

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

ADDRESS (number and street)

711 High Street

Check if different
than previously
reported. (ACC)

Government Relations

Des Moines

IA

50392-0002

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00698043

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

05

01

2026

05

31

2026

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

James, Sarah, S., Ms.,

Signature of Treasurer

James, Sarah, S., Ms.,

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

11

2026

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)Report Covering the Period: From:

M M	/	D D	/	Y Y Y Y Y
05		01		2026

 To:

M M	/	D D	/	Y Y Y Y Y
05		31		2026

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2026		69051.01
(b) Cash on Hand at Beginning of Reporting Period.....	85674.15	
(c) Total Receipts (from Line 19)	3603.39	20226.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	89277.54	89277.54
7. Total Disbursements (from Line 31)	500.00	500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	88777.54	88777.54
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	2	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	2	6

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).....	3603.39	20226.53
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3603.39	20226.53
(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)	3603.39	20226.53
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))	3603.39	20226.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3603.39	20226.53

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	500.00	500.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	500.00	500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	500.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	3603.39	20226.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3603.39	20226.53
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 RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Alejandro, Lauren, K., ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Assoc Director of GovRelations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-337**

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Alejandro, Lauren, K., ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Assoc Director of GovRelations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-336**

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Andrews, Kristin, M., ,

Mailing Address 355 Woodbine Rd

City
Mason CityState
IAZip Code
50401-2570FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-68**

Amount of Each Receipt this Period

1.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.12

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Andrews, Kristin, M, ,

Mailing Address 355 Woodbine Rd

City
Mason CityState
IAZip Code
50401-2570FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-67**

Amount of Each Receipt this Period

1.50

☐ Memo Item

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

B. Arnett, Marla, M, ,

Mailing Address 2245 Greenway Dr

City
AuroraState
NEZip Code
68818-1347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-74**

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

C. Arnett, Marla, M, ,

Mailing Address 2245 Greenway Dr

City
AuroraState
NEZip Code
68818-1347FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-73**

Amount of Each Receipt this Period

2.88

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.26

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Auderer, Tammy, L.,

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 Workforce, LLC.Occupation (for Individual)
Director of Operations - Business Owne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	08	2026

Transaction ID : 202605066363-97

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Auderer, Tammy, L.,

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 Workforce, LLC.Occupation (for Individual)
Director of Operations - Business Owne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	22	2026

Transaction ID : 202605206392-95

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

C. Baldner, Jodi, Lynn, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Marketing Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	08	2026

Transaction ID : 202605066363-104

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

11.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Baldner, Jodi, Lynn, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Marketing Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-102**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Bates, Sara, J, ,

Mailing Address W5857 Blue Bonnet Dr

City
AppletonState
WIZip Code
54915-5660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-201**

Amount of Each Receipt this Period

2.31

☐ Memo Item

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

C. Bates, Sara, J, ,

Mailing Address W5857 Blue Bonnet Dr

City
AppletonState
WIZip Code
54915-5660FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-199**

Amount of Each Receipt this Period

2.31

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.62

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

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

FOR LINE NUMBER: PAGE 10 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Benda, Jason, Robert, ,

Mailing Address 1833 Red Fern Ln

City
Madison

State
WI

Zip Code
53718-9139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AD - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-336

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

B. Benda, Jason, Robert, ,

Mailing Address 1833 Red Fern Ln

City
Madison

State
WI

Zip Code
53718-9139

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AD - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-335

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Bender, Lisa, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-106

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

33.08

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

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

FOR LINE NUMBER: PAGE 11 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Bender, Lisa, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-104

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Besh, Cathy, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategic Projects Assistant Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

77.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-2

Amount of Each Receipt this Period

7.00

☐ Memo Item

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

C. Besh, Cathy, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategic Projects Assistant Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

77.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-2

Amount of Each Receipt this Period

7.00

☐ Memo Item

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

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

24.00

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 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Bisenius, Phillip, G, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-137

Amount of Each Receipt this Period

3.85

☐ Memo Item

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

B. Bisenius, Phillip, G, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-135

Amount of Each Receipt this Period

3.85

☐ Memo Item

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

C. Bolden, Jennifer, L, ,

Mailing Address 616 S Jackson Ave

City
Eagle Grove

State
IA

Zip Code
50533-2531

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Benefit Admin Analyst Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-221

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

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

12.51

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Bolden, Jennifer, L, ,

Mailing Address 616 S Jackson Ave

City
Eagle GroveState
IAZip Code
50533-2531FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Benefit Admin Analyst Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-219

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Bray, Lisa, A, ,

Mailing Address 3318 Indian Point Dr

City
EllstonState
IAZip Code
50074-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-21

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Bray, Lisa, A, ,

Mailing Address 3318 Indian Point Dr

City
EllstonState
IAZip Code
50074-4428FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-21

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

6.81

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

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

FOR LINE NUMBER: PAGE 14 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Brayton, Michael, E, ,

Mailing Address 2506 Gustin St

City
HoldregeState
NEZip Code
68949-1053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Manager-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-134

Amount of Each Receipt this Period

1.50

☐ Memo Item

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

B. Brayton, Michael, E, ,

Mailing Address 2506 Gustin St

City
HoldregeState
NEZip Code
68949-1053FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Manager-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-132

Amount of Each Receipt this Period

1.50

☐ Memo Item

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

C. Brovick, Donald, Steven, ,

Mailing Address 13651 Ryan Dr

City
CazenoviaState
WIZip Code
53924-7043FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-292

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

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

7.00

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

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

FOR LINE NUMBER: PAGE 15 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Brovick, Donald, Steven, ,

Mailing Address 13651 Ryan Dr

City
Cazenovia

State
WI

Zip Code
53924-7043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
LM Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-291

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

B. Buhrow, Andrew, Thomas, ,

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 Workforce, LLC.

Occupation (for Individual)
VP-IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-156

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Buhrow, Andrew, Thomas, ,

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 Workforce, LLC.

Occupation (for Individual)
VP-IT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-154

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

27.08

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Burkhead, Mark, Allen, ,

Mailing Address 1234 Summer St

City
GrinnellState
IAZip Code
50112-1546FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-283**

Amount of Each Receipt this Period

29.00

☐ Memo Item

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

B. Burkhead, Mark, Allen, ,

Mailing Address 1234 Summer St

City
GrinnellState
IAZip Code
50112-1546FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-282**

Amount of Each Receipt this Period

29.00

☐ Memo Item

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

C. Butler, Kevin, M, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-131**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Butler, Kevin, M, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-129**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Cahalan, Patrick, Alan, ,

Mailing Address 640 Hurt Loop

City
Mc EwenState
TNZip Code
37101-5265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director-Sales Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-45**

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Cahalan, Patrick, Alan, ,

Mailing Address 640 Hurt Loop

City
Mc EwenState
TNZip Code
37101-5265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director-Sales Compensation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-45**

Amount of Each Receipt this Period

4.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Callaway, Shannan, M, ,

Mailing Address 1866 Wallace Ave

City
MarshalltownState
IAZip Code
50158-9038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Program Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-151**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Callaway, Shannan, M, ,

Mailing Address 1866 Wallace Ave

City
MarshalltownState
IAZip Code
50158-9038FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Program Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-149**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Canady, Steven, P, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Corporate Strategy and Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-246**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

30.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Canady, Steven, P, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Corporate Strategy and Developr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-245

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Champion-Rinken, Jen, A, ,

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 Workforce, LLC.Occupation (for Individual)
Director of Customer Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-217

Amount of Each Receipt this Period

5.76

☐ Memo Item

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

C. Champion-Rinken, Jen, A, ,

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 Workforce, LLC.Occupation (for Individual)
Director of Customer Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

63.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-215

Amount of Each Receipt this Period

5.76

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

40.37

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Chilton Ferguson, Kellee, A, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-105**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Chilton Ferguson, Kellee, A, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-103**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Christ, Jason, N, ,

Mailing Address 5427 Applewood Ln

City
Cedar FallsState
IAZip Code
50613-9138FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Retirement Ops Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-174**

Amount of Each Receipt this Period

4.81

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

44.81

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Christ, Jason, N, ,			Date of Receipt MM / DD / YYYY 05 / 22 / 2026 Transaction ID : 202605206392-172	
Mailing Address 5427 Applewood Ln			Amount of Each Receipt this Period 4.81	
City Cedar Falls	State IA	Zip Code 50613-9138	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Sr Retirement Ops Consultant		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 52.91		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Christensen, Eric, Andrew, ,			Date of Receipt MM / DD / YYYY 05 / 08 / 2026 Transaction ID : 202605066363-71	
Mailing Address 711 High St			Amount of Each Receipt this Period 5.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Actuary		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 55.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Christensen, Eric, Andrew, ,			Date of Receipt MM / DD / YYYY 05 / 22 / 2026 Transaction ID : 202605206392-70	
Mailing Address 711 High St			Amount of Each Receipt this Period 5.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Actuary		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 55.00		
SUBTOTAL of Receipts This Page (optional).....▶			14.81	
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 22 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Clark, Matthew, Lester, ,

Mailing Address 3728 Bridgeport Dr

City
Ames

State
IA

Zip Code
50010-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr. Sourcing Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-304

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Clark, Matthew, Lester, ,

Mailing Address 3728 Bridgeport Dr

City
Ames

State
IA

Zip Code
50010-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr. Sourcing Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-303

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Cook, Anne, R, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-257

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

32.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Cook, Anne, R, ,

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 Workforce, LLC.Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-256

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Craig, Bradley, David, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Retirement Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

132.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-130

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

C. Craig, Bradley, David, ,

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 Workforce, LLC.Occupation (for Individual)
AVP, Retirement Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

132.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-128

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

52.85

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Crivaro, Bridget, M, ,

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 Workforce, LLC.Occupation (for Individual)
Lead Supplier Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-6

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

B. Crivaro, Bridget, M, ,

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 Workforce, LLC.Occupation (for Individual)
Lead Supplier Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-6

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

C. Crumley, Jonica, , ,

Mailing Address 5102 E Glennaire Dr

City
SpokaneState
WAZip Code
99223-1557FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-123

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

6.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 25 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Crumley, Jonica, , ,

Mailing Address 5102 E Glennaire Dr

City
SpokaneState
WAZip Code
99223-1557FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-121**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Cutler, Jonas, P, ,

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 Workforce, LLC.Occupation (for Individual)
Asst Director-Document Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-254**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Cutler, Jonas, P, ,

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 Workforce, LLC.Occupation (for Individual)
Asst Director-Document Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-253**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5.00

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

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

FOR LINE NUMBER: PAGE 26 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Dammeier, Melissa, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-171

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Dammeier, Melissa, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-169

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Daumueller, Nichole, Therese, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant Director-Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-119

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

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

12.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Daumueller, Nichole, Therese, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director-Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-117**

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

B. Davis, Dorothy, Colleen, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director of Customer Experie

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-76**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Davis, Dorothy, Colleen, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director of Customer Experie

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-75**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.88

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 28 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Davis, Joel, Hunter, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-208	
Mailing Address 21795 Minnetonka Blvd			Amount of Each Receipt this Period 7.75	
City Excelsior	State MN	Zip Code 55331-8621	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) VP Consulting		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 85.25		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Davis, Joel, Hunter, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-206	
Mailing Address 21795 Minnetonka Blvd			Amount of Each Receipt this Period 7.75	
City Excelsior	State MN	Zip Code 55331-8621	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) VP Consulting		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 85.25		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. De Jong, Tollif, O, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-99	
Mailing Address 711 High St			Amount of Each Receipt this Period 1.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) AD - Enterprise Architecture		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 11.00		
SUBTOTAL of Receipts This Page (optional).....▶			16.50	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. De Jong, Tollif, O., ,

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 Workforce, LLC.Occupation (for Individual)
AD - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-97

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Decker, Lisa, Marie, ,

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 Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-37

Amount of Each Receipt this Period

8.00

☐ Memo Item

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

C. Decker, Lisa, Marie, ,

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 Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

88.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-37

Amount of Each Receipt this Period

8.00

☐ Memo Item

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

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

17.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Douglas, Kimberly, Anne, ,

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 Workforce, LLC.Occupation (for Individual)
AVP - Chief Compliance Officer SCBU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-263

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Douglas, Kimberly, Anne, ,

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 Workforce, LLC.Occupation (for Individual)
AVP - Chief Compliance Officer SCBU

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-262

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Dulaney, Michael, J, ,

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 Workforce, LLC.Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-211

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

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

34.61

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Dulaney, Michael, J, ,

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 Workforce, LLC.Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-209**

Amount of Each Receipt this Period

19.23

☐ Memo Item

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

B. Dunn, Alane, M, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director, Content Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-186**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Dunn, Alane, M, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director, Content Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-184**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

29.23

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

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

FOR LINE NUMBER: PAGE 32 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Durling, Donna, M, ,

Mailing Address 3 Temi Rd

City
Hudson

State
MA

Zip Code
01749-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assistant Director-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-223

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Durling, Donna, M, ,

Mailing Address 3 Temi Rd

City
Hudson

State
MA

Zip Code
01749-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assistant Director-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-221

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Ellerbach, Amy, Martin, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

63.47

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-9

Amount of Each Receipt this Period

5.77

☐ Memo Item

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

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

21.15

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Ellerbach, Amy, Martin, ,

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 Workforce, LLC.Occupation (for Individual)
Associate Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-9**

Amount of Each Receipt this Period

3.77

☐ Memo Item

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

B. Ersland, Jennifer, Lyn, ,

Mailing Address 919 SW Springfield Dr

City
AnkenyState
IAZip Code
50023-8246FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. Business Readiness Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-206**

Amount of Each Receipt this Period

3.84

☐ Memo Item

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

C. Ersland, Jennifer, Lyn, ,

Mailing Address 919 SW Springfield Dr

City
AnkenyState
IAZip Code
50023-8246FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. Business Readiness Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

42.24

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-204**

Amount of Each Receipt this Period

3.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13.45

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Fogarty, John, M, ,

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 Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-189

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Fogarty, John, M, ,

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 Workforce, LLC.Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-187

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Foster, Ashley, Kay, ,

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 Workforce, LLC.Occupation (for Individual)
B&P Senior Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-290

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

20.38

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Foster, Ashley, Kay, ,

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 Workforce, LLC.Occupation (for Individual)
B&P Senior Operations Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-289**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Foster, Daniel, M, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-178**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Foster, Daniel, M, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-176**

Amount of Each Receipt this Period

1.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Fournier, Louie, W, ,			Date of Receipt MM / DD / YYYY 05 / 08 / 2026 Transaction ID : 202605066363-84	
Mailing Address 711 High St			Amount of Each Receipt this Period 1.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Software Engineer III		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 11.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fournier, Louie, W, ,			Date of Receipt MM / DD / YYYY 05 / 22 / 2026 Transaction ID : 202605206392-83	
Mailing Address 711 High St			Amount of Each Receipt this Period 1.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Software Engineer III		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 11.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Franck, Andrew, Jeffrey, ,			Date of Receipt MM / DD / YYYY 05 / 08 / 2026 Transaction ID : 202605066363-319	
Mailing Address 401 McCullough Dr, St 200 & 300			Amount of Each Receipt this Period 11.54	
City Charlotte	State NC	Zip Code 28262-3667	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Dir Relationship Mgmt-Exec Ben		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 126.94		
SUBTOTAL of Receipts This Page (optional).....▶			13.54	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Franck, Andrew, Jeffrey, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-318	
Mailing Address 401 McCullough Dr, St 200 & 300			Amount of Each Receipt this Period 11.54	
City Charlotte	State NC	Zip Code 28262-3667	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Dir Relationship Mgmt-Exec Ben		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 126.94		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fredregill, Denise, D, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-114	
Mailing Address 1579 S 50th PI			Amount of Each Receipt this Period 2.31	
City West Des Moines	State IA	Zip Code 50265-5238	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Info Security Sr Anlst I		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 25.41		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fredregill, Denise, D, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-112	
Mailing Address 1579 S 50th PI			Amount of Each Receipt this Period 2.31	
City West Des Moines	State IA	Zip Code 50265-5238	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Info Security Sr Anlst I		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 25.41		
SUBTOTAL of Receipts This Page (optional).....▶			16.16	
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 38 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Freese, Christopher, P, ,

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 Workforce, LLC.

Occupation (for Individual)
Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-61

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Freese, Christopher, P, ,

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 Workforce, LLC.

Occupation (for Individual)
Chief Risk Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-60

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Garrett, Andrea, Lee, ,

Mailing Address 935 Alexandria Dr

City
Lansing

State
MI

Zip Code
48917-4802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AD Field Operations & Business Develo

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-275

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

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

59.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Garrett, Andrea, Lee, ,

Mailing Address 935 Alexandria Dr

City
LansingState
MIZip Code
48917-4802FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AD Field Operations & Business Develc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-274**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Gentleman, Linda, A, ,

Mailing Address 26300 S 25th St

City
MartellState
NEZip Code
68404-6132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Solution Analyst III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-31**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Gentleman, Linda, A, ,

Mailing Address 26300 S 25th St

City
MartellState
NEZip Code
68404-6132FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Solution Analyst III

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-31**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12.00

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 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Gifford, Nicholas, Michael, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-198

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Gifford, Nicholas, Michael, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-196

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Gillespie, Michael, W, ,

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 Workforce, LLC.

Occupation (for Individual)
Dir - Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

27.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-207

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

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

6.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 41 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Gillespie, Michael, W, ,

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 Workforce, LLC.Occupation (for Individual)
Dir - Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-205**

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

B. Gleason, Anne, Davey, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-333**

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Gleason, Anne, Davey, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
WashingtonState
DCZip Code
20004-2615FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
AVP-Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-332**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

60.20

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 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Goodman, Karl, Benjamin, ,

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 Workforce, LLC.

Occupation (for Individual)
Managing Director, Private Markets Pro

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-307

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Goodman, Karl, Benjamin, ,

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 Workforce, LLC.

Occupation (for Individual)
Managing Director, Private Markets Prc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-306

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Gorsche, Krista, , ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-128

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

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

13.00

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

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

FOR LINE NUMBER: PAGE 43 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Gorsche, Krista, , ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-126

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Gushiken, Tamara, J, ,

Mailing Address 711 High St
PO Box 436

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-8

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

C. Gushiken, Tamara, J, ,

Mailing Address 711 High St
PO Box 436

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

27.50

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-8

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

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

8.00

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

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

FOR LINE NUMBER: PAGE 44 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Hamlen, Renee, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Chief Marketing Officer- Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-335

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Hamlen, Renee, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Chief Marketing Officer- Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-334

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Harris, Debra, L, ,

Mailing Address 1519 Buffalo Rd

City
West Des Moines

State
IA

Zip Code
50265-1628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assistant Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

77.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-57

Amount of Each Receipt this Period

7.00

☐ Memo Item

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

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

64.70

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

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

FOR LINE NUMBER: PAGE 45 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Harris, Debra, L.,

Mailing Address 1519 Buffalo Rd

City
West Des Moines

State
IA

Zip Code
50265-1628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assistant Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

77.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-56

Amount of Each Receipt this Period

7.00

☐ Memo Item

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

B. Harrison, James, M.,

Mailing Address 4306 Randmore Rd

City
Upper Arlington

State
OH

Zip Code
43220-4442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director and Counsel, State Governme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-226

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Harrison, James, M.,

Mailing Address 4306 Randmore Rd

City
Upper Arlington

State
OH

Zip Code
43220-4442

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director and Counsel, State Governmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-224

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

64.70

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

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

FOR LINE NUMBER: PAGE 46 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Hasan, Sheri, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-43

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

B. Hasan, Sheri, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-43

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

C. Haynes, Lonna, L, ,

Mailing Address 711 High St
204

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director, Business Risk & Controls

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-11

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

6.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Haynes, Lonna, L, ,Mailing Address 711 High St
204City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director, Business Risk & Controls

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-11**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Henderson, Jamie, R, ,

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 Workforce, LLC.Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-64**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Henderson, Jamie, R, ,

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 Workforce, LLC.Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-63**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.00

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 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Heuisler, Philip, , ,

Mailing Address 6120 Ensign Ave N

City
New Hope

State
MN

Zip Code
55428-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Senior, Client Service Transfer Coordi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-314

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Heuisler, Philip, , ,

Mailing Address 6120 Ensign Ave N

City
New Hope

State
MN

Zip Code
55428-2618

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Senior, Client Service Transfer Coordi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-313

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Hewitt, Sheila, Marie, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-13

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

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

11.62

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

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

FOR LINE NUMBER: PAGE 49 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Hewitt, Sheila, Marie, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-13

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Hicks, Jeffrey, Johnston, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP - RIS Chief Compl Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-291

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Hicks, Jeffrey, Johnston, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP - RIS Chief Compl Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-290

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

59.70

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

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

FOR LINE NUMBER: PAGE 50 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Hinders, Kent, R, ,

Mailing Address 2000 Normandy Dr

City
Carlisle

State
IA

Zip Code
50047-9503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Principal Custody Solutions Regional V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-82

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

B. Hinders, Kent, R, ,

Mailing Address 2000 Normandy Dr

City
Carlisle

State
IA

Zip Code
50047-9503

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Principal Custody Solutions Regional V

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-81

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

C. Hochberger, Jennifer, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
Product Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25.41

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-73

Amount of Each Receipt this Period

2.31

☐ Memo Item

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

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

14.31

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

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

FOR LINE NUMBER: PAGE 51 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Hochberger, Jennifer, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
Product Manager 2

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.41

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-72

Amount of Each Receipt this Period

2.31

☐ Memo Item

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

B. Jackson, Roger, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-19

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

C. Jackson, Roger, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-19

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

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

14.31

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

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

FOR LINE NUMBER: PAGE 52 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Jain, Vinod, K, ,

Mailing Address 7112 Silverbrook Ln

City
Frisco

State
TX

Zip Code
75036-4370

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-230

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Jain, Vinod, K, ,

Mailing Address 7112 Silverbrook Ln

City
Frisco

State
TX

Zip Code
75036-4370

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-228

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. James, Sarah, Stroud, ,

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 Workforce, LLC.

Occupation (for Individual)
Director and Counsel, State Governmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-299

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

32.85

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

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

FOR LINE NUMBER: PAGE 53 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. James, Sarah, Stroud, ,

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 Workforce, LLC.

Occupation (for Individual)
Director and Counsel, State Governmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-298

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Johnson, Brenda, Kay, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-22

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Johnson, Brenda, Kay, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-22

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

38.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Johnson, Laura, Deitra Alston, ,Mailing Address 1013 Centre Rd
Ste 300City
WilmingtonState
DEZip Code
19805-1265FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Personal Trust Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-92**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Johnson, Laura, Deitra Alston, ,Mailing Address 1013 Centre Rd
Ste 300City
WilmingtonState
DEZip Code
19805-1265FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Personal Trust Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-91**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Johnson, Mark, A, ,

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 Workforce, LLC.Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-16**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Johnson, Mark, A, ,

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 Workforce, LLC.Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-16**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Johnson, Shelly, A, ,

Mailing Address 322 W Harris St

City
ManlyState
IAZip Code
50456-5005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-33**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Johnson, Shelly, A, ,

Mailing Address 322 W Harris St

City
ManlyState
IAZip Code
50456-5005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-33**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

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

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

FOR LINE NUMBER: PAGE 56 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kalb, Sharon, K, ,

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 Workforce, LLC.

Occupation (for Individual)
Business Operations Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-87

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Kalb, Sharon, K, ,

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 Workforce, LLC.

Occupation (for Individual)
Business Operations Strategist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-86

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Kaster, Jennifer, Lynn, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-146

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

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

4.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 57 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kaster, Jennifer, Lynn, ,

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 Workforce, LLC.Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-144**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Kaufman, Bradley, J, ,

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 Workforce, LLC.Occupation (for Individual)
Head of Digital Marketing and Marketin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-179**

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Kaufman, Bradley, J, ,

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 Workforce, LLC.Occupation (for Individual)
Head of Digital Marketing and Marketin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-177**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

59.70

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

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

FOR LINE NUMBER: PAGE 58 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Keairns, Jane, Marie, ,

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 Workforce, LLC.

Occupation (for Individual)
Director, ESG and Emerging Strategies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-185

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Keairns, Jane, Marie, ,

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 Workforce, LLC.

Occupation (for Individual)
Director, ESG and Emerging Strategies

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-183

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Kerins, Christopher, L, ,

Mailing Address 75 Mount Airy Rd

City
Pipersville

State
PA

Zip Code
18947-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP and CIO, Benefits and Protection

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-318

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

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

134.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kerins, Christopher, L, ,

Mailing Address 75 Mount Airy Rd

City
PipersvilleState
PAZip Code
18947-1631FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
VP and CIO, Benefits and Protection

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-317

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

B. Kern, Shannon, , ,

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 Workforce, LLC.Occupation (for Individual)
Director - Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-125

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Kern, Shannon, , ,

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 Workforce, LLC.Occupation (for Individual)
Director - Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-123

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 60 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kerns, Laurie, A, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-52	
Mailing Address 511 2nd St NE # 194		Amount of Each Receipt this Period 2.00	
City Fairbank	State IA	Zip Code 50629-7550	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Customer Experience	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 22.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kerns, Laurie, A, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-51	
Mailing Address 511 2nd St NE # 194		Amount of Each Receipt this Period 2.00	
City Fairbank	State IA	Zip Code 50629-7550	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Customer Experience	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 22.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Kiernan, Daniel, P, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-172	
Mailing Address 711 High St		Amount of Each Receipt this Period 3.85	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Sr Software Engineer II	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 42.35	
SUBTOTAL of Receipts This Page (optional).....		7.85	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kiernan, Daniel, P, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-170**

Amount of Each Receipt this Period

3.85

☐ Memo Item

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

B. Kinnison, Chris, L, ,

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 Workforce, LLC.Occupation (for Individual)
VP-Financial Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-142**

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

C. Kinnison, Chris, L, ,

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 Workforce, LLC.Occupation (for Individual)
VP-Financial Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-140**

Amount of Each Receipt this Period

30.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

63.85

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

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

FOR LINE NUMBER: PAGE 62 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kochneff, Eric, Jon, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategist, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-264

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Kochneff, Eric, Jon, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategist, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-263

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Konrad, Mark, J, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-38

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

38.85

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Konrad, Mark, J., ,

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 Workforce, LLC.Occupation (for Individual)
VP - Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-38

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Kosmicki, Kurt, , ,

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 Workforce, LLC.Occupation (for Individual)
Senior Manager, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-195

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Kosmicki, Kurt, , ,

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 Workforce, LLC.Occupation (for Individual)
Senior Manager, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-193

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

38.85

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Kropf, Jeffrey, Sinclair, ,

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 Workforce, LLC.Occupation (for Individual)
Client Service Manager, Assistant Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-80**

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

B. Kropf, Jeffrey, Sinclair, ,

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 Workforce, LLC.Occupation (for Individual)
Client Service Manager, Assistant Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-79**

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Krull, Daniel, Arthur, ,

Mailing Address 505 2nd Ave NE

City
RockfordState
IAZip Code
50468-1303FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Assistant Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-78**

Amount of Each Receipt this Period

1.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9.00

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

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

FOR LINE NUMBER: PAGE 65 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Krull, Daniel, Arthur, ,

Mailing Address 505 2nd Ave NE

City
Rockford

State
IA

Zip Code
50468-1303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Assistant Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-77

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Langfitt, Rochelle, R, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-241

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

C. Langfitt, Rochelle, R, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Product Manager 1

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

66.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-240

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

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

13.00

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

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

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Lindsay, Sarah, Anne Louise, ,

Mailing Address 996 Quinn Ter

City
Nolensville

State
TN

Zip Code
37135-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Dir Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-278

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Lindsay, Sarah, Anne Louise, ,

Mailing Address 996 Quinn Ter

City
Nolensville

State
TN

Zip Code
37135-2512

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Dir Field Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-277

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Link, Gregory, L, ,

Mailing Address 711 High St
Unit 6

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-101

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

14.62

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

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

FOR LINE NUMBER: PAGE 67 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Link, Gregory, L, ,

Mailing Address 711 High St
Unit 6

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-99

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Lowery, Patricia, A, ,

Mailing Address 641 N Calle Rinconado

City
Vail

State
AZ

Zip Code
85641-9774

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Director-Dental PPO Netwk

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-147

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Lowery, Patricia, A, ,

Mailing Address 641 N Calle Rinconado

City
Vail

State
AZ

Zip Code
85641-9774

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Asst Director-Dental PPO Netwk

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-145

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

7.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 68 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Lucas, Kathy, Lynn, ,

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 Workforce, LLC.Occupation (for Individual)
Business Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-165**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Lucas, Kathy, Lynn, ,

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 Workforce, LLC.Occupation (for Individual)
Business Development Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-163**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Markert, Bruce, D, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-15**

Amount of Each Receipt this Period

2.50

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

42.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Markert, Bruce, D, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-15	
Mailing Address 711 High St			Amount of Each Receipt this Period 2.50	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Sr Software Engineer II		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 30.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Marx, Joseph, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-205	
Mailing Address 5190 Lake Shore Rd			Amount of Each Receipt this Period 25.00	
City Hamburg	State NY	Zip Code 14075-5723	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) VP Consulting		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Marx, Joseph, E, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-203	
Mailing Address 5190 Lake Shore Rd			Amount of Each Receipt this Period 25.00	
City Hamburg	State NY	Zip Code 14075-5723	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) VP Consulting		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 275.00		
SUBTOTAL of Receipts This Page (optional).....▶			52.50	
TOTAL This Period (last page this line number only).....▶				

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

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

FOR LINE NUMBER: PAGE 70 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Mathews, Robert, J, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP - Stock Plan Services Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

121.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-110

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

B. Mathews, Robert, J, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP - Stock Plan Services Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

121.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-108

Amount of Each Receipt this Period

11.00

☐ Memo Item

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

C. McAnelly, Cory, A, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-302

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

50.85

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

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

FOR LINE NUMBER: PAGE 71 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. McAnelly, Cory, A, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-301

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. McFarland, Adrienne, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-253

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. McFarland, Adrienne, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-252

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

86.55

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 72 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. McWilliams, Darin, Alva, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-35	
Mailing Address 711 High St			Amount of Each Receipt this Period 2.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director, RIS Operations		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 22.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McWilliams, Darin, Alva, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-35	
Mailing Address 711 High St			Amount of Each Receipt this Period 2.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director, RIS Operations		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 22.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Millen, Laura, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-224	
Mailing Address 4856 N Kildare Ave			Amount of Each Receipt this Period 1.00	
City Chicago	State IL	Zip Code 60630-2629	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Senior Manager, Client Services		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 11.00		
SUBTOTAL of Receipts This Page (optional).....▶			5.00	
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: PAGE 73 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Millen, Laura, R, ,

Mailing Address 4856 N Kildare Ave

City
Chicago

State
IL

Zip Code
60630-2629

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Senior Manager, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-222

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Mineart, Denise, Jane, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategic Portfolio Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-136

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Mineart, Denise, Jane, ,

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 Workforce, LLC.

Occupation (for Individual)
Strategic Portfolio Manager I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-134

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

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

16.38

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

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

FOR LINE NUMBER: PAGE 74 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Molloy, Roberta, Kay, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-51

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

B. Molloy, Roberta, Kay, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

27.50

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-50

Amount of Each Receipt this Period

2.50

☐ Memo Item

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

C. Moore, John, , ,

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 Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

16.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-234

Amount of Each Receipt this Period

1.50

☐ Memo Item

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

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

6.50

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

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

FOR LINE NUMBER: PAGE 75 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Moore, John, , ,

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 Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.50

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-232

Amount of Each Receipt this Period

1.50

☐ Memo Item

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

B. Mueller, Sarah, Hope, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP, Corporate Strategy and Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-303

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Mueller, Sarah, Hope, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP, Corporate Strategy and Developm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-302

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

59.20

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

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

FOR LINE NUMBER: PAGE 76 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Muhlbauer, Angela, E, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-155

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

B. Muhlbauer, Angela, E, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-153

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Mundy, Anna, Elizabeth Wholey, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-274

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

24.08

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 77 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Mundy, Anna, Elizabeth Wholey, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-273**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Naig, Jaime, G, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-252**

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Naig, Jaime, G, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant Director, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-251**

Amount of Each Receipt this Period

11.54

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

24.08

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 78 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Neal, Jason, Alan, ,

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 Workforce, LLC.

Occupation (for Individual)
Head of Product Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-133

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Neal, Jason, Alan, ,

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 Workforce, LLC.

Occupation (for Individual)
Head of Product Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-131

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Neumann, Jodi, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

169.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-98

Amount of Each Receipt this Period

15.38

☐ Memo Item

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

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

25.38

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

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

FOR LINE NUMBER: PAGE 79 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Neumann, Jodi, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

169.18

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-96

Amount of Each Receipt this Period

15.38

☐ Memo Item

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

B. Noga, Gina, Lee, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP Workplace Benefits Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-83

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Noga, Gina, Lee, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP Workplace Benefits Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-82

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

35.38

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

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

FOR LINE NUMBER: PAGE 80 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Norton, Melissa, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
Director of Operations - Business Owne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-282

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Norton, Melissa, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
Director of Operations - Business Owne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-281

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

C. Oiler, Mark, 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 (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
VP - Enterprise Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

846.12

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-191

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

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

82.92

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 81 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Oiler, Mark, Raymond, ,

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 Workforce, LLC.Occupation (for Individual)
VP - Enterprise Risk Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

846.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-189**

Amount of Each Receipt this Period

76.92

☐ Memo Item

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

B. Oppedal, Chad, M, ,

Mailing Address 686 Caterpillar Run

City
Winter GardenState
FLZip Code
34787-2248FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Director- Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-162**

Amount of Each Receipt this Period

11.53

☐ Memo Item

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

C. Oppedal, Chad, M, ,

Mailing Address 686 Caterpillar Run

City
Winter GardenState
FLZip Code
34787-2248FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior Director- Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.83

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-160**

Amount of Each Receipt this Period

11.53

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

99.98

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

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

FOR LINE NUMBER: PAGE 82 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Owusu, Margaret, , ,

Mailing Address 5 Jones St

City
Worcester

State
MA

Zip Code
01604-5362

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Underwriting Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63.36

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-175

Amount of Each Receipt this Period

5.76

☐ Memo Item

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

B. Owusu, Margaret, , ,

Mailing Address 5 Jones St

City
Worcester

State
MA

Zip Code
01604-5362

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Underwriting Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63.36

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-173

Amount of Each Receipt this Period

5.76

☐ Memo Item

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

C. Palladino, Colletta, Melissa, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Contract Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

29.70

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-266

Amount of Each Receipt this Period

2.70

☐ Memo Item

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

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

14.22

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

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

FOR LINE NUMBER: PAGE 83 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Palladino, Colletta, Melissa, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Contract Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

29.70

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-265

Amount of Each Receipt this Period

2.70

☐ Memo Item

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

B. Pals, Daniel, D, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Benefit and Protection Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-158

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Pals, Daniel, D, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Benefit and Protection Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-156

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

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

10.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 84 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Peterson, Mary, F, ,

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 Workforce, LLC.Occupation (for Individual)
Sr. Strategist, Content

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-118**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Peterson, Mary, F, ,

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 Workforce, LLC.Occupation (for Individual)
Sr. Strategist, Content

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-116**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Phillips, Carolyn, H, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Process Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-77**

Amount of Each Receipt this Period

4.81

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.81

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 85 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Phillips, Carolyn, H, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Process Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-76**

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Phillips, Jeremy, J, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-10**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Phillips, Jeremy, J, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-10**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8.81

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

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

FOR LINE NUMBER: PAGE 86 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Piedra, Gabriella, Maria, ,

Mailing Address 108 Kentbury Ln

City
Apex

State
NC

Zip Code
27502-4260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-219

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Piedra, Gabriella, Maria, ,

Mailing Address 108 Kentbury Ln

City
Apex

State
NC

Zip Code
27502-4260

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP - Customer Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-217

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Pokorney, Jennifer, K, ,

Mailing Address 4164 Iowa Ave

City
Grand Island

State
NE

Zip Code
68803-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director of Customer Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-67

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

25.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Pokorney, Jennifer, K, ,

Mailing Address 4164 Iowa Ave

City
Grand IslandState
NEZip Code
68803-1151FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director of Customer Experience

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-66**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Pottebaum, David, W, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-173**

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Pottebaum, David, W, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant VP and CAO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-171**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.00

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

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

FOR LINE NUMBER: PAGE 88 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Proscovec, Candace, A, ,

Mailing Address 21 Mission Dr

City
Mason City

State
IA

Zip Code
50401-6643

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Senior Manager, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-108

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Proscovec, Candace, A, ,

Mailing Address 21 Mission Dr

City
Mason City

State
IA

Zip Code
50401-6643

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Senior Manager, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-106

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Pullen, Richard, L, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-89

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

19.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Pullen, Richard, L, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-88	
Mailing Address 711 High St			Amount of Each Receipt this Period 10.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director - Accounting		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 110.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Raecker Adreon, Emily, Martha, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-289	
Mailing Address 711 High St			Amount of Each Receipt this Period 5.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Assistant Director, CX		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 55.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Raecker Adreon, Emily, Martha, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-288	
Mailing Address 711 High St			Amount of Each Receipt this Period 5.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Assistant Director, CX		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 55.00		
SUBTOTAL of Receipts This Page (optional).....			20.00	
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: PAGE 90 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Raveling, Matt, Wayne, ,

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 Workforce, LLC.Occupation (for Individual)
AVP - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-183

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Raveling, Matt, Wayne, ,

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 Workforce, LLC.Occupation (for Individual)
AVP - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-181

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Reding, Adam, Joseph, ,

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 Workforce, LLC.Occupation (for Individual)
Head of IT Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-228

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

44.23

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Reding, Adam, Joseph, ,

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 Workforce, LLC.Occupation (for Individual)
Head of IT Business Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-226**

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Rettler, Kevin, P, ,

Mailing Address 970 Woodcrest Heights Dr

City
MenashaState
WIZip Code
54952-8838FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. ESOP Consultant II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-202**

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Rettler, Kevin, P, ,

Mailing Address 970 Woodcrest Heights Dr

City
MenashaState
WIZip Code
54952-8838FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr. ESOP Consultant II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-200**

Amount of Each Receipt this Period

4.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

36.85

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 92 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Rhodes, Lynn, Marie, ,

Mailing Address 1726 F Ave

City
Nevada

State
IA

Zip Code
50201-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-126

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Rhodes, Lynn, Marie, ,

Mailing Address 1726 F Ave

City
Nevada

State
IA

Zip Code
50201-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Relationship Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-124

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Rhodes, Mark, Aaron, ,

Mailing Address 1726 F Ave

City
Nevada

State
IA

Zip Code
50201-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-194

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

3.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 93 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Rhodes, Mark, Aaron, ,

Mailing Address 1726 F Ave

City
NevadaState
IAZip Code
50201-2434FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Consultant-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-192

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Ridgeway, John, , ,

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 Workforce, LLC.Occupation (for Individual)
AVP - ESOP Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-220

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Ridgeway, John, , ,

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 Workforce, LLC.Occupation (for Individual)
AVP - ESOP Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-218

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

11.00

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

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

FOR LINE NUMBER: PAGE 94 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Ripperger, Jerry, Lee, ,

Mailing Address 5470 Green Thumb Ave

City
Firestone

State
CO

Zip Code
80504-6079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
National VP - Stock Plan Services Cons

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-14

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Ripperger, Jerry, Lee, ,

Mailing Address 5470 Green Thumb Ave

City
Firestone

State
CO

Zip Code
80504-6079

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
National VP - Stock Plan Services Con:

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-14

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Rodts, Mark, Jason, ,

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 (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Head of Business Owner Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-54

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

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

60.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 95 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rodts, Mark, Jason, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-53	
Mailing Address 4141 Parklake Ave Ste 400		Amount of Each Receipt this Period 3.00	
City Raleigh	State NC	Zip Code 27612-2333	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Head of Business Owner Consulting	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 33.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rogers, Hannah, M, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-261	
Mailing Address 711 High St		Amount of Each Receipt this Period 76.92	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Associate General Counsel	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 846.12	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rogers, Hannah, M, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-260	
Mailing Address 711 High St		Amount of Each Receipt this Period 76.92	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Associate General Counsel	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 846.12	
SUBTOTAL of Receipts This Page (optional).....▶		156.84	
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 96 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Ruba, Scott, Michael, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-56

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Ruba, Scott, Michael, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-55

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Sadler, Andrea, Lea, ,

Mailing Address 110 W Mount Vernon Rd

City
Waterloo

State
IA

Zip Code
50703-9458

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director - RFP and Proposal Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-94

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 97 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Sadler, Andrea, Lea, ,

Mailing Address 110 W Mount Vernon Rd

City
WaterlooState
IAZip Code
50703-9458FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Director - RFP and Proposal Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-93**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Schamay, Donald, James, ,Mailing Address 3625 Cumberland Blvd SE
Ste 1075City
AtlantaState
GAZip Code
30339-6425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Regional Director - Executive Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-135**

Amount of Each Receipt this Period

8.76

☐ Memo Item

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

C. Schamay, Donald, James, ,Mailing Address 3625 Cumberland Blvd SE
Ste 1075City
AtlantaState
GAZip Code
30339-6425FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Principal Workforce, LLC.

Occupation (for Individual)

Regional Director - Executive Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

96.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-133**

Amount of Each Receipt this Period

8.76

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

27.52

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

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

FOR LINE NUMBER: PAGE 98 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Scheidel, Ashley, A, ,

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 Workforce, LLC.

Occupation (for Individual)
HR Business Partner - PrinAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-215

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

B. Scheidel, Ashley, A, ,

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 Workforce, LLC.

Occupation (for Individual)
HR Business Partner - PrinAM

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-213

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Schmidt, Owen, A, ,

Mailing Address 155 Pepperbush Ln

City
Aledo

State
TX

Zip Code
76008-4159

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Director Sales Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

31.68

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-203

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

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

25.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Schmidt, Owen, A, ,

Mailing Address 155 Pepperbush Ln

City
AledoState
TXZip Code
76008-4159FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director Sales Consulting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-201**

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

B. Schneider, Charles, M, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

63.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-159**

Amount of Each Receipt this Period

5.77

☐ Memo Item

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

C. Schneider, Charles, M, ,

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 Workforce, LLC.Occupation (for Individual)
Assistant General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

63.47

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-157**

Amount of Each Receipt this Period

5.77

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14.42

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 100 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Schneider, Derek, L, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-139	
Mailing Address 711 High St			Amount of Each Receipt this Period 4.81	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Lead Integration Manager		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 52.91		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schneider, Derek, L, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-137	
Mailing Address 711 High St			Amount of Each Receipt this Period 4.81	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Lead Integration Manager		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 52.91		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Schoening, Lance, W, ,			Date of Receipt M M / D D / Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-86	
Mailing Address 711 High St			Amount of Each Receipt this Period 25.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Policy		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 275.00		
SUBTOTAL of Receipts This Page (optional).....▶			34.62	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 101 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Schoening, Lance, W, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-85	
Mailing Address 711 High St			Amount of Each Receipt this Period 25.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Policy		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Schreiber, Paul, Christopher, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-20	
Mailing Address 17004 Dawn Flower Cv			Amount of Each Receipt this Period 5.00	
City Austin	State TX	Zip Code 78738-4082	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) LM Sr Relationship Director		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 55.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Schreiber, Paul, Christopher, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-20	
Mailing Address 17004 Dawn Flower Cv			Amount of Each Receipt this Period 5.00	
City Austin	State TX	Zip Code 78738-4082	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) LM Sr Relationship Director		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 55.00		
SUBTOTAL of Receipts This Page (optional).....▶			35.00	
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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 State and Federal Political Action Committee (Principal S PAC)

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

A. Schuling, Ronelle, Jo, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-85

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Schuling, Ronelle, Jo, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-84

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Schwery, Steve, D, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-69

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

16.38

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

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

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Schwery, Steve, D, ,

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 Workforce, LLC.

Occupation (for Individual)
Assistant Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-68

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Shaikh, Adam, U, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-235

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Shaikh, Adam, U, ,

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 Workforce, LLC.

Occupation (for Individual)
Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-233

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

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

16.38

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Sheridan, Joan, M, ,

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 Workforce, LLC.Occupation (for Individual)
Head of HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-141**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

B. Sheridan, Joan, M, ,

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 Workforce, LLC.Occupation (for Individual)
Head of HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-139**

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

C. Sheriff, Erin, K, ,

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 Workforce, LLC.Occupation (for Individual)
Sr. Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

42.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-247**

Amount of Each Receipt this Period

3.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

43.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Sheriff, Erin, K, ,

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 Workforce, LLC.Occupation (for Individual)
Sr. Actuary II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

42.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-246**

Amount of Each Receipt this Period

3.85

☐ Memo Item

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

B. Showalter, Craig, Alan, ,

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 Workforce, LLC.Occupation (for Individual)
Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-100**

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Showalter, Craig, Alan, ,

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 Workforce, LLC.Occupation (for Individual)
Director, Client Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-98**

Amount of Each Receipt this Period

7.69

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

19.23

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Showalter, Malcolm, S, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Delivery Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.30

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-28

Amount of Each Receipt this Period

3.30

☐ Memo Item

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

B. Showalter, Malcolm, S, ,

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 Workforce, LLC.

Occupation (for Individual)
Sr Delivery Manager II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36.30

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-28

Amount of Each Receipt this Period

3.30

☐ Memo Item

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

C. Simon, Sheila, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

11.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-245

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

7.60

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

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

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Simon, Sheila, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

MM / DD / YYYY
05 / 22 / 2026

Transaction ID : 202605206392-244

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Sinn, Laci, Gaye, ,

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 Workforce, LLC.

Occupation (for Individual)
Exec Bnfts Adm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

MM / DD / YYYY
05 / 08 / 2026

Transaction ID : 202605066363-298

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Sinn, Laci, Gaye, ,

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 Workforce, LLC.

Occupation (for Individual)
Exec Bnfts Adm

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

MM / DD / YYYY
05 / 22 / 2026

Transaction ID : 202605206392-297

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

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

10.62

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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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 State and Federal Political Action Committee (Principal S PAC)

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

A. Sires, Kacie, Dorlena, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.50

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-164

Amount of Each Receipt this Period

11.50

☐ Memo Item

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

B. Sires, Kacie, Dorlena, ,

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 Workforce, LLC.

Occupation (for Individual)
Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.50

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-162

Amount of Each Receipt this Period

11.50

☐ Memo Item

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

C. Smith, Adam, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director - Investigations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-210

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

26.00

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: PAGE 109 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Smith, Adam, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director - Investigations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-208

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Smith, Rebecca, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-168

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

C. Smith, Rebecca, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-166

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

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

12.62

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

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

FOR LINE NUMBER: PAGE 110 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Snyder, Robert, Randall, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Manager, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-138

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Snyder, Robert, Randall, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Manager, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-136

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

C. Stanley Nguyen, Rachel, Alexa, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
Washington

State
DC

Zip Code
20004-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP-Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-285

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

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

44.23

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

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

FOR LINE NUMBER: PAGE 111 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Stanley Nguyen, Rachel, Alexa, ,

Mailing Address 801 Pennsylvania Ave NW, Ste 420

City
Washington

State
DC

Zip Code
20004-2615

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
AVP-Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-284

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Stayner, Jeffrey, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-53

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

C. Stayner, Jeffrey, M, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Accounting Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-52

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

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

32.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Steiff, Jeffrey, Allen, ,

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 Workforce, LLC.Occupation (for Individual)
Financial Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-269**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

B. Steiff, Jeffrey, Allen, ,

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 Workforce, LLC.Occupation (for Individual)
Financial Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

165.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-268**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

C. Stites, Kristal, D, ,Mailing Address 708 N 14th St
PO Box 121City
CharitonState
IAZip Code
50049-1122FEC ID number of contributing
federal political committee.**C**Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Senior, Client Service Onboarding Mana

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-48**

Amount of Each Receipt this Period

2.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

32.00

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

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

FOR LINE NUMBER: PAGE 113 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Stites, Kristal, D, ,

Mailing Address 708 N 14th St
 PO Box 121

City
 Chariton

State
 IA

Zip Code
 50049-1122

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 Principal Workforce, LLC.

Occupation (for Individual)
 Senior, Client Service Onboarding Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2026

Transaction ID : 202605206392-48

Amount of Each Receipt this Period

2.00

☐ Memo Item

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

B. Strube, Jaclyn, Nicole, ,

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 Workforce, LLC.

Occupation (for Individual)
 Director - Workplace Benefits Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 05 / 08 / 2026

Transaction ID : 202605066363-256

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

C. Strube, Jaclyn, Nicole, ,

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 Workforce, LLC.

Occupation (for Individual)
 Director - Workplace Benefits Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

126.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2026

Transaction ID : 202605206392-255

Amount of Each Receipt this Period

11.54

☐ Memo Item

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

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

25.08

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Sungren, Joel, Richard, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Document Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-177

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Sungren, Joel, Richard, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director-Document Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-175

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

C. Taber, Bret, Alan, ,

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 Workforce, LLC.

Occupation (for Individual)
Document Services, Assistant Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

33.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-93

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

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

9.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a	☐ 11b	☐ 11c	☐ 12
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☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Taber, Bret, Alan, ,

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 Workforce, LLC.Occupation (for Individual)
Document Services, Assistant Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-92**

Amount of Each Receipt this Period

3.00

☐ Memo Item

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

B. Taylor, Christopher, N, ,Mailing Address 1013 Centre Rd
Ste 300City
WilmingtonState
DEZip Code
19805-1265FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Director-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-96**

Amount of Each Receipt this Period

3.85

☐ Memo Item

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

C. Tebockhorst, Austen, D, ,

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 Workforce, LLC.Occupation (for Individual)
Dir - Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

52.91

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-251**

Amount of Each Receipt this Period

4.81

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11.66

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

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

FOR LINE NUMBER: PAGE 116 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Tebockhorst, Austen, D, ,

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 Workforce, LLC.

Occupation (for Individual)
Dir - Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

52.91

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-250

Amount of Each Receipt this Period

4.81

☐ Memo Item

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

B. Thaut, Jayson, Philip, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-124

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Thaut, Jayson, Philip, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior Director - Product Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-122

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

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

12.81

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

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

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Thede, Jeremy, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director - Total Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-188

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Thede, Jeremy, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Director - Total Rewards

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-186

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Thomas, Jeffrey, J, ,

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 Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-26

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

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

17.69

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

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

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(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Thomas, Jeffrey, J. ,

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 Workforce, LLC.

Occupation (for Individual)
Director-Engineering

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

84.59

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-26

Amount of Each Receipt this Period

7.69

☐ Memo Item

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

B. Thompson, Laura, E. ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Contact Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-95

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Thompson, Laura, E. ,

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 Workforce, LLC.

Occupation (for Individual)
Asst Dir-Contact Center

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-94

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

17.69

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Tiedens, Stephenie, Ann, ,

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 Workforce, LLC.Occupation (for Individual)
Head of Engagement Center Shared Se

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-180

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

B. Tiedens, Stephenie, Ann, ,

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 Workforce, LLC.Occupation (for Individual)
Head of Engagement Center Shared S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-178

Amount of Each Receipt this Period

28.85

☐ Memo Item

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

C. Townsend, James, R, ,

Mailing Address 711 High St
Unit 9108City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Asst Dir-Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-227

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

62.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 120 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Townsend, James, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-225	
Mailing Address 711 High St Unit 9108			Amount of Each Receipt this Period 5.00	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Asst Dir-Internal Audit		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 55.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Vald, Christina, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-75	
Mailing Address 711 High St			Amount of Each Receipt this Period 7.69	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Operations		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 84.59		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Vald, Christina, R, ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-74	
Mailing Address 711 High St			Amount of Each Receipt this Period 7.69	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Director of Operations		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 84.59		
SUBTOTAL of Receipts This Page (optional).....▶			20.38	
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 121 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Van Pelt, Douglas, Dean, ,

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 Workforce, LLC.

Occupation (for Individual)
Director-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-32

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Van Pelt, Douglas, Dean, ,

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 Workforce, LLC.

Occupation (for Individual)
Director-RIS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-32

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Van Wyngarden, Diane, R, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Brand, Media & Creative

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-44

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

60.00

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

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

FOR LINE NUMBER: PAGE 122 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Van Wyngarden, Diane, R, ,

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 Workforce, LLC.

Occupation (for Individual)
VP - Brand, Media & Creative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-44

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

B. Vande Loo, Michelle, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 08 / 2026

Transaction ID : 202605066363-65

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Vande Loo, Michelle, Ann, ,

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 Workforce, LLC.

Occupation (for Individual)
AVP & Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

110.00

Date of Receipt

05 / 22 / 2026

Transaction ID : 202605206392-64

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

60.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 123 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Vincent, Molly, Maretta McNeill, ,

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 Workforce, LLC.Occupation (for Individual)
Director, Research & Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-281**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Vincent, Molly, Maretta McNeill, ,

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 Workforce, LLC.Occupation (for Individual)
Director, Research & Insights

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

110.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-280**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Vodraska, Lori, Ann, ,

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 Workforce, LLC.Occupation (for Individual)
Head of Strategy & Innovation - Benefi

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

317.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-276**

Amount of Each Receipt this Period

28.85

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

48.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 124 OF 133
(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 State and Federal Political Action Committee (Principal S PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Vodraska, Lori, Ann, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-275	
Mailing Address 711 High St			Amount of Each Receipt this Period 28.85	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Head of Strategy & Innovation - Benefi		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 317.35		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Vorbrich, Nile, William, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 08 / 2026 Transaction ID : 202605066363-268	
Mailing Address 711 High St			Amount of Each Receipt this Period 4.81	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Sr. Actuary I		
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		Aggregate Year-to-Date ▼ 52.91		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Vorbrich, Nile, William, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 22 / 2026 Transaction ID : 202605206392-267	
Mailing Address 711 High St			Amount of Each Receipt this Period 4.81	
City Des Moines	State IA	Zip Code 50392-0001	☐ Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Principal Workforce, LLC.		Occupation (for Individual) Sr. Actuary I		
Receipt For: ☐ Primary ☐ General ☐ Other (specify)		Aggregate Year-to-Date ▼ 52.91		
SUBTOTAL of Receipts This Page (optional).....▶			38.47	
TOTAL This Period (last page this line number only).....▶				

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Waddell, Paul, Garrett, ,

Mailing Address PO Box 701

City
Des MoinesState
IAZip Code
50303-0701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Benefits Adm Analyst II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-149**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Waddell, Paul, Garrett, ,

Mailing Address PO Box 701

City
Des MoinesState
IAZip Code
50303-0701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Benefits Adm Analyst II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-147**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Wagner, Bradley, N, ,Mailing Address 711 High St
106City
Des MoinesState
IAZip Code
50392-0001FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Chief Inclusion Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-339**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.00

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

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

FOR LINE NUMBER: PAGE 126 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Wagner, Bradley, N, ,

Mailing Address 711 High St
106

City
Des Moines

State
IA

Zip Code
50392-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.

Occupation (for Individual)
Chief Inclusion Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-338

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Wahlert, Jason, Douglas, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior, Client Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026

Transaction ID : 202605066363-41

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

C. Wahlert, Jason, Douglas, ,

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 Workforce, LLC.

Occupation (for Individual)
Senior, Client Service Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

44.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026

Transaction ID : 202605206392-41

Amount of Each Receipt this Period

4.00

☐ Memo Item

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

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

13.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Ware, Eric, J, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-232**

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

B. Ware, Eric, J, ,

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 Workforce, LLC.Occupation (for Individual)
Director - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

31.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-230**

Amount of Each Receipt this Period

2.88

☐ Memo Item

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

C. Wells, Jeremy, Vincent, ,

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 Workforce, LLC.Occupation (for Individual)
Chief Investment Officer-Bank

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-190**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Wells, Jeremy, Vincent, ,

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 Workforce, LLC.Occupation (for Individual)
Chief Investment Officer-Bank

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-188**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Wells, Robby, J, ,

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 Workforce, LLC.Occupation (for Individual)
AD - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-23**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

C. Wells, Robby, J, ,

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 Workforce, LLC.Occupation (for Individual)
AD - Enterprise Architecture

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-23**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Westhoff, Taunya, S, ,

Mailing Address 1473 Dogwood Ave

City
AlexanderState
IAZip Code
50420-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.47

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	08	2026

Transaction ID : 202605066363-27

Amount of Each Receipt this Period

2.77

☐ Memo Item

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

B. Westhoff, Taunya, S, ,

Mailing Address 1473 Dogwood Ave

City
AlexanderState
IAZip Code
50420-8012FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Sr Software Engineer I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.47

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	22	2026

Transaction ID : 202605206392-27

Amount of Each Receipt this Period

2.77

☐ Memo Item

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

C. Wibowo, Ignatius, B, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
05	08	2026

Transaction ID : 202605066363-109

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

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

10.54

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Wibowo, Ignatius, B, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Software Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-107**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Wiechman, Sean, E, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Infrastructure Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-187**

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

C. Wiechman, Sean, E, ,

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 Workforce, LLC.Occupation (for Individual)
Sr Infrastructure Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-185**

Amount of Each Receipt this Period

6.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 12
☐ 13	☐ 14	☐ 15	☐ 16
☐ 17			

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

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

A. Woods, Jayne, M, ,

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 Workforce, LLC.Occupation (for Individual)
Financial Analyst IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-34**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

B. Woods, Jayne, M, ,

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 Workforce, LLC.Occupation (for Individual)
Financial Analyst IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-34**

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

C. Worsley, Jody, Lynne, ,

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 Workforce, LLC.Occupation (for Individual)
Senior Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-129**

Amount of Each Receipt this Period

5.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 OF 133

(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 State and Federal Political Action Committee (Principal S PAC)

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

A. Worsley, Jody, Lynne, ,

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 Workforce, LLC.Occupation (for Individual)
Senior Director, RIS Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-127**

Amount of Each Receipt this Period

5.00

☐ Memo Item

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

B. Zigler, Tammy, J, ,

Mailing Address 4316 Blauvelt Rd

City
Grand IslandState
NEZip Code
68803-1401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Manager-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2026**Transaction ID : 202605066363-5**

Amount of Each Receipt this Period

6.00

☐ Memo Item

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

C. Zigler, Tammy, J, ,

Mailing Address 4316 Blauvelt Rd

City
Grand IslandState
NEZip Code
68803-1401FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Principal Workforce, LLC.Occupation (for Individual)
Manager-Underwriting

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

66.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2026**Transaction ID : 202605206392-5**

Amount of Each Receipt this Period

6.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17.00

3603.39

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 133

☐ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Principal Life Insurance Company State and Federal Political Action Committee (Principal S PAC)

Full Name (Last, First, Middle Initial)

A. Boussetot for Iowa

Mailing Address 4003 SW 4th St

City
AnkenyState
IAZip Code
50023

Purpose of Disbursement

Nonfederal Contribution

Candidate Name

011

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	6		

FEC Identification Number

C

Transaction ID : 5502821E2A/

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00