

# **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. Couture, 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 Life Ins Co.

Occupation (for Individual)  
SVP & Chief HR Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2019

**Transaction ID : 201908065135-639**

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

**B. Cropp, Martin, 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 Life Ins Co.

Occupation (for Individual)  
Senior MD, CRE Production

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 12 / 2019

**Transaction ID : 201908065135-915**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**C. Cropp, Martin, 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 Life Ins Co.

Occupation (for Individual)  
Senior MD, CRE Production

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 26 / 2019

**Transaction ID : 201908065135-916**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

242.30