

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

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

FOR 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 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 Moines

State  
IA

Zip Code  
50392-0001

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
VP-Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2018

**Transaction ID : 201804035205-693**

Amount of Each Receipt this Period

77.00

☐ Memo Item

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

**B. Elming, Gregory, Bernard, ,**

Mailing Address 711 High St

City  
Des Moines

State  
IA

Zip Code  
50392-0001

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 09 / 2018

**Transaction ID : 201804035205-502**

Amount of Each Receipt this Period

190.00

☐ Memo Item

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

**C. Elming, Gregory, Bernard, ,**

Mailing Address 711 High St

City  
Des Moines

State  
IA

Zip Code  
50392-0001

FEC ID number of contributing  
federal political committee.

C

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

Occupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1140.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 23 / 2018

**Transaction ID : 201804035205-503**

Amount of Each Receipt this Period

190.00

☐ Memo Item

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

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

457.00