

**SCHEDULE B****ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page**14 / 14**FOR LINE NUMBER  
**23**

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

| <b>Full Name, Mailing Address, and ZIP Code</b>   | <b>Purpose of Disbursement</b>   | <b>Date (month, day, year)</b>        | <b>Amount of Each Disbursement This Period</b>     |
|---|--|---------------------------------------|--|
| Health Insurance Association<br>of America - HIPAC<br><br>Health Ins Political Action Comm<br>555 13th St, NW Suite 600<br>Washington DC 20004-1109 | Pac to Pac Contribution /<br><br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                                      | 07/14/2000                            | 2000.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Kenny Hulshof<br><br>Hulshof for Congress<br>PO Box 1821<br>Columbia MO 65205                    | Purpose of Disbursement<br>Contribution /<br><br>(House - MO - 5)<br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :  | Date (month, day, year)<br>07/14/2000 | Amount of Each Disbursement This Period<br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>John LaFalce<br><br>Friends of John LaFalce<br>38 Ivy Street SE<br>Washington DC 20003           | Purpose of Disbursement<br>Contribution /<br><br>(House - NY - 29)<br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) : | Date (month, day, year)<br>07/14/2000 | Amount of Each Disbursement This Period<br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Dennis Moore<br><br>Moore for Congress<br>PO Box 14831<br>Shawnee Mission KS 66285               | Purpose of Disbursement<br>Contribution /<br><br>(House - KS - 3)<br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :  | Date (month, day, year)<br>07/14/2000 | Amount of Each Disbursement This Period<br>500.00  |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Jim Nussle<br><br>Nussle for Congress Committee<br>PO Box 324<br>Manchester IA 52057             | Purpose of Disbursement<br>Contribution /<br><br>(House - IA - 2)<br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :  | Date (month, day, year)<br>07/14/2000 | Amount of Each Disbursement This Period<br>1000.00 |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>Jack Reed<br><br>The Reed Committee<br>PO Box 6628<br>Cranston RI 02920                          | Purpose of Disbursement<br>Contribution /<br><br>(Senate - RI - )<br>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :  | Date (month, day, year)<br>07/14/2000 | Amount of Each Disbursement This Period<br>1000.00 |

**SUBTOTALS** of Disbursements This Page (Optional) .....**TOTALS** This Period (last page this line number only) .....**6500.00**