

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

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

FOR LINE NUMBER: PAGE 12 OF 54

(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. Couture, Jon, , ,

Mailing Address 711 High St

City  
Des MoinesState  
IAZip Code  
50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Principal Life Ins Co.Occupation (for Individual)  
SVP & Chief HR Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : 20200505934-603

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

B. Couture, Jon, , ,

Mailing Address 711 High St

City  
Des MoinesState  
IAZip Code  
50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Principal Life Ins Co.Occupation (for Individual)  
SVP & Chief HR Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1538.40

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 17 / 2020

Transaction ID : 20200505934-604

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

C. Dornacker, Douglas, Scott, ,

Mailing Address 711 High St

City  
Des MoinesState  
IAZip Code  
50392-0001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Principal Life Ins Co.Occupation (for Individual)  
VP-IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

640.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 03 / 2020

Transaction ID : 20200505934-339

Amount of Each Receipt this Period

80.00

☐ Memo Item

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

464.60

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