

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 68 OF 286  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Principal Life Insurance Company Political Action Committee**

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

**A. Egan, John, Michael, ,**

Mailing Address 711 High St

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

C

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

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2002.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	29	2017

**Transaction ID : 201801025138-1070**

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

**B. Ellis, Angela, 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 Life Ins Co.Occupation (for Individual)  
AVP-Marketer Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	01	2017

**Transaction ID : 201801025138-79**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**C. Ellis, Angela, 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 Life Ins Co.Occupation (for Individual)  
AVP-Marketer Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	15	2017

**Transaction ID : 201801025138-80**

Amount of Each Receipt this Period

10.00

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

97.00

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