

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

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

FOR LINE NUMBER: PAGE 41 OF 96

(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 of Individual (Last, First, Middle Initial) or Full Organization Name

A. Hubbard, Michael, Scott, ,

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 (for Individual)
Principal Life Ins Co.

Occupation (for Individual)
Asst. Director-Fund Svcs & Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2019

Transaction ID : 202001075134-981

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hubbard, Michael, Scott, ,

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 (for Individual)
Principal Life Ins Co.

Occupation (for Individual)
Asst. Director-Fund Svcs & Ops

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 27 / 2019

Transaction ID : 202001075134-982

Amount of Each Receipt this Period

11.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hurst, Charles, A, ,

Mailing Address 5600 Blazer Pkwy
Ste 300

City
Dublin

State
OH

Zip Code
43017-7551

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Life Ins Co.

Occupation (for Individual)
Director - Retirement Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2019

Transaction ID : 202001075134-180

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

38.08

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