



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Principal Life Insurance Company Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="54878.67"/>	<input type="text" value="54878.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="76591.85"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="18567.75"/>	<input type="text" value="82780.93"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="95159.60"/>	<input type="text" value="137659.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10500.00"/>	<input type="text" value="53000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="84659.60"/>	<input type="text" value="84659.60"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

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).....	8879.33	25517.69
(ii) Unitemized .....	9688.42	57263.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18567.75	82780.93
(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) .....	18567.75	82780.93
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))..... ▶	18567.75	82780.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18567.75	82780.93

**DETAILED SUMMARY PAGE**

of Disbursements

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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.....	11000.00	51500.00
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 .....	-500.00	1500.00
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)) ..	10500.00	53000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10500.00	53000.00

**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) .....	18567.75	82780.93
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18567.75	82780.93
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 61
	<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. Matthew Douglas Annenberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Mng Director, Asset Allocation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1181**  
 Amount of Each Receipt this Period  
 42.30

**B. Matthew Douglas Annenberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Mng Director, Asset Allocation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1182**  
 Amount of Each Receipt this Period  
 42.30

**C. Arthur John Bacci**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6200 Park Ave  
 City Des Moines State IA Zip Code 50321-1270  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Principal Life Ins Co. VP-CEO/President PTC & Bank  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-96**  
 Amount of Each Receipt this Period  
 42.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	126.90
<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 61
	<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. Arthur John Bacci</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-97</b>
Mailing Address 6200 Park Ave		Amount of Each Receipt this Period 42.30
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 ▼ 380.70	

Full Name (Last, First, Middle Initial) <b>B. Michael Jon Beer</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-1216</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 ▼ 315.00	

Full Name (Last, First, Middle Initial) <b>C. Michael Jon Beer</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-1217</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 ▼ 315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 61
	<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. Louise A. Billmeyer**  
 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 - SCBU  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **380.70**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1052**  
 Amount of Each Receipt this Period  
**42.30**

**B. Louise A. Billmeyer**  
 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 - SCBU  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **380.70**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1053**  
 Amount of Each Receipt this Period  
**42.30**

**C. Christopher Joseph Bowman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP-Corp Strategy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-250**  
 Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **134.60**  
**TOTAL** This Period (last page this line number only).....

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

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

FOR LINE NUMBER: PAGE 9 OF 61  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. 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 ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-251**  
 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 ▼ 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-364**  
 Amount of Each Receipt this Period  
 42.30

**C. 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 ▼ 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-365**  
 Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 134.60  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 61
	<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. Paul Alvin Brown**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation VP Retirement & Investor Svcs  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **380.70**

Date of Receipt **04 / 12 / 2013**  
**Transaction ID : 201305075751-1351**  
Amount of Each Receipt this Period **42.30**

**B. Paul Alvin Brown**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal Life Ins Co. Occupation VP Retirement & Investor Svcs  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **380.70**

Date of Receipt **04 / 26 / 2013**  
**Transaction ID : 201305075751-1352**  
Amount of Each Receipt this Period **42.30**

**C. Ned Alan Burmeister**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St  
City Des Moines State IA Zip Code 50392-0001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Principal International, Inc. Occupation SVP & COO - PI  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **900.00**

Date of Receipt **04 / 12 / 2013**  
**Transaction ID : 201305075751-1301**  
Amount of Each Receipt this Period **100.00**

**SUBTOTAL** of Receipts This Page (optional)..... **184.60**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 61
	<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 ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1302**

Amount of Each Receipt this Period  
**100.00**

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 ▼ **259.65**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-1694**

Amount of Each Receipt this Period  
**28.85**

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

Mailing Address 18101 Von Karman Ave Ste 1170

City 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 ▼ **259.65**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1695**

Amount of Each Receipt this Period  
**28.85**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **157.70**

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

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Gregory John Burrows</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2013 <b>Transaction ID : 201305075751-567</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 95.19
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation SVP - Retirement & Invest Svcs		Aggregate Year-to-Date ▼ 856.71
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Gregory John Burrows</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : 201305075751-568</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 95.19
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation SVP - Retirement & Invest Svcs		Aggregate Year-to-Date ▼ 856.71
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Teresa Marie Button</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2013 <b>Transaction ID : 201305075751-1672</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 31.76
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	
Occupation VP & Treasurer		Aggregate Year-to-Date ▼ 285.84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	222.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 13 OF 61  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 285.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1673**

Amount of Each Receipt this Period  
 31.76

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1303**

Amount of Each Receipt this Period  
 42.30

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1304**

Amount of Each Receipt this Period  
 42.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 116.36

**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 14 OF 61
	<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. Barrie Gibb Christman</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-114</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 50.00
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- Chmn Prin Bank & Trust		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B. Barrie Gibb Christman</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-115</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 50.00
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- Chmn Prin Bank & Trust		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Michael John Daugherty</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-1224</b>
Mailing Address 1100 Technology Pkwy			Amount of Each Receipt this Period 35.00
City Cedar Falls	State IA	Zip Code 50613-6955	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP Client Management - FSA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<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 15 OF 61
	<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. Michael John Daugherty**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 Technology Pkwy

City Cedar Falls State IA Zip Code 50613-6955

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **04 / 26 / 2013**

**Transaction ID : 201305075751-1225**

Amount of Each Receipt this Period **45.00**

**B. Douglas Scott Dornacker**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **04 / 26 / 2013**

**Transaction ID : 201305075751-469**

Amount of Each Receipt this Period **25.00**

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

Mailing Address 4141 Parklake Ave Ste 400

City Raleigh State NC Zip Code 27612-2333

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt **04 / 12 / 2013**

**Transaction ID : 201305075751-537**

Amount of Each Receipt this Period **45.00**

**SUBTOTAL** of Receipts This Page (optional)..... **115.00**

**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 16 OF 61
	<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. Gary Lane Dorton</b>		Date of Receipt
Mailing Address 4141 Parklake Ave Ste 400		M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013
City Raleigh	State NC	Zip Code 27612-2333
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 201305075751-538</b>
Name of Employer Principal Life Ins Co.		Amount of Each Receipt this Period
Occupation VP-Employer Solutions & Serv		45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	405.00	

Full Name (Last, First, Middle Initial) <b>B. Alan L. Dukes</b>		Date of Receipt
Mailing Address 8910 Purdue Rd Ste 700		M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013
City Indianapolis	State IN	Zip Code 46268-6136
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 201305075751-9</b>
Name of Employer Principal Wellness Company		Amount of Each Receipt this Period
Occupation AVP-Wellness		35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	315.00	

Full Name (Last, First, Middle Initial) <b>C. Alan L. Dukes</b>		Date of Receipt
Mailing Address 8910 Purdue Rd Ste 700		M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013
City Indianapolis	State IN	Zip Code 46268-6136
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 201305075751-10</b>
Name of Employer Principal Wellness Company		Amount of Each Receipt this Period
Occupation AVP-Wellness		35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	315.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	115.00
<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 17 OF 61
	<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. Timothy Mark Dunbar**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **571.14**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-1708**

Amount of Each Receipt this Period  
**63.46**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **571.14**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1709**

Amount of Each Receipt this Period  
**63.46**

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

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 ▼ **285.66**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-761**

Amount of Each Receipt this Period  
**31.74**

**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 18 OF 61
	<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. John Michael Egan**

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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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 ▼ **285.66**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-762**

Amount of Each Receipt this Period  

31.74
-------

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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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 ▼ **856.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-569**

Amount of Each Receipt this Period  

95.19
-------

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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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 ▼ **856.71**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-570**

Amount of Each Receipt this Period  

95.19
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	222.12
<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 19 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Ralph Craig Eucher</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-1405</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		
Name of Employer Principal Life Ins Co.	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1710.00	

Full Name (Last, First, Middle Initial) <b>B. Ralph Craig Eucher</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-1406</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		
Name of Employer Principal Life Ins Co.	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1710.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin Patrick Farley</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-914</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 45.00
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C		
Name of Employer Principal Life Ins Co.	Occupation Chief Financial Officer- RIS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	425.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 20 OF 61  
(check only one)

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

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
495.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-470**

Amount of Each Receipt this Period  
55.00

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
495.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-471**

Amount of Each Receipt this Period  
55.00

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

Mailing Address 711 High St

City Des Moines	State IA	Zip Code 50392-0001
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
306.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-1228**

Amount of Each Receipt this Period  
32.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	142.00
<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 21 OF 61
	<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 MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : 201305075751-1229</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 50.00
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 & Chief Invest Officer- PMC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00	

Full Name (Last, First, Middle Initial) <b>B. Louis E. Flori</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2013 <b>Transaction ID : 201305075751-1050</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	Occupation VP - Capital Markets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70	

Full Name (Last, First, Middle Initial) <b>C. Louis E. Flori</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : 201305075751-1051</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee. C	Name of Employer Principal Life Ins Co.	Occupation VP - Capital Markets
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	134.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 61
	<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. Amy Christine Friedrich</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-32</b>
Des Moines	IA	50392-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="42.30"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP-Specialty Benefits Division		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="202.30"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gina Lynnette Graham</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-555</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 International, Inc.	VP & CFO - Principal Intl		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="288.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Gina Lynnette Graham</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-556</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 International, Inc.	VP & CFO - Principal Intl		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="288.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="106.30"/>
<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 23 OF 61
	<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. Victoria Whitaker Gray</b>		Date of Receipt
Mailing Address 51 Germantown Ct Principal Financial Group, Ste 101		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Cordova	State TN	Zip Code 38018-4278
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 201305075751-1743</b>
Name of Employer Principal Life Ins Co.		Amount of Each Receipt this Period
Occupation Sr Account Exec-Retirement Svc		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="675.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Victoria Whitaker Gray</b>		Date of Receipt
Mailing Address 51 Germantown Ct Principal Financial Group, Ste 101		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City Cordova	State TN	Zip Code 38018-4278
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 201305075751-1744</b>
Name of Employer Principal Life Ins Co.		Amount of Each Receipt this Period
Occupation Sr Account Exec-Retirement Svc		<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="675.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Douglas E. Grove</b>		Date of Receipt
Mailing Address 3025 Highland Pkwy Ste 425		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Downers Grove	State IL	Zip Code 60515-5660
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 201305075751-472</b>
Name of Employer Principal Life Ins Co.		Amount of Each Receipt this Period
Occupation VP - Nat'l Sales Dir Ret Svc		<input type="text" value="50.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="450.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
<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 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3025 Highland Pkwy  
Ste 425

City Downers Grove State IL Zip Code 60515-5660

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
04 / 26 / 2013  
**Transaction ID : 201305075751-473**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.70

Date of Receipt  
04 / 12 / 2013  
**Transaction ID : 201305075751-1341**

Amount of Each Receipt this Period  
42.30

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.70

Date of Receipt  
04 / 26 / 2013  
**Transaction ID : 201305075751-1342**

Amount of Each Receipt this Period  
42.30

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 61
	<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. Mark A. Hanrahan**

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
**04 / 12 / 2013**  
**Transaction ID : 201305075751-1093**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
**04 / 26 / 2013**  
**Transaction ID : 201305075751-1094**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
**04 / 26 / 2013**  
**Transaction ID : 201305075751-1197**

Amount of Each Receipt this Period  
**25.00**

**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 26 OF 61
	<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. Elizabeth Bandoli Happe</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-506</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 31.76
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP & Chief Compliance Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.84		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Bandoli Happe</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-507</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 31.76
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP & Chief Compliance Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.84		

Full Name (Last, First, Middle Initial) <b>C. Christopher J. Henderson</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-256</b>
Mailing Address 711 High St			Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001	
FEC ID number of contributing federal political committee. C			
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.82
<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 61
<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. Christopher J. Henderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-257</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 42.30
City Des Moines	State IA	Zip Code 50392-0001
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70	

Full Name (Last, First, Middle Initial) <b>B. Timothy Allen Hill</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-1711</b>
Mailing Address 3727 S Hills Way		Amount of Each Receipt this Period 42.30
City Eagan	State MN	Zip Code 55123-1215
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation VP-Nat'l Sales Dir, Prin Funds	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.30	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey Hiller</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-677</b>
Mailing Address 180 S Main St		Amount of Each Receipt this Period 32.00
City Yardley	State PA	Zip Code 19067-1642
FEC ID number of contributing federal political committee.	C	
Name of Employer Principal Life Ins Co.	Occupation Chief Compliance Officer-PGI	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 61
	<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. Jeffrey Hiller**  
Full Name (Last, First, Middle Initial)

Mailing Address 180 S Main St

City Yardley State PA Zip Code 19067-1642

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-678**

Amount of Each Receipt this Period  
 32.00

**B. Jill Marie Hittner**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-731**

Amount of Each Receipt this Period  
 31.74

**C. Jill Marie Hittner**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-732**

Amount of Each Receipt this Period  
 31.74

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 95.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
	<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 ▼ 571.14

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 12 / 2013  
**Transaction ID : 201305075751-817**  
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 ▼ 571.14

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 26 / 2013  
**Transaction ID : 201305075751-818**  
Amount of Each Receipt this Period  
63.46

**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 ▼ 1730.70

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 12 / 2013  
**Transaction ID : 201305075751-328**  
Amount of Each Receipt this Period  
192.30

**SUBTOTAL** of Receipts This Page (optional).....▶ 319.22  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Daniel Joseph Houston**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation President - Ret, Ins & Fin Svc  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1730.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-329**  
 Amount of Each Receipt this Period  
 192.30

**B. Clifford P. Karthaus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19407 Camden Ave  
 City Elkhorn State NE Zip Code 68022-1124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Regional Managing Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2013  
**Transaction ID : 071752A613C34BF4AFC8**  
 Amount of Each Receipt this Period  
 55.00

**C. Monica Jean Kirgan**  
 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-National Service Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1278**  
 Amount of Each Receipt this Period  
 42.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	289.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 61
	<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. Monica Jean Kirgan**  
 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-National Service Director  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **380.70**

Date of Receipt **04 / 26 / 2013**  
**Transaction ID : 201305075751-1279**  
 Amount of Each Receipt this Period **42.30**

**B. Mark Seth Lagomarcino**  
 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 & Assoc Gen Counsel-Litig.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.84**

Date of Receipt **04 / 12 / 2013**  
**Transaction ID : 201305075751-1101**  
 Amount of Each Receipt this Period **31.76**

**c. Mark Seth Lagomarcino**  
 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 & Assoc Gen Counsel-Litig.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **285.84**

Date of Receipt **04 / 26 / 2013**  
**Transaction ID : 201305075751-1102**  
 Amount of Each Receipt this Period **31.76**

**SUBTOTAL** of Receipts This Page (optional)..... **105.82**  
**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 61
	<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. Julia M. Lawler-Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP - Investment Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **602.87**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-825**

Amount of Each Receipt this Period  
**63.46**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

Name of Employer Principal Life Ins Co. Occupation SVP - Investment Services

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **602.87**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-826**

Amount of Each Receipt this Period  
**95.19**

**C. 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 ▼ **380.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-1457**

Amount of Each Receipt this Period  
**42.30**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **200.95**

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

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

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

FOR LINE NUMBER: PAGE 33 OF 61  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

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 ▼  
 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1458**

Amount of Each Receipt this Period  
 42.30

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

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 ▼  
 1730.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1680**

Amount of Each Receipt this Period  
 192.30

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

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 ▼  
 1730.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1681**

Amount of Each Receipt this Period  
 192.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 426.90

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-573**

Amount of Each Receipt this Period  
**42.30**

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-574**

Amount of Each Receipt this Period  
**42.30**

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

Mailing Address 4010 W Boy Scout Blvd  
Principal Financial Group

City Tampa State FL Zip Code 33607-5795

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-575**

Amount of Each Receipt this Period  
**50.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Gregory David Mazzei**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4010 W Boy Scout Blvd  
 Principal Financial Group  
 City Tampa State FL Zip Code 33607-5795  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Disability Income RVP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**  
**Transaction ID : 201305075751-576**  
 Amount of Each Receipt this Period  
**50.00**

**B. James P. McCaughan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation President Global Asset Mgmt  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1730.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**  
**Transaction ID : 201305075751-618**  
 Amount of Each Receipt this Period  
**192.30**

**C. James P. McCaughan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 888 7th Ave  
 FI 25  
 City New York State NY Zip Code 10106-2599  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation President Global Asset Mgmt  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1730.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**  
**Transaction ID : 201305075751-619**  
 Amount of Each Receipt this Period  
**192.30**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 61
	<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. Edward L. McDermott, Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 28411 Northwestern Hwy  
 Principal Financial Group, Ste 700  
 City Southfield State MI Zip Code 48034-5526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP of Sales - Retirement Svcs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-497**  
 Amount of Each Receipt this Period  
 25.00

**B. 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 ▼ 856.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-112**  
 Amount of Each Receipt this Period  
 95.19

**C. 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 ▼ 856.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-113**  
 Amount of Each Receipt this Period  
 95.19

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	215.38
<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 37 OF 61
	<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. 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 ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1586**

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 ▼ 288.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1587**

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 ▼ 380.70

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-37**

Amount of Each Receipt this Period  
 42.30

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	106.30
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 61
	<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. 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 ▼ **380.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-38**

Amount of Each Receipt this Period  
**42.30**

**B. Timothy Jon Minard**  
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 - Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **620.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-1712**

Amount of Each Receipt this Period  
**65.00**

**C. Timothy Jon Minard**  
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 - Distribution

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **620.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1713**

Amount of Each Receipt this Period  
**100.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>207.30</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 39 OF 61
	<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. Jacquie Sue Mohs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-595**

Amount of Each Receipt this Period  

42.30
-------

**B. Jacquie Sue Mohs**  
Full Name (Last, First, Middle Initial)  
Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-596**

Amount of Each Receipt this Period  

42.30
-------

**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 ▼ **398.07**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-1161**

Amount of Each Receipt this Period  

44.23
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>128.83</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 61  
(check only one)

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

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

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

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 ▼ **398.07**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1162**

Amount of Each Receipt this Period  
**44.23**

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

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 ▼ **285.84**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-549**

Amount of Each Receipt this Period  
**31.76**

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

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 ▼ **285.84**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-550**

Amount of Each Receipt this Period  
**31.76**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **107.75**

**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 61
	<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. Christopher David Payne</b>		Date of Receipt
Mailing Address 1350 I St NW Ste 880		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 201305075751-260</b>
Name of Employer Principal Life Ins Co.	Occupation VP - Federal Govt Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="42.30"/>
	<input type="text" value="380.70"/>	

Full Name (Last, First, Middle Initial) <b>B. Christopher David Payne</b>		Date of Receipt
Mailing Address 1350 I St NW Ste 880		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City Washington	State DC	Zip Code 20005-7207
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 201305075751-261</b>
Name of Employer Principal Life Ins Co.	Occupation VP - Federal Govt Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="42.30"/>
	<input type="text" value="380.70"/>	

Full Name (Last, First, Middle Initial) <b>C. Karen Arlene Pearston</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
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 : 201305075751-870</b>
Name of Employer Principal Life Ins Co.	Occupation VP & Associate General Counsel	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="25.00"/>
	<input type="text" value="225.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="109.60"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 42 OF 61  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 298.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1212**

Amount of Each Receipt this Period  
 32.00

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

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 298.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1213**

Amount of Each Receipt this Period  
 42.30

Full Name (Last, First, Middle Initial)  
**C. Elizabeth L. Raymond**

Mailing Address 711 High St

City State Zip Code  
 Des Moines IA 50392-0001

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 285.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-510**

Amount of Each Receipt this Period  
 31.76

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 106.06

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial)  
**A. Elizabeth L. Raymond**

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-Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.84**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-511**

Amount of Each Receipt this Period  
**31.76**

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

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 President & COO-PGIE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.20**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-262**

Amount of Each Receipt this Period  
**26.52**

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

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 President & COO-PGIE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.20**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-263**

Amount of Each Receipt this Period  
**26.52**

**SUBTOTAL** of Receipts This Page (optional)..... **84.80**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 61
	<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. 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 ▼ 288.00

Date of Receipt  
04 / 12 / 2013  
**Transaction ID : 201305075751-1246**

Amount of Each Receipt this Period  
32.00

**B. 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 ▼ 288.00

Date of Receipt  
04 / 26 / 2013  
**Transaction ID : 201305075751-1247**

Amount of Each Receipt this Period  
32.00

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

Mailing Address 711 High St

City Des Moines State IA Zip Code 50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt  
04 / 12 / 2013  
**Transaction ID : 201305075751-70**

Amount of Each Receipt this Period  
35.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 99.00

**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 45 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. Angela Rae Sanders</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-71</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 SVP & Controller		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00		

Full Name (Last, First, Middle Initial) <b>B. Renee Vachelle Schaaf</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 12 / 2013 <b>Transaction ID : 201305075751-1435</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. C			
Name of Employer Principal International, Inc.	Occupation VP - Strat. Plan & Bus Dvlpmnt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00		

Full Name (Last, First, Middle Initial) <b>C. Renee Vachelle Schaaf</b>			Date of Receipt M M / D D / Y Y Y Y Y 04 / 26 / 2013 <b>Transaction ID : 201305075751-1436</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. C			
Name of Employer Principal International, Inc.	Occupation VP - Strat. Plan & Bus Dvlpmnt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	99.00
<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 46 OF 61
	<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 ▼  
1523.07

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-541**

Amount of Each Receipt this Period  
169.23

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

Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1523.07

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-542**

Amount of Each Receipt this Period  
169.23

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

Mailing Address 201 Jones Rd  
Principal Financial Grp

City Waltham	State MA	Zip Code 02451-1600
-----------------	-------------	------------------------

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

Name of Employer Principal Life Ins Co.	Occupation VP of Bus Development-Tpa
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-686**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	363.46
<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 47 OF 61
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. 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 ▼  
990.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-871**

Amount of Each Receipt this Period  
110.00

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

Mailing Address 711 High St

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
990.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-872**

Amount of Each Receipt this Period  
110.00

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

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 ▼  
380.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-982**

Amount of Each Receipt this Period  
42.30

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

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

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

FOR LINE NUMBER: PAGE 48 OF 61  
(check only one)

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

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

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

Mailing Address 111 W State St

City	State	Zip Code
Mason City	IA	50401-3131

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-983**

Amount of Each Receipt this Period  

42.30
-------

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

Mailing Address 711 High St

City	State	Zip Code
Des Moines	IA	50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2013

**Transaction ID : 201305075751-512**

Amount of Each Receipt this Period  

32.00
-------

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

Mailing Address 711 High St

City	State	Zip Code
Des Moines	IA	50392-0001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **288.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2013

**Transaction ID : 201305075751-513**

Amount of Each Receipt this Period  

32.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>106.30</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 49 OF 61
	<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. Mark Gerard Siegman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Riveredge Pkwy NW  
 Ste 900  
 City Atlanta State GA Zip Code 30328-4618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Reg VP - Nonqualified Plans  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1114**  
 Amount of Each Receipt this Period  
 25.00

**B. Tom Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Riveredge Pkwy NW  
 Ste 1000  
 City Atlanta State GA Zip Code 30328-4657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation Regional VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 259.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-1724**  
 Amount of Each Receipt this Period  
 28.85

**C. 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 ▼ 259.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1725**  
 Amount of Each Receipt this Period  
 28.85

<b>SUBTOTAL</b> of Receipts This Page (optional).....	82.70
<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 50 OF 61
	<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. Dwight N. Soethout**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Financial Risk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-492**  
 Amount of Each Receipt this Period  
 42.30

**B. Dwight N. Soethout**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation VP Financial Risk Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.70

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-493**  
 Amount of Each Receipt this Period  
 42.30

**C. Deanna Dawnette Strable-Soethout**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 711 High St  
 City Des Moines State IA Zip Code 50392-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Principal Life Ins Co. Occupation SVP - U.S. Insurance Solutions  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 864.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-384**  
 Amount of Each Receipt this Period  
 96.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 180.60  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 61
	<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="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 201305075751-385</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Principal Life Ins Co.	SVP - U.S. Insurance Solutions	<input type="text" value="96.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="864.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Karen S. Thomann</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 201305075751-873</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Principal Life Ins Co.	VP & CIO-Retire Investor Svcs	<input type="text" value="42.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.70"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Karen S. Thomann</b>		Date of Receipt
Mailing Address 711 High St		<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 201305075751-874</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Principal Life Ins Co.	VP & CIO-Retire Investor Svcs	<input type="text" value="42.30"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.70"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="180.60"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 61
	<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. 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 **405.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2013  
**Transaction ID : 201305075751-799**  
 Amount of Each Receipt this Period  
**45.00**

**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 **405.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-800**  
 Amount of Each Receipt this Period  
**45.00**

**C. Terrence Michael Tobin**  
 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 Director-Prin Enterprise Cap  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2013  
**Transaction ID : 201305075751-1683**  
 Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... **115.00**  
**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 53 OF 61
	<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. Leanne M. Valentine</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-996</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 & Associate General Counsel		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="285.66"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Leanne M. Valentine</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-997</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 & Associate General Counsel		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="285.66"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Luke Joseph Vandermillen</b>			Date of Receipt
Mailing Address 711 High St			<input type="text" value="04"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
City	State	Zip Code	<b>Transaction ID : 201305075751-1058</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="35.00"/>
Name of Employer	Occupation		
Principal Life Ins Co.	VP RIS Marketing		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="98.48"/>
<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 54 OF 61
	<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		M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	Transaction ID : <b>201305075751-1059</b>	
	Amount of Each Receipt this Period	
	50.00	
Name of Employer	Occupation	
Principal Life Ins Co.	VP RIS Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		330.00

Full Name (Last, First, Middle Initial) <b>B. Steven C. Whitty</b>		Date of Receipt
Mailing Address 711 High St		M M M / D D D / Y Y Y Y Y Y 04 / 12 / 2013
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	Transaction ID : <b>201305075751-1634</b>	
	Amount of Each Receipt this Period	
	42.30	
Name of Employer	Occupation	
Principal Life Ins Co.	VP Corporate Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		380.70

Full Name (Last, First, Middle Initial) <b>C. Steven C. Whitty</b>		Date of Receipt
Mailing Address 711 High St		M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2013
City	State	Zip Code
Des Moines	IA	50392-0001
FEC ID number of contributing federal political committee.	Transaction ID : <b>201305075751-1635</b>	
	Amount of Each Receipt this Period	
	42.30	
Name of Employer	Occupation	
Principal Life Ins Co.	VP Corporate Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		380.70

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	134.60
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 61
	<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 Harrison Wireman II**  
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 Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-1463**

Amount of Each Receipt this Period  
**45.00**

**B. Richard Harrison Wireman II**  
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 Tax

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **405.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 26 / 2013**

**Transaction ID : 201305075751-1464**

Amount of Each Receipt this Period  
**45.00**

**C. Douglas E. Younkin**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 676304  
6946 Circo Diegueno Court

City Rancho Santa Fe State CA Zip Code 92067-6304

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

Name of Employer Principal Life Ins Co. Occupation Mng Dir-3rd Party Distribut

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.70**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 12 / 2013**

**Transaction ID : 201305075751-486**

Amount of Each Receipt this Period  
**42.30**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>132.30</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 56 OF 61
	<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. Douglas E. Younkin</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : 201305075751-487</b>
Mailing Address PO Box 676304 6946 Circo Diegueno Court		Amount of Each Receipt this Period 42.30
City Rancho Santa Fe State CA Zip Code 92067-6304	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation Mng Dir-3rd Party Distribut	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.70

Full Name (Last, First, Middle Initial) <b>B. Larry Donald Zimpleman</b>		Date of Receipt MM / DD / YYYY 04 / 12 / 2013 <b>Transaction ID : 201305075751-972</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 192.30
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.70

Full Name (Last, First, Middle Initial) <b>C. Larry Donald Zimpleman</b>		Date of Receipt MM / DD / YYYY 04 / 26 / 2013 <b>Transaction ID : 201305075751-973</b>
Mailing Address 711 High St		Amount of Each Receipt this Period 192.30
City Des Moines State IA Zip Code 50392-0001	FEC ID number of contributing federal political committee. C	
Name of Employer Principal Life Ins Co. Occupation Chairman, President & CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.70

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.90
<b>TOTAL</b> This Period (last page this line number only).....▶	8879.33

**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. Enzi for Us Senate**

Mailing Address PO Box 2775

City State Zip Code  
Cody WY 82414

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Michael B. Enzi**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WY District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2013

**Transaction ID : AC65A5D1A46BFCF5274**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Jeb Hensarling**

Mailing Address PO Box 820504

City State Zip Code  
Dallas TX 75382-0504

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Thomas Jeb Hensarling**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2013

**Transaction ID : FE712352B498D56332D**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Hoyer for Congress**

Mailing Address 700 13th Street, NW  
Suite 600

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
2014 General

011

Candidate Name

**Steny H. Hoyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2013

**Transaction ID : 8055BE6E0935881095C**

Amount of Each Disbursement this Period

2000.00

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

4000.00

**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. Jim Gerlach for Congress Committee**

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480-0087

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**James W. Gerlach**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	3

**Transaction ID : 243F394A499036C001E**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Kline for Congress**

Mailing Address 350 W Burnsville Pkwy  
Ste 625

City Burnsville State MN Zip Code 55337

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**John Kline**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	3

**Transaction ID : 8D206005FBFC154317D**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Larson for Congress**

Mailing Address PO Box 479

City Glastonbury State CT Zip Code 06033-0479

Purpose of Disbursement  
2014 Primary

011

Category/  
Type

Candidate Name

**John B. Larson**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CT District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	1	3

**Transaction ID : F673BE56E9DB724F6AB**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

**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

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. Montanans for Tester**

Mailing Address PO Box 1135

City Helena State MT Zip Code 59624

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Jon Tester**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MT District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 09 / 2013

**Transaction ID : 0E81CD3AD79CED5AC6E**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. National Assn. of Dental Plans Political Action Committee (NADPAC)**

Mailing Address 12700 Park Central Drive  
Suite 400

City Dallas State TX Zip Code 75251

Purpose of Disbursement  
Uncashed 12/28/12 Contribution. Re-issued check #2764.

011

Candidate Name

National Assn. of Dental Plans Political Action Committee (NADPAC)

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2013

**Transaction ID : 1948FCF668CA5A7EE09**

Amount of Each Disbursement this Period

-2000.00

Full Name (Last, First, Middle Initial)

**C. National Assn. of Dental Plans Political Action Committee (NADPAC)**

Mailing Address 12700 Park Central Drive  
Suite 400

City Dallas State TX Zip Code 75251

Purpose of Disbursement  
Calendar Year 2012 Contribution (replacement check)

011

Candidate Name

National Assn. of Dental Plans Political Action Committee (NADPAC)

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 25 / 2013

**Transaction ID : F1944BCC220BD080DEA**

Amount of Each Disbursement this Period

2000.00

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

1000.00

**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. Neugebauer Congressional Committee**

Mailing Address PO Box 54175

City Lubbock State TX Zip Code 79453-4175

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Robert Randolph Neugebauer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2013

**Transaction ID : 628C355A81E4EFC40F1**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Peters for Michigan**

Mailing Address PO Box 226

City Bloomfield Hills State MI Zip Code 48303

Purpose of Disbursement  
2014 Primary

011

Candidate Name

**Gary C. Peters**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District:

Date of Disbursement

MM / DD / YYYY  
04 / 25 / 2013

**Transaction ID : 29E93DDEC5BCE8411C1**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Portman for Senate Committee**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017-8914

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Rob Portman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY  
04 / 09 / 2013

**Transaction ID : 685B302DA986C553BCB**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

11000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

### A. Nick Wagner for State House

Mailing Address 2785 Lansing Court

City Marion State IA Zip Code 52302

Purpose of Disbursement  
Uncashed 11/01/12 Contribution.

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	3

Transaction ID : B8EDBAB925EB74752D8

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

-	5	0	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

-	5	0	0	.	0	0
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