 880

City Washington State DC Zip Code 20005-7207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **269.22**

Date of Receipt  
**03 / 30 / 2012**  
Transaction ID : **20120403172918-1670**

Amount of Each Receipt this Period  
**38.46**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt  
**03 / 02 / 2012**  
Transaction ID : **20120403172918-1930**

Amount of Each Receipt this Period  
**110.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>186.92</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 51
	<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. Terrance Joseph Lillis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-1931**  
 Amount of Each Receipt this Period  
 110.00

**B. Terrance Joseph Lillis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP & Chief Financial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-1932**  
 Amount of Each Receipt this Period  
 110.00

**C. Gregory Allen Linde**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP - Individual Life  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-667**  
 Amount of Each Receipt this Period  
 31.76

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 251.76  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial)  
**A. Warren Hamilton May**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Nat'l VP-Independent Distr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2012  
**Transaction ID : 803F7A9C706F5B78D2A**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 888 7th Ave  
FI 25

City New York State NY Zip Code 10106-2599

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 20120403172918-710**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address 888 7th Ave  
FI 25

City New York State NY Zip Code 10106-2599

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-711**

Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 51
	<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 P. McCaughan</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 <b>Transaction ID : 20120403172918-712</b>
Mailing Address 888 7th Ave FI 25		Amount of Each Receipt this Period 100.00
City New York	State NY	
Zip Code 10106-2599		Aggregate Year-to-Date ▼ 700.00
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation President Global Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Daniel John McGee</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2012 <b>Transaction ID : 20120403172918-375</b>
Mailing Address 14045 Ballantyne Corporate Pl Ste 500		Amount of Each Receipt this Period 40.00
City Charlotte	State NC	
Zip Code 28277-3868		Aggregate Year-to-Date ▼ 280.00
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP-Managing Dir, RIS Distrib	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Daniel John McGee</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2012 <b>Transaction ID : 20120403172918-376</b>
Mailing Address 14045 Ballantyne Corporate Pl Ste 500		Amount of Each Receipt this Period 40.00
City Charlotte	State NC	
Zip Code 28277-3868		Aggregate Year-to-Date ▼ 280.00
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation VP-Managing Dir, RIS Distrib	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A. Barbara Ann McKenzie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Exec Dir - COO & Boutique Ops  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **224.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : 20120403172918-128**  
 Amount of Each Receipt this Period **32.00**

**B. Shelly Marie Meighan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation AVP-Business Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **224.00**

Date of Receipt **03 / 30 / 2012**  
**Transaction ID : 20120403172918-1823**  
 Amount of Each Receipt this Period **32.00**

**C. Amy Joan Mills**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **269.22**

Date of Receipt **03 / 16 / 2012**  
**Transaction ID : 20120403172918-43**  
 Amount of Each Receipt this Period **38.46**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>102.46</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **269.22**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**

**Transaction ID : 20120403172918-44**

Amount of Each Receipt this Period  
**38.46**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2012**

**Transaction ID : 20120403172918-1977**

Amount of Each Receipt this Period  
**65.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **455.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**

**Transaction ID : 20120403172918-1978**

Amount of Each Receipt this Period  
**65.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>168.46</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 51
	<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 Jon Minard</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1979</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. SVP - Distribution		<input type="text" value="65.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="455.00"/>

Full Name (Last, First, Middle Initial) <b>B. Jacqu Sue Mohs</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-687</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP- Dynamic Market Segment		<input type="text" value="35.20"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="246.40"/>

Full Name (Last, First, Middle Initial) <b>C. Jacqu Sue Mohs</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-688</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP- Dynamic Market Segment		<input type="text" value="35.20"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="246.40"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="135.40"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 51
	<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. Mary Agnes O'Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.61

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 20120403172918-1325**

Amount of Each Receipt this Period  
 44.23

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.61

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-1326**

Amount of Each Receipt this Period  
 44.23

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 309.61

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-1327**

Amount of Each Receipt this Period  
 44.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 132.69

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 51
	<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. Gerald W. Patterson**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.32

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-640**

Amount of Each Receipt this Period  
31.76

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-1387**

Amount of Each Receipt this Period  
32.00

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

Mailing Address 1350 I St NW Ste 880

City Washington State DC Zip Code 20005-7207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 20120403172918-1593**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 113.76

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 51
	<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. R. Lucia Riddle**  
Full Name (Last, First, Middle Initial)

Mailing Address 1350 I St NW  
Ste 880

City Washington State DC Zip Code 20005-7207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
03 / 16 / 2012  
**Transaction ID : 20120403172918-1594**

Amount of Each Receipt this Period  
**50.00**

**B. R. Lucia Riddle**  
Full Name (Last, First, Middle Initial)

Mailing Address 1350 I St NW  
Ste 880

City Washington State DC Zip Code 20005-7207

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-1595**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-1423**

Amount of Each Receipt this Period  
**32.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **132.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 51
	<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. Renee Vachelle Schaaf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1275 NW 128th St  
 Ste 100  
 City Clive State IA Zip Code 50325-7450  
 Name of Employer Principal Life Ins Co. Occupation VP - Health  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 20120403172918-1643**  
 Amount of Each Receipt this Period 32.00

**B. Gary Paul Scholten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 Name of Employer Principal Life Ins Co. Occupation SVP & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.50

Date of Receipt 03 / 02 / 2012  
**Transaction ID : 20120403172918-626**  
 Amount of Each Receipt this Period 63.50

**C. Gary Paul Scholten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 Name of Employer Principal Life Ins Co. Occupation SVP & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 444.50

Date of Receipt 03 / 16 / 2012  
**Transaction ID : 20120403172918-627**  
 Amount of Each Receipt this Period 63.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....	159.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 51
	<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. Gary Paul Scholten**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **444.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2012**  
**Transaction ID : 20120403172918-628**

Amount of Each Receipt this Period  
**63.50**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 02 / 2012**  
**Transaction ID : 20120403172918-993**

Amount of Each Receipt this Period  
**110.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2012**  
**Transaction ID : 20120403172918-994**

Amount of Each Receipt this Period  
**110.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **283.50**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 51
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 20120403172918-995**

Amount of Each Receipt this Period  

110.00
--------

Full Name (Last, First, Middle Initial)  
**B. Laurel Jean Shultz**

Mailing Address 111 W State St

City Mason City	State IA	Zip Code 50401-3131
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.88**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 20120403172918-1120**

Amount of Each Receipt this Period  

28.84
-------

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

Mailing Address 711 High St

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

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

Name of Employer Principal Life Ins Co.	Occupation Exec Dir-Strategy&Boutique Ops
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **224.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

**Transaction ID : 20120403172918-590**

Amount of Each Receipt this Period  

32.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>170.84</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 51
	<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. Tom Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 2000 Riveredge Pkwy NW  
Ste 1000

City Atlanta State GA Zip Code 30328-4657

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

Name of Employer Principal Life Ins Co. Occupation Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.95

Date of Receipt  
03 / 30 / 2012  
**Transaction ID : 20120403172918-1994**

Amount of Each Receipt this Period  
28.85

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Chairman - Principal Int'l

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
576.90

Date of Receipt  
03 / 02 / 2012  
**Transaction ID : 20120403172918-1501**

Amount of Each Receipt this Period  
96.15

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation Chairman - Principal Int'l

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
576.90

Date of Receipt  
03 / 16 / 2012  
**Transaction ID : 20120403172918-1502**

Amount of Each Receipt this Period  
96.15

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 221.15

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 51
	<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. Deanna Dawnette Strable-Soethout</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-430</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. SVP - U.S. Insurance Solutions		<input type="text" value="70.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="490.00"/>

Full Name (Last, First, Middle Initial) <b>B. Deanna Dawnette Strable-Soethout</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-431</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. SVP - U.S. Insurance Solutions		<input type="text" value="70.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="490.00"/>

Full Name (Last, First, Middle Initial) <b>C. Deanna Dawnette Strable-Soethout</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-432</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. SVP - U.S. Insurance Solutions		<input type="text" value="70.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="490.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 51
	<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. Karen S. Thomann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & CIO-Retire Investor Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.18

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 20120403172918-998**  
 Amount of Each Receipt this Period 31.74

**B. Joni Lynn Tibbetts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP- Sales Engineering  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 20120403172918-909**  
 Amount of Each Receipt this Period 32.00

**C. Leanne M. Valentine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP & Associate General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 222.18

Date of Receipt 03 / 30 / 2012  
**Transaction ID : 20120403172918-1139**  
 Amount of Each Receipt this Period 31.74

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.48
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 51
	<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. Luke Joseph Vandermillen</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1210</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP RIS Marketing		<input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Luke Joseph Vandermillen</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1211</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP RIS Marketing		<input type="text" value="35.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Steven C. Whitty</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Des Moines IA 50392-0001		<b>Transaction ID : 20120403172918-1885</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Occupation Principal Life Ins Co. VP Corporate Marketing		<input type="text" value="32.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="224.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="102.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 51
	<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. Larry Donald Zimpleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 02 / 2012  
**Transaction ID : 20120403172918-1112**  
 Amount of Each Receipt this Period  
 192.30

**B. Larry Donald Zimpleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2012  
**Transaction ID : 20120403172918-1113**  
 Amount of Each Receipt this Period  
 192.30

**C. Larry Donald Zimpleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1346.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2012  
**Transaction ID : 20120403172918-1114**  
 Amount of Each Receipt this Period  
 192.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	576.90
<b>TOTAL</b> This Period (last page this line number only).....▶	7683.54

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ben Cardin for Senate**

Mailing Address PO Box 21093

City State Zip Code  
Catonsville MD 21228

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Benjamin L. Cardin**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	2

**Transaction ID : 6DAA17799D9F6B5B8BE**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Boswell for Congress**

Mailing Address PO Box 1814

City State Zip Code  
Des Moines IA 50305

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Leonard L. Boswell**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

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

**Transaction ID : 851225C718B8F0EF109**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Braley for Congress**

Mailing Address PO Box 390

City State Zip Code  
Waterloo IA 50704

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Bruce L. Braley**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

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

**Transaction ID : 2B7819753366ED39284**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

4	5	0	0	.	0	0
---	---	---	---	---	---	---

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

4	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Congressional Black Caucus PAC**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Congressional Black Caucus PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2012

**Transaction ID : 54810C385E988158973**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Democratic Senatorial Campaign Committee**

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Democratic Senatorial Campaign Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2012

**Transaction ID : 8A1210F5D745005EC14**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Financial Services Roundtable PAC**

Mailing Address 1001 Pennsylvania Avenue, NW  
Suite 500 South

City Washington State DC Zip Code 20004

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**Financial Services Roundtable PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
03 / 12 / 2012

**Transaction ID : D45B0C15951E4166156**

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hatch Election Committee Inc**

Mailing Address 175 South West Temple Suite 650

City State Zip Code  
Salt Lake City UT 84101

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Orrin G. Hatch**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: UT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

**Transaction ID : 9A745CC0EC1773A279E**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. Jim Himes for Congress**

Mailing Address 857 Post Road, #312

City State Zip Code  
Fairfield CT 06824

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**James A. Himes**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

**Transaction ID : C53BE58DE6829ECEC75**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kind for Congress Committee**

Mailing Address 205 5th Avenue South

City State Zip Code  
La Crosse WI 54601

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Ron Kind**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2012

**Transaction ID : 6F41FE07011C4DAC69F**

Amount of Each Disbursement this Period

1000.00
---------

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

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

4000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Latham for Congress**

Mailing Address PO Box 8237

City Des Moines State IA Zip Code 50301

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Thomas Latham**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	2

**Transaction ID : DBCEA7D6B840B765A3B**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

**B. Loeb sack for Congress**

Mailing Address PO Box 3013

City Iowa City State IA Zip Code 52244

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**David Loeb sack**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

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

**Transaction ID : 893A465A79A8D5E0599**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

Full Name (Last, First, Middle Initial)

**C. Moore for Congress**

Mailing Address PO Box 16646

City Milwaukee State WI Zip Code 53216

Purpose of Disbursement  
2012 Primary

011

Category/  
Type

Candidate Name

**Gwendolynne Moore**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WI District: 04

Date of Disbursement

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

**Transaction ID : 774E2970F0985064B46**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

1000.00

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

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

3	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0

3000.00

1	0	0	0	0	0	0	0	0	0
1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. National Republican Congressional Committee**

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**National Republican Congressional Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 30 / 2012

**Transaction ID : 73341DC499129E752CF**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Rush Holt for Congress**

Mailing Address PO Box 782

City Pennington State NJ Zip Code 08534

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Rush Dew Holt Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: NJ District: 12

Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 12 / 2012

**Transaction ID : C84C78C61D85936528A**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

6000.00

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

28500.00