Image# 201804179108271041				_		Р	AGE 1 / 98
FEC AN	EPORT O ND DISBU Other Than An	JRSE	MENT	S		Office Use Only	,
1. NAME OF TYP COMMITTEE (in full)	e or print ▼		ample: If typin r the lines.	ng, type	12FE4M	15	
The Northwestern Mutual		e Compan	y Federa				
ADDRESS (number and street)	20 E Wisconsin Ave						
Check if different than previously reported. (ACC)	//////////////////////////////////////				WI	53202] - [
2. FEC IDENTIFICATION NUMB	ER 🔻	CITY 🔺		S		ZIP C	ODE 🔺
C C00197095		3. IS THIS REPORT	~	NEW N) OR		MENDED)	
 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 	(b) Monthly Report Due On:		Ū.	(12C)	Sep		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(d) 30-Day POST -Electi Report for th		General (300	A)	Runoff (30R)	Special (30S)
5. Covering Period	eport and to the be	018	through wledge and I	03 belief it is true	31_	2018	
	linze, Michelle, A., ,		[Electronicall		ate 04	4 / D D /	2018
NOTE: Submission of false, erroneous Office Use Only	, or incomplete inform	mation may su	ubject the per-	son signing thi	is Report to t	FEC FO Rev. 05	RM 3X

04/17/2018 09 : 41

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

The Northwestern Mutual Life Insurance Company Federal PAC

R	eport Covering the Period: From: 03	M / D D / Y Y Y Y 01 2018	To: 03 / D D / Y Y Y Y Y 31 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		358573.58
	(b) Cash on Hand at Beginning of Reporting Period	351313.79	
	(c) Total Receipts (from Line 19)	35235.46	105742.38
	(d) Subtotal (add Lines 6(b) and6(c) for Column A and Lines6(a) and 6(c) for Column B)	386549.25	464315.96
7.	Total Disbursements (from Line 31)	66236.62	144003.33
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	320312.63	320312.63
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:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From: 03	01 / 2018 To:	03 / D D / Y Y Y 2018						
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date						
1. Contributions (other than loans) From:								
(a) Individuals/Persons Other								
Than Political Committees	00000.04							
(i) Itemized (use Schedule A)	29082.34	74002.34						
	6153.12	31740.04						
(ii) Unitemized	0133.12	31740.04						
(iii) TOTAL (add	35235.46	105742.38						
Lines 11(a)(i) and (ii)	00200.10	42. 42. 45.						
(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)	35235.46	105742.38						
2. Transfers From Affiliated/Other								
Party Committees	0.00	0.00						
	0.00	0.00						
3. All Loans Received	0.00	0.00						
4. Loan Repayments Received	0.00	0.00						
5. Offsets To Operating Expenditures								
(Refunds, Rebates, etc.)	0.00	0.00						
(Carry Totals to Line 37, page 5)	0.00	0.00						
5. Refunds of Contributions Made								
to Federal Candidates and Other Political Committees	0.00	0.00						
7. Other Federal Receipts	0.00	0.00						
(Dividends, Interest, etc.)	0.00	0.00						
8. Transfers from Non-Federal and Levin Funds		0.00						
(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						
	4 4							
9. Total Receipts (add Lines 11(d),								
12, 13, 14, 15, 16, 17, and 18(c))▶	35235.46	105742.38						
D. Tatal Fadaral Descipta								
0. Total Federal Receipts	35235.46	105742.38						
(subtract Line 18(c) from Line 19)▶	33233.40	105742.38						

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4					
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Tear-to-Date					
(i) Federal Share	0.00	0.00					
(ii) Non-Federal Share	0.00	0.00					
(b) Other Federal Operating Expenditures	236.62	703.33					
(c) Total Operating Expenditures		703.33					
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	236.62	703.3					
Committees Contributions to	0.00	0.00					
Federal Candidates/Committees and Other Political Committees	66000.00	131000.00					
Independent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00					
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00					
Loan Repayments Made	0.00	0.00					
Loans Made Refunds of Contributions To:	0.00	0.00					
(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					
Other Disbursements (Including Non-Federal Donations)	0.00	12300.00					
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	41						
(i) Federal Share	0.00	0.00					
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00					
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					
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	66236.62	144003.33					
Total Federal Disbursements		4 4 4					
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	66236.62	144003.33					
	4 4 4	144003.33					

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC	Form	3X	(Rev	05/2016	١
I LO	FOILI	37	(nev.	05/2010	J

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

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				0.00
	-7	1	-	
				35235.46
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				236.62
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	7		7	1 1 49 1
				236.62
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						105742.38
		-7	÷		-7	1007 12:00
		-			-	0.00
						105742.38
		-	÷.		-	
						703.33
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		-7			-7	0.00
						703.33
- L						

COLUMN B

Calendar Year-to-Date



Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

			Use separate schedule(s)	(ch	(check only one)											
ITEMIZED F			for each category of the Detailed Summary Page		K 11a 13		11b	11c	12	17						
	copied from such Reports and Sta I purposes, other than using the r				for the		pose of	soliciting	contribut	tions						
	MMITTEE (In Full)			<u></u>												
	nwestern Mutual Life Ins	surance	Company Federal PAC													
Full Name of A. Abbass, Ste	Individual (Last, First, Middle Initia even, Fay, ,	al) or Full Or	ganization Name		Date of	Re	ceipt									
Mailing Addres	ss 9 Woodhull Ct			03 15 2018												
City		State	Zip Code		Transaction ID : 2018031519206-65											
Northport		NY	11768-2844	Amount of Each Receipt this Period												
FEC ID numb federal politica	er of contributing al committee.	С		125.00												
Name of Emp Self-Employed	loyer (for Individual) I		pation (for Individual) eral Insurance Agent		Me	emo	Item									
Receipt For:	General	Aggregate `	Year-to-Date 🔻													
	pecify) V		750.00													
	Individual (Last, First, Middle Initia	al) or Full Or	ganization Name													
B. Abbass, S		_	Date of	Re												
	ss 9 Woodhull Ct			03 / D D / Y Y Y Y 2018												
City Northport		State NY	Zip Code 11768-2844	_					019205-6	5						
· · · ·	er of contributing	C			Amount of Each Receipt this Period 125.00											
	loyer (for Individual)	Occu	pation (for Individual)		Memo Item											
Self-Employed			eral Insurance Agent													
Receipt For:	General	Aggregate `	Year-to-Date 🔻													
	pecify) ▼		750.00													
Full Name of c. Abell, Ric	Individual (Last, First, Middle Initia k, A, ,	al) or Full Or	ganization Name		Date of	Re	ceipt									
Mailing Addres	SS 6025 Princeton Reach Way				03	/	D D D 15		y y 2018	Y						
City Granite Bay		State CA	Zip Code 95746-6217	_					519206-4 is Period	8						
	er of contributing al committee.	С				U	J		125.0	00						
Name of Emp Self-Employed	loyer (for Individual) I		pation (for Individual) eral Insurance Agent		Me	emc	tem									
Receipt For: Primary	General	Aggregate `	Year-to-Date ▼													
Other (s	pecify)		750.00													
SUBTOTAL of F	Receipts This Page (optional)		····· •				,	,	375.0)0						
TOTAL This Pe	riod (last page this line number or	nly)	••••••	•				-								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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	y information copied from such Reports and Stat						or the p		pos	se of s	solicitin		ntribut	ions		
	for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)	ame and a	addro	ess or any political committee	÷ (0 §	501	ICIE COP	ιιrib	Jutic	uns fr	UII SUC	JI CO	mitte	JU.		
	The Northwestern Mutual Life Ins	urance	: Co	ompany Federal PAC	2	_	_	_	_							
Α.	Full Name of Individual (Last, First, Middle Initia Abell, Rick, A, ,	l) or Full C	Orgai	nization Name		C	Date of	Re	€cei	ipt	-		-	-		
	Mailing Address 6025 Princeton Reach Way					M M / D D / Y Y Y Y 03 31 2018										
	City Granite Bay	State CA		Zip Code 95746-6217	\vdash	Transaction ID : 2018033019205-48										
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period										
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent			Me	emo	o Ite	em						
	Bossint For:	Aggregate	e Yea	ar-to-Date ▼ 750.00												
Β.	Full Name of Individual (Last, First, Middle Initia Aslakson, Eric, D, , Mailing Address 15222 SE 2224 St		Date of Receipt													
	Mailing Address 15323 SE 82nd St		03 15 2018													
	City Newcastle	State WA		Zip Code 98059-9223		Transaction ID : 2018031519206-56 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C	_			Memo Item										
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent												
	Receipt For: Primary General Other (specify) ▼	Aggregate	ar-to-Date ▼ 375.00													
C.	Full Name of Individual (Last, First, Middle Initia Aslakson, Eric, D, ,	l) or Full C	Orgai	nization Name		C	Date of	Re	cei	ipt						
	Mailing Address 15323 SE 82nd St					ľ	^M 03	1	Γ	31	/ Y)18 [°]	Y		
	City Newcastle	State WA		Zip Code 98059-9223	_	_					201803			6		
	FEC ID number of contributing federal political committee.	C				Ą	Amount	. 01	⊏a	ion Re	ceipt ti	nis P	eriod 62.5	50		
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) Insurance Agent		Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	e Yea	ar-to-Date ▼ 375.00	1											
	UBTOTAL of Receipts This Page (optional)				<u> </u>	[-	-	9		9		250.0	÷		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 8 OF

				etailed Summary Page	×	11	а		11	b		11c		12					
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or	v information copied from such Reports and State or commercial purposes, other than using the national states of the states of t																		
\ \	NAME OF COMMITTEE (In Full)		~																
	The Northwestern Mutual Life Insu	Irance	Co	mpany Federal PAC	;														
A.	Barbi, Leslie, , ,																		
	Mailing Address 6620 N Lake Dr	-			03 / D D / Y Y Y Y 03 15 2018														
	City Fox Point	State WI		Zip Code 53217-4245	Transaction ID : 2018031519354-461														
-		• • • •		JJZ17-424J	Amount of Each Receipt this Period														
	FEC ID number of contributing rederal political committee.	C			208.00														
	Name of Employer (for Individual) NML	on (for Individual) blic Investments			Me	emo) Ite	em											
Ì	Receipt For: A	-to-Date 🔻	\neg																
	Primary General Other (specify) ▼																		
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barbi, Leslie, , ,								cei	ipt									
	Mailing Address 6620 N Lake Dr								03 31 2018										
	City	State		Zip Code		Tra	ansa	acti	on	ID :	20 [.]	180330	0193	355-40	51				
-	Fox Point	WI		53217-4245					-		-	eipt thi							
	FEC ID number of contributing rederal political committee.	C							208.00										
	Name of Employer (for Individual) NML	Occu Svp		Memo Item															
	Receipt For: A Primary General Other (specify) ▼ I	ggregate `	Year	-to-Date ▼ 1248.00															
	Full Name of Individual (Last, First, Middle Initial) Barsch, Rebekah, B, ,	or Full Or	rgani	ization Name		Date	e of	Re	cei	ipt									
	Mailing Address N46W5455 Spring Ct					Date of Receipt													
	City	State		Zip Code		Tr	ans	acti	ion	ID :	20	18031	5193	354-6	86				
-	Cedarburg	WI		53012-2547		Amo	ount	of	Ea	ch R	lec	eipt thi	is Pe	eriod					
	FEC ID number of contributing rederal political committee.	С				91.00								0					
	Name of Employer (for Individual) NML		•	on (for Individual) ing & Sales			Me	emo	b It	em									
Ī	Receipt For:	ggregate `	Year	-to-Date 🔻															
	Primary General Other (specify)		- J -	546.00															
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Use separate schedule(s)

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	RECEIPTS						(check only one)							
			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c 15	12	17				
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	COMMITTEE (In Full) rthwestern Mutual Life Ir	nsurance	Company Federal PA	С										
	of Individual (Last, First, Middle Ini Rebekah, B, ,	tial) or Full O	rganization Name		Date of	Re	ceipt							
Mailing Add	ress N46W5455 Spring Ct				03 31 2018									
City Cedarburg		State WI	Zip Code 53012-2547						019355-6 is Period	86				
	nber of contributing ical committee.	С		Amount of Each Receipt this Period										
NML	nployer (for Individual)		ipation (for Individual) Planning & Sales		Me	emo	tem							
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 546.00											
Full Name of B. Beaulier	of Individual (Last, First, Middle Ini , Blaise, C, ,	tial) or Full O	rganization Name		Date of	Re	ceipt							
	Mailing Address 23300 Dover Line Rd						D D D 15	/ Y	2018	Y				
City Waterford		State WI	Zip Code 53185-4908						519354-8	05				
FEC ID nur	nber of contributing ical committee.	Occupation (for Individual) Vp Digital Ins & Fld Sol			Amount of Each Receipt this Period									
Name of Er NML	mployer (for Individual)				Me	emo	tem							
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 576.00											
	of Individual (Last, First, Middle Ini r, Blaise, C, ,	tial) or Full O	rganization Name		Date of	Re	ceipt							
	ress 23300 Dover Line Rd				03	/	D D D	/ Y	y y 2018	Y				
City Waterford		State WI	Zip Code 53185-4908				-		019355-8 is Period	605				
	nber of contributing ical committee.	С			<u> </u>		,	9	96.	00				
NML	nployer (for Individual)		ipation (for Individual) igital Ins & Fld Sol		Me	emo	tem							
Receipt For Prima Other		Aggregate	Year-to-Date ▼ 576.00											
SUBTOTAL o	of Receipts This Page (optional)		•	•			, .	,	283.0	00				
TOTAL This I	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:

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	EIVIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12									
				13 14 15 16 17									
	for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
\backslash	NAME OF COMMITTEE (In Full)												
/	The Northwestern Mutual Life	Insurance	Company Federal PA										
Α.	Full Name of Individual (Last, First, Middle Beer, Mitchell, C, ,	Initial) or Full C	rganization Name	Date of Receipt									
	Mailing Address 3387 Hampton Ct			03 15 Y Y Y Y Y 2018									
	City	State CA	Zip Code	Transaction ID : 2018031519206-23									
	Thousand Oaks		91362-1130	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		62.50									
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General			1									
	Other (specify)		375.00	1									
В.	Full Name of Individual (Last, First, Middle I Beer, Mitchell, C, ,	Initial) or Full C	Date of Receipt										
	Mailing Address 3387 Hampton Ct			03 31 2018									
	City	State	Zip Code	Transaction ID : 2018033019205-23									
	Thousand Oaks	CA	91362-1130	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		62.50									
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		375.00]									
	Full Name of Individual (Last, First, Middle I Bender, J, Philip, ,	Initial) or Full C	rganization Name	Date of Receipt									
	Mailing Address 70 Forest St Apt 17E			03 15 2018									
	City	State	Zip Code	Transaction ID : 2018031519206-25									
	Stamford	СТ	06901-1881	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		208.00									
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General			1									
	Other (specify)		1248.00	1									
s	UBTOTAL of Receipts This Page (optional)			333.00									
т	OTAL This Period (last page this line number	er only)	•										

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1								
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)			-								
The Northwestern Mutual Life	Insurance	Company Federal PA									
Full Name of Individual (Last, First, Middle I A. Bender, J, Philip, ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 70 Forest St			M M / D D / Y Y Y Y								
Apt 17E City	State	Zip Code	03 31 2018 Transaction ID : 2018033019205-25								
Stamford	СТ	06901-1881	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		208.00								
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
Self-Employed	Ger	neral Insurance Agent									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		1248.00]								
Full Name of Individual (Last, First, Middle I											
B. Black, Dwaan, C, ,			Date of Receipt								
Mailing Address 3520 Dumbarton Rd NW			03 / D D / Y Y Y Y 2018								
City Atlanta	State GA	Zip Code 30327-2614	Transaction ID : 2018031519206-18 Amount of Each Receipt this Period								
FEC ID number of contributing	С		42.00								
	federal political committee.										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻									
Other (specify) ▼		252,00]								
Full Name of Individual (Last, First, Middle I C. Black, Dwaan, C, ,	nitial) or Full C	organization Name	Date of Receipt								
Mailing Address 3520 Dumbarton Rd NW			03 31 2018								
City Atlanta	State GA	Zip Code 30327-2614	Transaction ID : 2018033019205-18 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00]								
SUBTOTAL of Receipts This Page (optional)			292.00								
TOTAL This Period (last page this line numbe	er only)										

SCHEDULE A (FEC Form 3X) _ _ _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

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17	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	C								
				-								
Α.	Full Name of Individual (Last, First, Middle Initia Bleakley, Garrett, J, ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 5460 Chelsea Ave			Max / D D / Y								
	City	State	Zip Code									
	La Jolla	CA	92037-7607									
	FEC ID number of contributing federal political committee.	С		125.00								
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item								
	Self-Employed		eral Insurance Agent									
	Receipt For:		Year-to-Date ▼									
	Primary General	Aggregate										
	Other (specify)	L	750.00									
в.	Full Name of Individual (Last, First, Middle Initia Bleakley, Garrett, J, ,	l) or Full O	rganization Name	Date of Receipt								
	Mailing Address 5460 Chelsea Ave			03 31 2018								
	City	State	Zip Code	Transaction ID : 2018033019205-3								
	La Jolla	CA	92037-7607	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		125.00								
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		750.00									
<u></u> С.	Full Name of Individual (Last, First, Middle Initia Blevons, Debra, , ,	l) or Full O	rganization Name	Date of Receipt								
•.	Mailing Address 165 Pine Ct			03 15 2018								
	City	State	Zip Code	Transaction ID : 2018031519206-63								
	Appleton	WI	54914-8222	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		125.00								
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item								
	Self-Employed		eral Insurance Agent									
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General		750.00									
	Other (specify)		750.00									
s	UBTOTAL of Receipts This Page (optional)			375.00								
т	OTAL This Period (last page this line number or	nly)	••••••									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, M A. Blevons, Debra, , ,	iddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 165 Pine Ct			Mom / P / Y								
City Appleton	State WI	Zip Code 54914-8222									
FEC ID number of contributing federal political committee.	C		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	1								
B. Bohannon, Timothy, John, ,											
Mailing Address 8677 Alvarado Ct											
City Inver Grove	State MN	Zip Code 55077-3121	Transaction ID : 2018031519206-4 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For:	Aggregate	Year-to-Date 🔻	-								
Other (specify) v		1248.00									
Full Name of Individual (Last, First, M C. Bohannon, Timothy, John, ,	iddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8677 Alvarado Ct			03 / D D / Y Y Y Y 2018								
City Inver Grove	State MN	Zip Code 55077-3121	Transaction ID : 2018033019205-4 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		208.00								
Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item								
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00	1								
SUBTOTAL of Receipts This Page (opti	onal)		541.00								
TOTAL This Period (last page this line	number only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

		Use separate schedule(s)			(check only one)								
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15		2 6	17		
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the	pur; ntrib	oose of	soliciting	g conti	ributio	ons		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	2									
A.	Full Name of Individual (Last, First, Middle Initi Botcher, Sandra, L, ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 10260 N Range Line C				M M / D D / Y Y Y Y 03 15 2018								
	City Mequon	State WI	Zip Code 53092	_	Transaction ID : 2018031519354-697 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						· ·	1	07.00)		
	Name of Employer (for Individual)		upation (for Individual) Distribution Development		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 642.00										
в.	Full Name of Individual (Last, First, Middle Initi Botcher, Sandra, L, ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 10260 N Range Line C					03 / 31 / 2018 Transaction ID : 2018033019355-697							
	City Mequon	State WI	Zip Code 53092								7		
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period								
	Name of Employer (for Individual) NML	Occu Vp [Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate											
С.	Full Name of Individual (Last, First, Middle Initi Brase, Jennifer, L, ,	al) or Full O	rganization Name		Date of	Re	ceipt						
	Mailing Address 12877 N Cobblestone Ct				^M 03	/	D D D 31	/ Y	201				
	City Mequon	State WI	Zip Code 53097-1812					2018033 eceipt th			4		
	FEC ID number of contributing federal political committee.	С					y			40.00)		
	Name of Employer (for Individual)		upation (for Individual) 0&I And McMs		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00										
	UBTOTAL of Receipts This Page (optional)			-			,		2	254.00)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

IT.			Use separate schedule(s)				(check only one)							
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		1 1a		11b	11c	12					
	y information copied from such Reports and Sta for commercial purposes, other than using the n													
	NAME OF COMMITTEE (In Full)													
\rangle	The Northwestern Mutual Life Ins	surance	Company Federal PA	С										
A.	Full Name of Individual (Last, First, Middle Initia Byrne, Michael, T, ,	l) or Full O	Drganization Name		Date of	Ree	ceipt							
	Mailing Address 395 La Casa Via				03 15 / Y Y Y Y 2018									
	City Walnut Creek	State CA	Zip Code 94598-4842		Transaction ID : 2018031519206-16 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С					-		208.0	00				
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1248.00											
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Byrne, Michael, T, ,						ceipt							
	Mailing Address 395 La Casa Via				м м 03	/	31	/ Y	2018	Y				
	City Walnut Creek	StateZip CodeCA94598-4842					-		019205-1 is Period	6				
	FEC ID number of contributing federal political committee.	C			208.00									
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent												
	Receipt For:	Aggregate Year-to-Date ▼												
	Other (specify) ▼		1248.00											
C.	Full Name of Individual (Last, First, Middle Initia Callanan, Susan, W, ,	l) or Full O	Drganization Name		Date of	Ree	ceipt							
	Mailing Address 2736 N Shepard Ave				м м 03	1	D D D 31	/ Y	Y Y 2018	Y				
	City Milwaukee	State WI	Zip Code 53211-3852						019355-9 iis Period	09				
	FEC ID number of contributing federal political committee.	С					, .	- y	34.0	00				
	Name of Employer (for Individual) NML		cupation (for Individual) Public Policy		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 204.00	1										
s	UBTOTAL of Receipts This Page (optional)			•			,		450.0	00				
т	OTAL This Period (last page this line number or	ıly)		•			,							

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mand a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 1 erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Middle I A. Carter, Michael, G, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Carter, Michael, G, ,											
Mailing Address 7322 N Mohawk Rd			Date of Receipt									
City Fox Point	State WI	Zip Code 53217-3454	Transaction ID : 2018031519354-809 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) NML		upation (for Individual) & Cfo	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Middle I B. Carter, Michael, G, ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 7322 N Mohawk Rd			03 31 2018									
City Fox Point	State WI	Zip Code 53217-3454	Transaction ID : 2018033019355-809 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) NML		upation (for Individual) 9 & Cfo	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Middle I C. Castronovo, Greg, , ,	nitial) or Full C	rganization Name	Date of Receipt									
Mailing Address 317 Evening Star Ln			03 / D D / Y Y Y Y 2018									
City Bozeman	State MT	Zip Code 59715-7738	Transaction ID : 2018031519206-33 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00	1									
SUBTOTAL of Receipts This Page (optional)			458.00									
TOTAL This Period (last page this line number	er only)											

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

FOR LINE NUMBER:

(check only one)

PAGE 17 OF

		Detailed Summary Page		• 11a		11b	110	12						
Any information copied from such Reports														
or for commercial purposes, other than usir														
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	C											
Full Name of Individual (Last, First, Mido A. Castronovo, Greg, , ,	lle Initial) or Full C	Organization Name		Date o	of R	eceipt								
Mailing Address 317 Evening Star Ln				03	2018	Y								
City	State	Zip Code		Tran	sac	tion ID	: 201803	3019205-	33					
Bozeman	MT	59715-7738		Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C			<u> </u>		-	-	42	.00					
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		N	/lem	o Item								
Receipt For:	Aggregate	Year-to-Date V												
Other (specify) ▼		252.00]											
Full Name of Individual (Last, First, Mido B. Christensen, Scott, G, ,	lle Initial) or Full C	Organization Name		Date o										
Mailing Address 45 Middle Rd								2018	Y					
City	State	Zip Code												
Portsmouth	NH	03801-4802		Amour	nt of	f Each	Receipt t	nis Perioo	d					
FEC ID number of contributing federal political committee.	C	C					75.00							
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent					Memo Item							
Receipt For:	Aggregate	Year-to-Date V												
Other (specify)		, 450.00	1											
Full Name of Individual (Last, First, Mido C. Christensen, Scott, G, ,	lle Initial) or Full C	Organization Name		Transaction ID : 2018033019205-33 Amount of Each Receipt this Period 42.0 Memo Item Date of Receipt 03 15 2018 Transaction ID : 2018031519206-31 Amount of Each Receipt this Period										
Mailing Address 45 Middle Rd					Л				Y					
City	State NH	Zip Code 03801-4802		Tran	sac	tion ID	: 201803	3019205-	31					
Portsmouth		03001-4002		Amour	nt of	f Each	Receipt t	nis Perioo	t de la companya de l					
FEC ID number of contributing federal political committee.	C			Ľ.		y	- J	75	.00					
Name of Employer (for Individual)	Occ	upation (for Individual)		Ν	/lem	o Item								
Self-Employed	Ger	neral Insurance Agent												
Receipt For:	Aggregate	Year-to-Date V												
Other (specify)		450.00												
SUBTOTAL of Receipts This Page (option	al)			<u> </u>		, ,	5	192	.00					
TOTAL This Period (last page this line num	mber only)													

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE 18 OF

			(check only one)										
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a 13		11b	11c		2	47		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		ose of		g conti				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	2									
A.	Full Name of Individual (Last, First, Middle Initia Christophersen, Eric, P, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt						
	Mailing Address N25W27286 Fairmount Ct				03 15 2018								
	City Pewaukee	State WI	Zip Code 53072-4962	Transaction ID : 2018031519354-593 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>			-	_	95.00)		
	Name of Employer (for Individual) NML		upation (for Individual) Strat Phil & Comm Rel		M	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate											
в.	Full Name of Individual (Last, First, Middle Initia Christophersen, Eric, P, ,	al) or Full Oi	organization Name		Date of	Re	ceipt						
	Mailing Address N25W27286 Fairmount Ct				03	1	D D 31	/ Y	2018	8			
	City Pewaukee	State Zip Code WI 53072-4962						2018033 eceipt th			3		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Vp Strat Phil & Comm Rel				Amount of Each Receipt this Period							
	Name of Employer (for Individual) NML					emo	Item						
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify) ▼												
C.	Full Name of Individual (Last, First, Middle Initia Condrey, R, Michael, ,	al) or Full O	organization Name		Date of	Re	ceipt						
	Mailing Address 907 Williamson Dr				03	/	D D 15	/ Y	2018				
	City Raleigh	State NC	Zip Code 27608-2307	_			-	2018031 eceipt th			_		
	FEC ID number of contributing federal political committee.	С					,	,		208.00)		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		М	emo	Item						
Receipt For: Aggreg Primary General Other (specify)			Year-to-Date ▼ 1248.00										
s	UBTOTAL of Receipts This Page (optional)		•				y .	. ,	3	98.00)		
т	OTAL This Period (last page this line number or	nly)		_			-			-			

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

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PAGE 19 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
ILEIVILLED RECEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, M A. Condrey, R, Michael, ,	/liddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 907 Williamson Dr			M M / D D / Y Y Y Y Y 03 31 2018									
City Raleigh	State NC	Zip Code 27608-2307	Transaction ID : 2018033019205-1 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, M B. Cruse, Tait, , ,	/iddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2961 Belclaire Dr			03 15 2018 Transaction ID : 2018031519206-22 Amount of Each Receipt this Period									
City Frisco	State TX	Zip Code 75034-5969										
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Other (specify) V		1248.00										
Full Name of Individual (Last, First, M C. Cruse, Tait, , ,	Aiddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2961 Belclaire Dr			03 / D D / Y Y Y Y 2018									
City Frisco	State TX	Zip Code 75034-5969	Transaction ID : 2018033019205-22 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]									
SUBTOTAL of Receipts This Page (op	tional)		624.00									
TOTAL This Period (last page this line	number only)											

SCHEDULE A (FEC Form 3X) -

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) The Northwestern Mutua	al Life Insurance	Company Federal PA	C										
Full Name of Individual (Last, First, Cunningham, Brian, R, ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6251 S Billings Wa	у		03 15 2018										
City Centennial	State CO	Zip Code 80111-6009	Transaction ID : 2018031519206-15 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		125.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]										
Full Name of Individual (Last, First, B. Cunningham, Brian, R , ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6251 S Billings Wa	/		03 31 2018										
City Centennial	State CO	Zip Code 80111-6009	Transaction ID : 2018033019205-15 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		125.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]										
Full Name of Individual (Last, First, C. Dodd, Paul, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 7078 E Genesee S	t		03 15 2018										
City Fayetteville	State NY	Zip Code 13066-1123	Transaction ID : 2018031519206-19 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		208.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]										
SUBTOTAL of Receipts This Page (c	ptional)		458.00										
TOTAL This Period (last page this lin	e number only)												

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

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PAGE 21 OF

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
Ar or	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and a	ay not be sold or used by any p address of any political committe	e to solicit contributions from such committee.							
	The Northwestern Mutual Life In	surance	Company Federal PA	С							
Α.	Full Name of Individual (Last, First, Middle Initi Dodd, Paul, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 7078 E Genesee St			03 31 2018							
	City Fayetteville	State NY	Zip Code 13066-1123	Transaction ID : 2018033019205-19 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]							
B	Full Name of Individual (Last, First, Middle Initi Dugal, Steven, , ,	al) or Full O	organization Name	Date of Receipt							
υ.	Mailing Address 9 Falcon Dr			03 15 2018							
	City Mandeville	State LA	Zip Code 70471-2952	Transaction ID : 2018031519206-20							
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼ 1248.00]							
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Dugal, Steven, , ,	al) or Full O	organization Name	Date of Receipt							
	Mailing Address 9 Falcon Dr			03 / D D / Y Y Y Y 2018							
	City Mandeville	State LA	Zip Code 70471-2952	Transaction ID : 2018033019205-20 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]							
\vdash	UBTOTAL of Receipts This Page (optional)			624.00							

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
The Northwestern Mutual Life	Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Middle Dunn, John, E, ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4656 N Wilshire Rd			03 / D D / Y Y Y Y 03 15 2018									
City Whitefish Bay	State WI	Zip Code 53211-1260	Transaction ID : 2018031519354-534 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		55.00									
Name of Employer (for Individual) NML		upation (for Individual) & Ipas Cnsl	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00]									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
B. Dunn, John, E, , Mailing Address 4656 N Wilshire Rd			Date of Receipt 03 31 2018									
City Whitefish Bay	State Zip Code WI 53211-1260		Transaction ID : 2018033019355-534									
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
Name of Employer (for Individual) NML		upation (for Individual) & Ipas Cnsl	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00]									
Full Name of Individual (Last, First, Middle C. Erhard, Keith, A, ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 4807 Timberwood Ct			03 / D D / Y Y Y Y 03 15 2018									
City W Des Moines	State IA	Zip Code 50265-5447	Transaction ID : 2018031519206-9 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00]									
SUBTOTAL of Receipts This Page (optional)			152.00									
TOTAL This Period (last page this line numb	per only)											

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 23 OF

	•	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) The Northwestern Mut	ual Life Insurance	Company Federal PA	С										
Full Name of Individual (Last, Fir A. Erhard, Keith, A, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 4807 Timberwoo	d Ct		03 / 1 / 2018										
City W Des Moines	State IA	Zip Code 50265-5447	Transaction ID : 2018033019205-9 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		42.00										
Name of Employer (for Individual Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]										
Full Name of Individual (Last, Fire B. Ertz, John, C, ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Ertz, John, C, ,												
Mailing Address 18235 Shaker Bl			03 / D D / Y Y Y Y 2018										
City Shaker Hts	State OH	Zip Code 44120-1754	Transaction ID : 2018031519206-8 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		208.00										
Name of Employer (for Individual Self-Employed	, 	upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) V		1248.00]										
Full Name of Individual (Last, Fir. C. Ertz, John, C, ,		rganization Name	Date of Receipt										
Mailing Address 18235 Shaker B	1		03 / D D / Y Y Y Y 03 31 2018										
City Shaker Hts	State OH	Zip Code 44120-1754	Transaction ID : 2018033019205-8 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		208.00										
Name of Employer (for Individual Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]										
SUBTOTAL of Receipts This Page	(optional)		458.00										
TOTAL This Period (last page this	line number only)												

SCHEDULE A (FEC Form 3X) _____ _____ _

Use separate schedule(s)

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PAGE 24 OF

			Use separate schedule(s)	(check only one)										
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 13		11b 14	11c 15	12 16	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the n			rson for the		oose of	soliciting	contribut	ions					
$\overline{\ }$	NAME OF COMMITTEE (In Full)													
	The Northwestern Mutual Life Ins	urance	Company Federal PAC)										
A.	Full Name of Individual (Last, First, Middle Initia Franczyk, Lance, P, ,	l) or Full O	rganization Name	Date o	of Re	ceipt								
	Mailing Address 2224 E 24th St			03	И /	15) / Y	2018	Y					
	City Tulsa	State OK	Zip Code 74114-2912					519206-3	5					
	FEC ID number of contributing			Amour			leceipt th		_					
	federal political committee.	C				,		42.(00					
	Name of Employer (for Individual)	Оссі	upation (for Individual)	N	/lemo	Item								
	Self-Employed	Gen	eral Insurance Agent	_										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) V		252.00											
B.	Full Name of Individual (Last, First, Middle Initia Franczyk, Lance, P, ,	l) or Full O	rganization Name	Date of	of Re	ceipt								
	Mailing Address 2224 E 24th St			03	03 31 2018									
	City	State	Zip Code	Tran	Transaction ID : 2018033019205-35									
	Tulsa	OK	74114-2912	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) General Insurance Agent			42.00									
	Name of Employer (for Individual) Self-Employed				/lemo	Item								
	Receipt For:	Aggregate												
	Other (specify) ▼		252.00											
			-y											
C.	Full Name of Individual (Last, First, Middle Initia Frieling, Robert, T, ,	I) or Full O	rganization Name	Date o	of Re	ceipt								
	Mailing Address 4 Windy Hill Ln			03	/ 1	15) / Y	2018	Y					
	City	State	Zip Code	Tran	sacti	on ID :	2018031	519206-7						
	Wayland	MA	01778-2613	Amour	nt of	Each F	Receipt th	is Period						
	FEC ID number of contributing federal political committee.	С				9	,	208.0	00					
	Name of Employer (for Individual)	Оссі	upation (for Individual)		Лето	Item								
	Self-Employed Receipt For:		eral Insurance Agent	_										
	Primary General	Aggregate	Year-to-Date ▼											
	Other (specify)		1248.00											
s	UBTOTAL of Receipts This Page (optional)							292.0	0					
	OTAL This Period (last page this line number or					,								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 25 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mic A. Frieling, Robert, T, ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4 Windy Hill Ln			03 31 2018						
City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2018033019205-7 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		208.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00	1						
Full Name of Individual (Last, First, Mic Gerend, Timothy, J, ,	Date of Receipt								
Mailing Address 5421 N Idlewild Ave	01-1-	7. 0.4	03 / D D / Y Y Y Y 2018						
City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID : 2018031519354-528 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		136.00						
Name of Employer (for Individual) NML		upation (for Individual) Distrib Perform & Dev	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 816.00]						
Full Name of Individual (Last, First, Mic C. Gerend, Timothy, J, ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 5421 N Idlewild Ave			03 / D D / Y Y Y Y 03 31 2018						
City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID : 2018033019355-528 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		136.00						
Name of Employer (for Individual) NML		upation (for Individual) Distrib Perform & Dev	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 816.00]						
SUBTOTAL of Receipts This Page (optio	nal)		480.00						
TOTAL This Period (last page this line n	umber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

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PAGE 26 OF

			Detailed Summary Page	×	-			11	- F		11c		12										
An	y information copied from such Reports and Statemen	nts ma	ay not be sold or used by any r	berson ⁻	13 for th	е р.	Jrp	14 005		sc	15 Diciting		16 tributi	17 ons									
or	for commercial purposes, other than using the name a	and a	address of any political committe	e to so	licit c	ontr	ribi	utio	ons f	iror	m such	ı com	nmitte	е.									
\backslash	NAME OF COMMITTEE (In Full)																						
$\Big\rangle$	The Northwestern Mutual Life Insurar	nce	Company Federal PA	С																			
Α.	Full Name of Individual (Last, First, Middle Initial) or F Givler, Walter, M, ,	Individual (Last, First, Middle Initial) or Full Organization Name Iter, M, ,										Date of Receipt											
	Mailing Address 2036 N Prospect Ave				03 15 / Y Y Y Y 03 15																		
	City Stat	te	Zip Code	Transaction ID : 2018031519354-523																			
	Milwaukee WI		53202-1260	Amount of Each Receipt this Period																			
	FEC ID number of contributing federal political committee.				46.00																		
	Name of Employer (for Individual) NML	Occupation (for Individual) Vp Solvency Policy						lte	em														
	Receipt For: Aggre	enate	Year-to-Date V																				
	Primary General	Jguio		11.																			
	Other (specify) V	_	276.00	4																			
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Givler, Walter, M, ,						Date of Receipt																
	Mailing Address 2036 N Prospect Ave							03 31 2018															
	City Stat	te	Zip Code		Trar	nsac	ctic	on	ID :	20	18033	0193	55-52	3									
	Milwaukee WI	WI 53202-1260						Transaction ID : 2018033019355-523 Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri						46.00															
	Name of Employer (for Individual) NML		cupation (for Individual) Solvency Policy		Memo Item																		
	Receipt For: Aggre	egate	Year-to-Date V																				
	Primary General Other (specify) ▼		, 276.00	1																			
с.	Full Name of Individual (Last, First, Middle Initial) or F Glover, Mitchell, B, ,	Full O	Drganization Name		Date	of F	Red	cei	ipt														
	Mailing Address 6700 Old Darby Trl NE				[™] 03		/		D D 15		/ Y	201	18 [°]	Y									
	City Stat		Zip Code		Tra	nsad	cti	ion	ID :	20	18031	5192	206-6										
	Ada MI		49301-8360		Amou	int c	of I	Ea	ch R	lec	eipt th	is Pe	eriod										
	FEC ID number of contributing federal political committee.				<u> </u>			,		1	9	2	208.0	0									
	Name of Employer (for Individual)	Occi	upation (for Individual)		п.	Men	no) Ite	em														
	Self-Employed		neral Insurance Agent																				
	Receipt For: Agare	1	Year-to-Date V																				
	Primary General	guio		11.																			
	Other (specify)		1248.00																				
S	UBTOTAL of Receipts This Page (optional)							9		T	9		300.0	0									
т	OTAL This Period (last page this line number only)			•				1			-												

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

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PAGE 27 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and Sta for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In:	surance	Company Federal PAC										
<u> </u>	Full Name of Individual (Last, First, Middle Initia Glover, Mitchell, B, ,	al) or Full C	Drganization Name	Date of Receipt									
	Mailing Address 6700 Old Darby Trl NE			03 31 2018									
	City Ada	State MI	Zip Code 49301-8360	Transaction ID : 2018033019205-6 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		208.00									
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1248.00										
В.	Full Name of Individual (Last, First, Middle Initia Goes, Thomas, J, ,	al) or Full C	Drganization Name	Date of Receipt									
	Mailing Address 1526 Harston Ave			03 15 2018									
	City Orlando	State FL	Zip Code 32814-6700	Transaction ID : 2018031519206-57 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		42.00									
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.00										
с.	Full Name of Individual (Last, First, Middle Initia Goes, Thomas, J, ,	al) or Full C	Drganization Name	Date of Receipt									
	Mailing Address 1526 Harston Ave			03 / D D / Y Y Y Y 03 31 2018									
	City Orlando	State FL	Zip Code 32814-6700	Transaction ID : 2018033019205-57 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		42.00									
	Name of Employer (for Individual) Self-Employed Receipt For:		cupation (for Individual) neral Insurance Agent	Memo Item									
	Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 252.00										
s	UBTOTAL of Receipts This Page (optional)		•	292.00									
Т	OTAL This Period (last page this line number o	nly)											

Use separate schedule(s)

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PAGE 28 OF

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	IVILLED RECEIPIS		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	Г	17			
	information copied from such Reports and Sta or commercial purposes, other than using the n				or the		pose of	soliciting	g contri	ibutio	ons			
	IAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PA	С										
	Full Name of Individual (Last, First, Middle Initia Gores, Patrick, K, ,	l) or Full Oi	rganization Name	[Date of	Re	ceipt							
Ν	Nailing Address 2702 28th Ave S				03 15 2018									
	Dity Fargo	State ND	Zip Code 58103-5045					2018031 eceipt th						
	EC ID number of contributing ederal political committee.	С						1 45		42.00	,			
	lame of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	tem							
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00											
В	ull Name of Individual (Last, First, Middle Initia Gores, Patrick, K, , <i>I</i> ailing Address 2702 28th Ave S	l) or Full Oi	rganization Name		Date of	Re		1 1	1/	V V	_			
_	Dity	State Zip Code					31	J L	2018	3				
	Fargo	ND	58103-5045	A	Transaction ID : 2018033019205-2 Amount of Each Receipt this Period									
	EC ID number of contributing ederal political committee.	С			42.00									
	Name of Employer (for Individual) Self-Employed	Occu Gen		Me	emo	tem								
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00											
	Full Name of Individual (Last, First, Middle Initia Goris, Tom, , , JR	l) or Full O	rganization Name		Date of	Re	ceipt							
N	Nailing Address 4735 Wellington Dr				^M 03	1	D D D 15	/ Y	2018					
	City Long Grove	State IL	Zip Code 60047-5223					2018031 eceipt th						
	EC ID number of contributing ederal political committee.	С					y .	,	20	08.00				
Self-Employed G			upation (for Individual) eral Insurance Agent		M	emc	tem Item							
ŀ	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00											
-	BTOTAL of Receipts This Page (optional)						5	, ,	29	92.00				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

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			Use separate schedule(s)	(check only one)									
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a		11b	11c	12	<u> </u>			
	y information copied from such Reports and Sta for commercial purposes, other than using the r												
	NAME OF COMMITTEE (In Full)		·····										
\rangle	The Northwestern Mutual Life Ins	surance	Company Federal PAC)									
Α.	Full Name of Individual (Last, First, Middle Initia Goris, Tom, , , JR	al) or Full O	rganization Name	D	ate of	Re	ceipt						
	Mailing Address 4735 Wellington Dr			03 / D D / Y Y Y Y Y 03 31 2018									
	City Long Grove	State IL	Zip Code 60047-5223						019205-1 nis Period	7			
FEC ID number of contributing federal political committee.							7		208.	00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00										
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grabner, Todd, Matthew, ,						ceipt						
	Mailing Address 3086 E Silver Hawk Dr			03 15 / Y Y Y Y 2018									
	City Holladay	State UT	Zip Code 84121-1572						519206-6 nis Period	9			
	FEC ID number of contributing federal political committee.	С		125.00									
	Name of Employer (for Individual) Self-Employed	Occi Ger		Me	emo	Item							
	Receipt For:	Aggregate	Year-to-Date V										
	Other (specify) ▼	Primary General Other (specify) ▼ 750.00											
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name . Grabner, Todd, Matthew, ,						ceipt						
	Mailing Address 3086 E Silver Hawk Dr				03 ^M	/	D D D 31	/ Y	2018	Y			
	City Holladay	State UT	Zip Code 84121-1572						3019205-6 nis Period	9			
	FEC ID number of contributing federal political committee.	С					y	, ,	125.	00			
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent			Me	emo	Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00										
s	UBTOTAL of Receipts This Page (optional)						9	. ,	458.0	00			
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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions be to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	fe Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Mide Grogan, John, M, ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 7860 N Club Cir			03 / D D / Y Y Y Y 2018									
City Fox Point	State WI	Zip Code 53217-2939	Transaction ID : 2018031519354-862 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) NML		upation (for Individual) Ins Prod Client	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Mide B. Grogan, John, M, ,	Date of Receipt											
Mailing Address 7860 N Club Cir	03 / D D / Y Y Y Y 2018											
Fox Point	State WI	Zip Code 53217-2939	Transaction ID : 2018033019355-862 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) NML		upation (for Individual) Ins Prod Client	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Mide C. Gross, Stephen, , ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 6 Twin Springs Ln			03 / D D / Y Y Y Y 2018									
City Saint Louis	State MO	Zip Code 63124-1139	Transaction ID : 2018031519206-36 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		125.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]									
SUBTOTAL of Receipts This Page (option	al)		541.00									
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PAGE 31 OF

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Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	I ay not be sold or us ddress of any politic	ed by any pe al committee	erson e to s	for the	pur ntrib	pose of	soliciting	g conti	ributic	ons				
\setminus	NAME OF COMMITTEE (In Full)		o –		~											
	The Northwestern Mutual Life In	surance	Company Fee	deral PAC	;											
<u>/</u>	Full Name of Individual (Last, First, Middle Initia	ial) or Full O	rganization Name													
Α.	Gross, Stephen, , ,				_	Date of Receipt										
	Mailing Address 6 Twin Springs Ln			03 31 2018												
	City	State Zip Code					act	ion ID :	2018033	1.00	-					
	Saint Louis	MO	63124-1139		_	Amoun	t of	Each R	eceipt th	is Pei	riod					
	FEC ID number of contributing	С								1	125.00)				
	federal political committee.	U						-	-	-	- 493					
	Name of Employer (for Individual)		upation (for Individua	,		M	emo	ltem								
	Self-Employed Receipt For:		eral Insurance Agen	t												
	Primary General	Aggregate	Year-to-Date ▼													
	Other (specify) V			750.00												
					<u> </u>											
D	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guay, Thomas, C, ,						f Do	opint								
р.	Mailing Address W73N377 Mulberry Ave			Date of Receipt												
				03 15 2018												
	City	State	Zip Code			Trans	acti	ion ID : :	2018031	51935	54-54(6				
	Cedarburg	WI	53012-2648			Amoun	t of	Each R	eceipt th	is Per	riod					
	FEC ID number of contributing federal political committee.	С	88.00													
	Name of Employer (for Individual) NML	Occupation (for Individual) Vp Risk Selection Strat				Memo Item										
	Receipt For:	Aggregate Year-to-Date ▼														
	Primary General Other (specify) ▼															
<u> </u>	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guay, Thomas, C, ,						f Re	eceipt								
	Mailing Address W73N377 Mulberry Ave					M M	/	D D	/ Y	Y						
	City	State	Zip Code													
	Cedarburg	WI	53012-2648			Transaction ID : 2018033019355-546 Amount of Each Receipt this Period										
	FEC ID number of contributing			-		Amoun						_				
	federal political committee.	С						,			88.00)				
	Name of Employer (for Individual)	Occupation (for Individual)				М	emo	b Item								
	NML		Risk Selection Strat	,												
	Receipt For:	Aggregate	Year-to-Date 🔻													
	Other (specify)			528.00												
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т	OTAL This Period (last page this line number of	only)						_								

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PAGE 32 OF

IT	EMIZED RECEIPTS			for each category of the Detailed Summary Page	ì ì	11a		-) 11b 14	11c	12	17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements ma ame and a	ay i iddi	not be sold or used by any peress of any political committee	rson to so	for the plicit co	purp ntribu	ose of itions	solicitin	g contrib ch commi	utions ttee			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	С	ompany Federal PAC)									
Α.	Full Name of Individual (Last, First, Middle Initial Guinan, Stephen, T, , Mailing Address 126 Waverly Cir	l) or Full O)rga	nization Name	Date of Receipt									
	City Phoenixville	State PA		Zip Code 19460-2500						1519206-				
	FEC ID number of contributing federal political committee.	С			_	Amoun					.00			
	Name of Employer (for Individual) Self-Employed Receipt For:	nera	tion (for Individual) al Insurance Agent ar-to-Date ▼		M	emo	ltem							
	Other (specify) V		7	252.00										
В.	Full Name of Individual (Last, First, Middle Initial Guinan, Stephen, T, ,	l) or Full O)rga	nization Name		Date o	f Rec	ceipt						
	Mailing Address 126 Waverly Cir	State	State Zip Code					03 / D D / Y Y Y Y 2018						
	Phoenixville	PA				Transaction ID : 2018033019205-30 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00										
	Name of Employer (for Individual) Self-Employed		•	ation (for Individual) al Insurance Agent		M	emo	ltem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Ye	ar-to-Date ▼ 252.00										
C.		l) or Full O)rga	nization Name		Date o	f Rec	ceipt						
	Mailing Address 261 Moser St	-				03	/	D 15		2018	Y			
	City Moscow	State ID		Zip Code 83843-9264						1519206- his Perio				
	FEC ID number of contributing federal political committee.				<u> </u>		,	. ,	42	.00				
	Self-Employed Gene			tion (for Individual) I Insurance Agent		N	lemo							
	Receipt For: Primary General Other (specify)	Primary General General												
s	UBTOTAL of Receipts This Page (optional)			•				,	. ,	126	.00			
т	OTAL This Period (last page this line number on	ly)		••••••										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual I	_ife Insurance	Company Federal PA	С									
Full Name of Individual (Last, First, Min A. Hanson, Paul, L, ,	ddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 261 Moser St			03 31 2018									
City Moscow	State ID	Zip Code 83843-9264	Transaction ID : 2018033019205-32 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]									
Full Name of Individual (Last, First, Mi B. Hempstead, Gerard, M, ,	ddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 49 W Walling Dr												
City Creve Coeur	State MO	Zip Code 63141-7371	Transaction ID : 2018031519206-47 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		125.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]									
Full Name of Individual (Last, First, Mic. Hempstead, Gerard, M, ,	ddle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 49 W Walling Dr			03 / D D / Y Y Y Y 2018									
City Creve Coeur	State MO	Zip Code 63141-7371	Transaction ID : 2018033019205-47 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		125.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]									
SUBTOTAL of Receipts This Page (optic	onal)		292.00									
TOTAL This Period (last page this line n	umber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 34 OF

	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or for commercial purposes, other than usin			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	С									
Full Name of Individual (Last, First, Mide A. Heurung, Mark, J, ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3315 Graham Hill Rd			M M / D D / Y Y Y Y 03 15 2018									
City Orono	State MN	Zip Code 55356-5501	Transaction ID : 2018031519206-29 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Mide B. Heurung, Mark, J, , Mailing Address 3315 Graham Hill Rd	Date of Receipt											
City	State	Zip Code	03 31 2018 Transaction ID : 2018033019205-29									
Orono	MN	55356-5501	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]									
Full Name of Individual (Last, First, Mide C. Holter, Steve, H, ,	dle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 11390 N Creekside Ct			03 / D D / Y Y Y Y Y 2018									
City Mequon	State WI	Zip Code 53092-4377	Transaction ID : 2018031519206-39 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]									
SUBTOTAL of Receipts This Page (option	al)		624.00									
TOTAL This Period (last page this line nu	mber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 35 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions are to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Middle Holter, Steve, H, ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11390 N Creekside Ct			03 / D D / Y Y Y Y 03 31 2018								
City Mequon	State WI	Zip Code 53092-4377	Transaction ID : 2018033019205-39 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, First, Middle Iodice, Scott , , , Mailing Address 1930 Old Court Rd	Date of Receipt										
City	State	Zip Code	03 15 2018 Transaction ID : 2018031519206-12								
Ruxton	MD	21204-1849	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]								
Full Name of Individual (Last, First, Middle C. Iodice, Scott, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1930 Old Court Rd			03 / D D / Y Y Y Y Y 03 31 2018								
City Ruxton	State MD	Zip Code 21204-1849	Transaction ID : 2018033019205-12 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]								
SUBTOTAL of Receipts This Page (optional			458.00								
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 36 OF

ITEMIZED RECEIPTS			Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page	× 1 ⁴	-	11b 14	11c	12	Γ	17			
	y information copied from such Reports and Si for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC)									
Α.	Full Name of Individual (Last, First, Middle Init Jahnke, Nicholas, E, ,	rganization Name	Dat	e of F	Receipt								
Mailing Address 23702 Champe Ford Rd					03 / D D / Y Y Y Y 03 31 2018								
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID : 2018033019355-776 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				-yr- 1	1.95	3	7.00				
	Name of Employer (for Individual) NML		upation (for Individual) ional Director		Mer	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 222.00										
в.	Full Name of Individual (Last, First, Middle Init Jansky, Meg, E, , Mailing Address 4611 N Wildwood Ave	ial) or Full O	rganization Name	M	e of F	Receipt		2018	Y	1			
	City Whitefish Bay	State WI	Zip Code 53211-1123			ction ID :							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period									
	Name of Employer (for Individual) NML		upation (for Individual) Field Integration	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 270.00										
С.	Full Name of Individual (Last, First, Middle Init Jansky, Meg, E, ,	ial) or Full O	rganization Name	Dat	e of F	Receipt							
	Mailing Address 4611 N Wildwood Ave	01-1-	- L	03 / D D / Y Y Y Y 03 31 2018									
	City Whitefish Bay	State WI	Zip Code 53211-1123			ction ID : of Each F)			
	FEC ID number of contributing federal political committee.	С				y .	. ,	4	5.00				
	Name of Employer (for Individual) NML		upation (for Individual) Field Integration		Mer	no Item							
	Receipt For: Primary General Other (specify)												
⊢	UBTOTAL of Receipts This Page (optional)					y .	· ·	12	7.00				

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Middle Joelson, Ronald, P, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1918 E Lafayette Pl			03 15 / Y Y Y Y 2018							
City Milwaukee	State WI	Zip Code 53202-1395	Transaction ID : 2018031519354-452 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		200.00							
Name of Employer (for Individual) NML		upation (for Individual) & Cio	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00]							
Full Name of Individual (Last, First, Middle 3. Joelson, Ronald, P, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1918 E Lafayette Pl			03 31 2018							
City Milwaukee	State WI	Zip Code 53202-1395	Transaction ID : 2018033019355-452 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		200.00							
Name of Employer (for Individual) NML		upation (for Individual) & Cio	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00]							
Full Name of Individual (Last, First, Middle C. Jones, Todd, M, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address W252N4956 Aberdeen Dr			03 / D D / Y Y Y Y 03 15 2018							
City Pewaukee	State WI	Zip Code 53072-1351	Transaction ID : 2018031519354-671 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		118.00							
Name of Employer (for Individual) NML		upation (for Individual) President-Cntrl	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 708.00]							
SUBTOTAL of Receipts This Page (optional).			518.00							
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form 3X) - DEAEIDTA

Use separate schedule(s)

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			Use separate schedule(s)			(check only one)							
			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c	12	17			
	information copied from such Reports and Stat or commercial purposes, other than using the n				for the		pose of	f soliciting	g contribu	tions			
	IAME OF COMMITTEE (In Full)												
/	The Northwestern Mutual Life Ins	urance	Company Federal PAC	;									
	Full Name of Individual (Last, First, Middle Initial Jones, Todd, M, ,) or Full Or	Organization Name		Date of	Re	eceipt						
M	Aailing Address W252N4956 Aberdeen Dr				м м 03	/	31	D / Y	2018	Y			
	City Pewaukee	State WI	Zip Code 53072-1351						019355-6 nis Period				
	EC ID number of contributing ederal political committee.	С			Amount	U			118. 118.				
			upation (for Individual) e President-Cntrl		Me	emo	ttem						
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 708.00										
	Full Name of Individual (Last, First, Middle Initial Kelley, Shawn, F, ,) or Full Or	Organization Name		Date of	Re	eceipt						
-	Aailing Address 7812 Remington Rd					03 15 2018							
	Dity Montgomery	State OH	Transaction ID : 2018031519206-53 Amount of Each Receipt this Period										
F	EC ID number of contributing ederal political committee.	C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date 750.00			125.00								
	Name of Employer (for Individual) Self-Employed				Me	emo	tem						
F	Receipt For: Primary General Other (specify) ▼												
	Full Name of Individual (Last, First, Middle Initial Kelley, Shawn, F, ,) or Full Or	Organization Name		Date of	Re	eceipt						
Ν	Aailing Address 7812 Remington Rd				м м 03	/	D 31		2018	Y			
	City Montgomery	State OH	Zip Code 45242-7130						3019205-5 nis Period				
F	EC ID number of contributing ederal political committee.	С				U	,		125.				
Ş	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	o Item						
F	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00										
su	BTOTAL of Receipts This Page (optional)						,	9	368.	00			
то	TAL This Period (last page this line number on	ly)	••••••	-			-						

Use separate schedule(s)

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			Use separate schedule(s)			(check only one)						
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12		17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		oose of	soliciting	contrib			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
A.	Full Name of Individual (Last, First, Middle Initia Kemelgor, Troy, B, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 7495 Bridlespur Ln				м м 03	/	D D 15	/ Y	y y 2018	Y		
	City Delaware	State OH	Zip Code 43015-8613					2018031 eceipt th				
	FEC ID number of contributing federal political committee.	C						-	42	2.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00										
в.	Full Name of Individual (Last, First, Middle Initia Kemelgor, Troy, B, ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 7495 Bridlespur Ln	State Zip Code			03 / D D / Y Y Y Y Y 2018							
	City Delaware	State OH	-				2018033					
	FEC ID number of contributing federal political committee.	OH 43015-8613			Amount of Each Receipt this Period							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	1									
с.	Full Name of Individual (Last, First, Middle Initia Kiecker, David, Daniel, ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 11696 Approach Blvd				03 ^M	1	D D D 15	/ Y	2018 [°]	Y		
	City Fishers	State IN	Zip Code 46037-4146					2018031 eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	,	208	8.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		M	emo	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00									
s	UBTOTAL of Receipts This Page (optional)			•			,	,	292	2.00		
т	OTAL This Period (last page this line number or	וy)	••••••	•						-		

Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIPIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	ife Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mide A. Kiecker, David, Daniel, ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 11696 Approach Blvd			M M / D D / Y Y Y Y 03 31 2018						
City Fishers	State IN	Zip Code 46037-4146	Transaction ID : 2018033019205-61 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		208.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]						
Full Name of Individual (Last, First, Mide B. Koch, William, S, ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4645 Swilcan Bridge Ln	S		03 / D D / Y Y Y Y Y 2018						
City Jacksonville	State FL	Zip Code 32224-5621	Transaction ID : 2018031519206-5 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		125.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]						
Full Name of Individual (Last, First, Mide C. Koch, William, S, ,	dle Initial) or Full C	rganization Name	Date of Receipt						
Mailing Address 4645 Swilcan Bridge Ln			03 / D D / Y Y Y Y 03 31 2018						
City Jacksonville	State FL	Zip Code 32224-5621	Transaction ID : 2018033019205-5 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.			125.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]						
SUBTOTAL of Receipts This Page (option	al)		458.00						
TOTAL This Period (last page this line nu	mber only)								

Use separate schedule(s)

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			Use separate schedule(s)			(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17			
	tion copied from such Reports and Stander and Stande				for the		ose of	soliciting	contrib	utions			
\	F COMMITTEE (In Full)			~									
	lorthwestern Mutual Life Ins	surance	Company Federal PAG	C									
	ne of Individual (Last, First, Middle Initia k, Joshua, Steven, ,	al) or Full Or	rganization Name		Date of Receipt								
Mailing A	Address 5051 Augusta Dr				03	/	D D 15	/ Y	ү ү 2018	Ý			
City Middleto	n	State WI	Zip Code 53597-8813						519206- iis Period				
	number of contributing olitical committee.	C					y		42	2.00			
Self-Emp			pation (for Individual) eral Insurance Agent		M	emo	ltem						
	For: mary General her (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 252.00										
	he of Individual (Last, First, Middle Initia ck, Joshua, Steven, ,	al) or Full Or	rganization Name		Date of	Re	ceipt						
Mailing Address 5051 Augusta Dr			State Zin Code			03 / D D / Y Y Y Y 03 31 2018							
City Middleto	City		State Zip Code WI 53597-8813			Transaction ID : 2018033019205-72 Amount of Each Receipt this Period							
FEC ID	number of contributing olitical committee.	С				42.00							
Name of Self-Emp	Employer (for Individual) loyed	Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 252.00			M	emo	ltem						
	For: mary General ner (specify) ▼												
	he of Individual (Last, First, Middle Initia It, Carol, L, ,	al) or Full Or	rganization Name		Date of	Re	ceipt						
Mailing A	Address 1610 N Prospect Ave				03	1	D D 15	/ Y	2018	Y			
City Milwauk	ee	State WI	Zip Code 53202-6702				-		519354-	-			
	number of contributing olitical committee.	С			<u> </u>		, .	- y	46	6.00			
NML	Employer (for Individual)		ipation (for Individual) ep Gc/Sec & Board Rel		M	emo	ltem						
	For: mary General ner (specify)	Aggregate	Year-to-Date ▼ 276.00]									
SUBTOTA	L of Receipts This Page (optional)		•				, .	,	130	.00			
TOTAL Th	is Period (last page this line number of	nly)	•	•			,	- T					

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
		Company Fodoral DA	C								
> The Northwestern Mut		Company rederal PA									
Full Name of Individual (Last, Fir A. Kracht, Carol, L, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1610 N Prospec	t Ave		03 31 2018								
City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2018033019355-811 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		46.00								
Name of Employer (for Individual NML	,	upation (for Individual) Dep Gc/Sec & Board Rel	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.00]								
Full Name of Individual (Last, Fir B. Kramer, Ryan, J, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 665 S Euclid Ave			03 / D D / Y Y Y Y 2018								
City Elmhurst	State	Zip Code 60126-4337	Transaction ID : 2018031519206-55 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individua Self-Employed	/	upation (for Individual) Ieral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, Fir C. Kramer, Ryan, J, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 665 S Euclid Av	9		03 31 2018								
City Elmhurst	State IL	Zip Code 60126-4337	Transaction ID : 2018033019205-55 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]								
SUBTOTAL of Receipts This Page	(optional)		462.00								
TOTAL This Period (last page this	line number only)										

Use separate schedule(s)

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) The Northwestern Mut	ual Life Insurance	Company Federal PA	C					
Full Name of Individual (Last, Fin Lawhon, M, Kevin, ,	st, Middle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2430 Vanderbilt Unit 108-349	Beach Rd		M M / D D / Y Y Y Y 03 15 2018					
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2018031519206-42 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		125.00					
Name of Employer (for Individua Self-Employed	,	upation (for Individual) neral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]					
Full Name of Individual (Last, Fir B. Lawhon, M, Kevin, ,	st, Middle Initial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2430 Vanderbilt Unit 108-349			M M / D D / Y Y Y Y Y 03 31 2018					
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2018033019205-42 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		125.00					
Name of Employer (for Individua Self-Employed	<i>,</i>	upation (for Individual) neral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]					
Full Name of Individual (Last, Fin C. Lueder, Matthew, Jame		Organization Name	Date of Receipt					
Mailing Address 2359 N Wahl Av	8		03 / D D / Y Y Y Y 2018					
City Milwaukee	State WI	Zip Code 53211-4513	Transaction ID : 2018031519206-60 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		125.00					
Name of Employer (for Individua Self-Employed	,	upation (for Individual) eral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00	1					
SUBTOTAL of Receipts This Page	(optional)		375.00					
TOTAL This Period (last page this	line number only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 44 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than us			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Mid Lueder, Matthew, James, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2359 N Wahl Ave			03 31 Y Y Y Y Y 2018								
City Milwaukee	State WI	Zip Code 53211-4513	Transaction ID : 2018033019205-60 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	1								
Full Name of Individual (Last, First, Mid Lueken, Jeffrey, J, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1213 E Goodrich Ln	State	Zip Code	03 15 2018 Transaction ID : 2018031519354-749								
Fox Point	WI	53217-2946	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		168.00								
Name of Employer (for Individual) NML		upation (for Individual) Securities	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1008.00]								
Full Name of Individual (Last, First, Mid C. Lueken, Jeffrey, J, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1213 E Goodrich Ln			03 / D D / Y Y Y Y 03 / 31 / 2018								
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID : 2018033019355-749 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		168.00								
Name of Employer (for Individual) NML		upation (for Individual) Securities	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1008.00]								
SUBTOTAL of Receipts This Page (option	nal)		461.00								
TOTAL This Period (last page this line nu	Imber only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 45 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
			13 14 15 16 1 person for the purpose of soliciting contributions the to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mic A. Lyons, Stephanie, A, ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 809 E Sylvan Ave			03 15 2018						
City Whitefish Bay	State WI	Zip Code 53217-5353	Transaction ID : 2018031519354-619 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		52.00						
Name of Employer (for Individual) NML		upation (for Individual) Era	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 312.00]						
Full Name of Individual (Last, First, Mic B. Lyons, Stephanie, A, ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 809 E Sylvan Ave			Model / 2018 Transaction ID : 2018033019355-619 Amount of Each Receipt this Period 52.00						
City Whitefish Bay	State WI	Zip Code 53217-5353							
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) NML		upation (for Individual) · Era	Memo Item						
Receipt For:	Aggregate	Year-to-Date V							
Other (specify) V		312.00							
Full Name of Individual (Last, First, Mic Mahaffey, Cory, A, ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 13764 Knaus Rd			03 / D D / Y Y Y Y 03 15 2018						
City _Lake Oswego	State OR	Zip Code 97034-2175	Transaction ID : 2018031519206-52 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		125.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]						
SUBTOTAL of Receipts This Page (option	' nal)		229.00						
TOTAL This Period (last page this line nu	umber only)								

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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			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹								
or	y information copied from such Reports and Staten for commercial purposes, other than using the nam			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance (Company Federal PA	2								
۹.	Full Name of Individual (Last, First, Middle Initial) of Mahaffey, Cory, A, , Mailing Address 13764 Knaus Rd	or Full Org	ganization Name	Date of Receipt								
				03 31 2018								
	5	State OR	Zip Code 97034-2175	Transaction ID : 2018033019205-52								
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period								
	Name of Employer (for Individual) Self-Employed		pation (for Individual) eral Insurance Agent	Memo Item								
	Receipt For: Ag Primary General Other (specify) ▼	igregate Y	/ear-to-Date ▼ 750.00									
	Full Name of Individual (Last, First, Middle Initial) o Manista, Raymond, J, ,	or Full Org	ganization Name	Date of Receipt								
	Mailing Address 7236 N Crossway Rd			03 / D D / Y Y Y Y Y 2018								
		State WI	Zip Code 53217-3519	Transaction ID : 2018031519354-484 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			208.00								
	Name of Employer (for Individual) NML		pation (for Individual) Chief Legal Off & Sec	Memo Item								
	Receipt For: Ag Primary General Other (specify) ▼	gregate Y	/ear-to-Date ▼ 1248.00									
	Full Name of Individual (Last, First, Middle Initial) o Manista, Raymond, J, ,	or Full Org	ganization Name	Date of Receipt								
	Mailing Address 7236 N Crossway Rd			03 / D D / Y Y Y Y Y 03 31 2018								
	, ,	State WI	Zip Code 53217-3519	Transaction ID : 2018033019355-484 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.			208.00								
	Name of Employer (for Individual) NML		pation (for Individual) Chief Legal Off & Sec	Memo Item								
	Receipt For: Ag Primary General Other (specify) Image: Constraint of the second	igregate Y	/ear-to-Date ▼ 1248.00									
S	UBTOTAL of Receipts This Page (optional)		•	541.00								
т	OTAL This Period (last page this line number only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 47 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
IILIVIIZED KEGEIFIJ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1						
			e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mide Mannebach, Steven, C, ,	dle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 101 Colorado St # 260			03 15 2018						
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2018031519354-573 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		118.00						
Name of Employer (for Individual) NML		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 708.00]						
Full Name of Individual (Last, First, Mide B. Mannebach, Steven, C, ,	dle Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 101 Colorado St # 260			03 / D D / Y Y Y Y 2018						
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2018033019355-573 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		118.00						
Name of Employer (for Individual) NML		upation (for Individual) naging Partner	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 708.00]						
Full Name of Individual (Last, First, Mide C. McClure, Brian, W, ,	dle Initial) or Full C	Prganization Name	Date of Receipt						
Mailing Address 1402 Wyndemere Point	Dr		03 15 / Y Y Y Y 2018						
City Champaign	State IL	Zip Code 61822-3349	Transaction ID : 2018031519206-58 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00]						
SUBTOTAL of Receipts This Page (option	' nal)		278.00						
TOTAL This Period (last page this line nu	mber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 48 OF

		Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	ŀ		11b	11c	12			
Any information copied from such Reports and or for commercial purposes, other than using the			erson for								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middle I McClure, Brian, W, ,	nitial) or Full C	rganization Name	Da	ate of	Red	ceipt					
Mailing Address 1402 Wyndemere Point Dr			The second se	03	/	D 31	D / Y	ү ү 2018	Y		
City Champaign	State IL	Zip Code 61822-3349						019205-5 nis Period			
FEC ID number of contributing federal political committee.	С					7		42.	00		
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	mo	ltem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]								
Full Name of Individual (Last, First, Middle II B. McLennon, Mark, J, ,	nitial) or Full C	rganization Name	Da	ite of	Re	ceipt					
Mailing Address 2571 N 86th St				03	/	15		2018	Y		
City Wauwatosa	State WI	Zip Code 53226-1921						519354-5 nis Period	11		
FEC ID number of contributing federal political committee.	С	С			42.00						
Name of Employer (for Individual) NML		upation (for Individual) Ips Bus Dev		Me	mo	Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00									
Full Name of Individual (Last, First, Middle I	nitial) or Full C	rganization Name	Da	ite of	Red	ceipt					
Mailing Address 2571 N 86th St			T	03	/	D 31		2018	Y		
City Wauwatosa	State WI	Zip Code 53226-1921						3019355-5 nis Period			
FEC ID number of contributing federal political committee.	С			_		,	.,	42.	00		
Name of Employer (for Individual) NML		upation (for Individual) ps Bus Dev		Me	mo	Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00	1								
SUBTOTAL of Receipts This Page (optional)						,	,	126.	00		
TOTAL This Period (last page this line numbe	r only)					-	1 45				

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)

PAGE 49 OF

			Detailed Summary Page	×	11a 13		11 14	- H	11c	12	17									
or	y information copied from such Reports and Statemen for commercial purposes, other than using the name				for the		pos	se of	soliciting	g contribu	itions									
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	nce C	ompany Federal PA	С																
۹.	Full Name of Individual (Last, First, Middle Initial) or McQuade, Corey, D, , Mailing Address 190 S Berkley Ave	-									Date of Receipt									
	City Sta	+0	Zip Code	_	03 15 2018															
	Elmhurst IL	lle	60126-3228		Transaction ID : 2018031519206-62															
	FEC ID number of contributing federal political committee.	С						Amount of Each Receipt this Period												
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				Memo Item														
	Receipt For: Aggr Primary General Other (specify) ▼																			
	Full Name of Individual (Last, First, Middle Initial) or McQuade, Corey, D, ,		Date o	of Re	ece	ipt														
	Mailing Address 190 S Berkley Ave							03 / D D / Y Y Y Y 2018												
	City Sta	te	Zip Code		Transaction ID : 2018033019205-62 Amount of Each Receipt this Period															
	Elmhurst IL		60126-3228		Amoun	it of	Ea	ich Re	eceipt th	is Perioc	1									
	FEC ID number of contributing federal political committee.	C					-			125	.00									
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent						Memo Item												
	Receipt For: Aggr Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00																		
	Full Name of Individual (Last, First, Middle Initial) or McTigue, John, W, ,	Full Orga	anization Name		Date o	of Re	ece	ipt												
	Mailing Address 205 E 4th St							03 15 2018												
	City Sta Hinsdale IL	te	Zip Code 60521-4603							1519354-										
	FEC ID number of contributing federal political committee.						Amount of Each Receipt this Period													
	Name of Employer (for Individual) NML	Occupation (for Individual) Chief Distribution Adv				Memo Item														
	Receipt For: Aggr Primary General Other (specify) Image: Content of the specify of the specify of the specify of the specify of the specific o	Aggregate Year-to-Date ▼ 600.00																		
s	UBTOTAL of Receipts This Page (optional)		•				,		7	350.	00									
т	OTAL This Period (last page this line number only)		••••••				-				e									

Use separate schedule(s)

FOR LINE NUMBER:

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17			Use separate schedule(s)	(ch	(check only one)							
	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a 13		11b 14	11c	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the p		ose o	f solicitin	ig contribi	utions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
A.	Full Name of Individual (Last, First, Middle Initia McTigue, John, W, ,	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 205 E 4th St				03 31 2018							
City Hinsdale		StateZip CodeIL60521-4603				Transaction ID : 2018033019355-906 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.				<u> </u>		-	1 41	100	0.00		
	Name of Employer (for Individual)		upation (for Individual) of Distribution Adv		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00									
в.	Full Name of Individual (Last, First, Middle Initia Meeks, Jim, Edward, , JR	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 264 Cloister Green Ln City State Zip Code						D 15		2018	Y		
	City	State TN						1519206-				
	Memphis	TN 38120-2357				of	Each I	Receipt t	his Period	d		
	FEC ID number of contributing federal political committee.	C				125.00						
	Name of Employer (for Individual) Self-Employed	upation (for Individual) Ieral Insurance Agent		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Meeks, Jim, Edward, , JR	ll) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 264 Cloister Green Ln				03	/	D 31		2018	Y		
	City Memphis	State TN	Zip Code 38120-2357				-		3019205-			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	. ,	125	.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00									
s	UBTOTAL of Receipts This Page (optional)			•			,		350	.00		
Т	OTAL This Period (last page this line number or	ıly)			L	-						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

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			for each cat Detailed Sur	egory of the mmary Page	×	11a 13		11b 14	11c 15	12 16	17						
	y information copied from such Reports and Sta for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company	Federal PA	С												
Α.	Mees, Arthur, J, , JR	Last, First, Middle Initial) or Full Organization Name								Date of Receipt							
	Mailing Address 5347 N Hollywood Ave	State	Zip Code		03 / 31 / 2018 Transaction ID : 2018033019355-914												
	Whitefish Bay	WI	53217-53	324				-	Receipt th		-						
	FEC ID number of contributing federal political committee.	С						y	-	36	6.00						
	Name of Employer (for Individual) NML		upation (for Indi Distribution Perf	,		M	emo	Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	216.00	1												
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Miller, Aaron, , ,							Date of Receipt									
	Mailing Address 82 Worcester St Apt 1						03 / D D / Y Y Y Y Y 2018										
	City Boston	State MA	Zip Code 02118-39	03		Transaction ID : 2018031519206-70 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		42.00													
	Name of Employer (for Individual) Self-Employed		cupation (for Ind neral Insurance		Memo Item												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	252.00	1												
с.	Full Name of Individual (Last, First, Middle Initi Miller, Aaron, , ,	al) or Full C	Organization Nar	ne		Date of	f Rec	ceipt									
	Mailing Address 82 Worcester St Apt 1						03 / D D / Y Y Y Y 03 31 2018										
	City Boston	State MA	Zip Code 02118-39	03					201803 Receipt th								
	FEC ID number of contributing federal political committee.	С						,	y	42	2.00						
	Name of Employer (for Individual) Self-Employed Receipt For:	Occ Ger		Memo Item													
	Primary General Other (specify)	Aggregate	Year-to-Date ▼	252.00	1												
s	UBTOTAL of Receipts This Page (optional)				<u> </u>			,	. ,	120	0.00						
Т	OTAL This Period (last page this line number o	nly)						,									

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	berson for the purpose of soliciting contributions be to solicit contributions from such committee.								
The Northwestern Mutual Lif	e Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middle A. Miller, Ben, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11315 E Winchcomb Dr			03 15 2018								
City Scottsdale	State AZ	Zip Code 85255-1638	Transaction ID : 2018031519206-46 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]								
Full Name of Individual (Last, First, Middle B. Miller, Ben, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 11315 E Winchcomb Dr			03 31 2018								
City Scottsdale	State AZ	Zip Code 85255-1638	Transaction ID : 2018033019205-46 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]								
Full Name of Individual (Last, First, Middle C. Miller, Kevin, E, ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 214 Schenley Rd			03 / D D / Y Y Y Y 2018								
City Pittsburgh	State PA	Zip Code 15217-1171	Transaction ID : 2018031519206-28 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]								
SUBTOTAL of Receipts This Page (optiona			458.00								
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 53 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and a	ddress of any political committe	person for the purpose of soliciting contributions to solicit contributions from such committee.								
The Northwestern Mutual Lif			C								
Full Name of Individual (Last, First, Middl A. Miller, Kevin, E, ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 214 Schenley Rd			03 31 2018								
City Pittsburgh	State PA	Zip Code 15217-1171	Transaction ID : 2018033019205-28 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, First, Middl B. Mitchell, Christian, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 640 E Carlisle Ave											
City Whitefish Bay	State WI	Zip Code 53217-4832	Transaction ID : 2018031519354-531 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		55.00								
Name of Employer (for Individual) NML		upation (for Individual) s & Ceo Wealth Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 330.00]								
Full Name of Individual (Last, First, Middl C. Mitchell, Christian, , ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 640 E Carlisle Ave			03 / D D / Y Y Y Y 03 31 2018								
City Whitefish Bay	State WI	Zip Code 53217-4832	Transaction ID : 2018033019355-531 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		55.00								
Name of Employer (for Individual) NML		upation (for Individual) & Ceo Wealth Mgmt	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 330.00]								
SUBTOTAL of Receipts This Page (optiona	l)		318.00								
TOTAL This Period (last page this line num	ber only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 54 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	y not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Middle Molloy, Karen, A, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2004 N 85th St			M M / D D / Y Y Y Y 03 15 2018						
City Wauwatosa	State WI	Zip Code 53226-2846	Transaction ID : 2018031519354-735 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.00						
Name of Employer (for Individual) NML		upation (for Individual) Treasurer	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 246.00]						
Full Name of Individual (Last, First, Middle B. Molloy, Karen, A, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2004 N 85th St			03 31 2018						
City Wauwatosa	State WI	Zip Code 53226-2846	Transaction ID : 2018033019355-735 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		41.00						
Name of Employer (for Individual) NML		upation (for Individual) Freasurer	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 246.00]						
Full Name of Individual (Last, First, Middle C. Mulroy, Timothy, Michael, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 29 Lexington Way			03 15 2018						
City Trabuco Cyn	State CA	Zip Code 92679-4734	Transaction ID : 2018031519206-68 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		125.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00]						
SUBTOTAL of Receipts This Page (optional)			207.00						

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	e Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Middl Mulroy, Timothy, Michael, ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 29 Lexington Way			03 31 2018							
City Trabuco Cyn	State CA	Zip Code 92679-4734	Transaction ID : 2018033019205-68 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů l									
Name of Employer (for Individual) Self-Employed	Occ Ger	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]							
Full Name of Individual (Last, First, Middl B. Newman, Jeremy, D, ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 1140 Lone Tree Rd										
City Elm Grove	State WI	Zip Code 53122-2019	Transaction ID : 2018033019355-923 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.00							
Name of Employer (for Individual) NML		upation (for Individual) Distribution Finance	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.00]							
Full Name of Individual (Last, First, Middl C. O Connell, Kevin, , ,	e Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4807 W Woodmere Rd										
City Tampa	State FL	Zip Code 33609-3632	Transaction ID : 2018031519206-67 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00	1							
SUBTOTAL of Receipts This Page (optiona	l)		367.00							
TOTAL This Period (last page this line nun	ber only)									

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 56 OF

	-	Use separate schedule(s)	(check only one)								
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b	11c	12				
Any information copied from such Reports an or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)											
The Northwestern Mutual Life	Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middle O Connell, Kevin, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4807 W Woodmere Rd				03 31 2018							
City Tampa	State FL	Transaction ID : 2018033019205-67 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C						208.0	00			
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Mem	o Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name	Dete	- (D							
B. Oberland, Gregory, C, , Mailing Address 4514 N Lake Dr				M /	eceipt 15		2018	Y			
City Whitefish Bay	State WI	Zip Code 53211-1252					519354-50	03			
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period									
Name of Employer (for Individual) NML	Occ Pre		Mem	o Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, First, Middle C. Oberland, Gregory, C, ,	Initial) or Full O	rganization Name	Date	of Re	eceipt						
Mailing Address 4514 N Lake Dr			03		31) / Y	2018	Y			
City Whitefish Bay	State WI	Zip Code 53211-1252					019355-5 is Period	03			
FEC ID number of contributing federal political committee.	C				y .	, ,	208.0	00			
Name of Employer (for Individual) NML		upation (for Individual) sident		Mem	o Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]								
SUBTOTAL of Receipts This Page (optional)							624.0	00			
TOTAL This Period (last page this line numb	per only)	······			-						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 57 OF

11	IEMIZED RECEIPTS			for each category of the Detailed Summary Page						12 16	17					
	ny information copied from such Reports and Sta for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In:	surance	Co	mpany Federal PAC	С											
Α.									Date of Receipt							
	Mailing Address 4324 Chevy Chase Dr	State		Zip Code		03 / 15 / 2018										
	La Canada	CA	ŕ	91011-3203		Transaction ID : 2018031519206-38 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С								208	3.00					
	Name of Employer (for Individual) Self-Employed		•	on (for Individual) nsurance Agent		N	lemo	o Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.00														
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Plocher, Matthew, J, ,						Date of Receipt									
	Mailing Address 4324 Chevy Chase Dr							03 / D D / Y Y Y Y 2018								
	City La Canada	State CA		Zip Code 91011-3203	Transaction ID : 2018033019205-38 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	ing C						208.00								
	Name of Employer (for Individual) Self-Employed		•	on (for Individual) Insurance Agent		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1248.00														
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Porter, Rebecca, L, ,						Date of Receipt									
	Mailing Address 4800 Stratford Dr							03 / D D / Y Y Y Y 03 15 2018								
	City Greendale	State WI		Zip Code 53129-2017					: 2018031 Receipt th							
	FEC ID number of contributing federal political committee.	С				76.00										
	Name of Employer (for Individual) NML Receipt For:		cupatio Corp S	on (for Individual) Strat		N	lem«	o Item								
	Primary General Other (specify)	Aggregate	Year	to-Date ▼ 456.00												
s	UBTOTAL of Receipts This Page (optional)			•••••				,		492	2.00					
Т	OTAL This Period (last page this line number o	nly)		•••••				-								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 58 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С						
 Full Name of Individual (Last, First, Mid A. Porter, Rebecca, L, , 	ldle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 4800 Stratford Dr			03 31 2018						
City Greendale	State WI	Zip Code 53129-2017	Transaction ID : 2018033019355-475 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		76.00						
Name of Employer (for Individual) NML		upation (for Individual) Corp Strat	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 456.00	1						
Full Name of Individual (Last, First, Mid B. Pruett, Charles, R, ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1019 Stonewall Dr	1		03 / D D / Y Y Y Y 2018						
City Nashville	State	Zip Code 37220-1022	Transaction ID : 2018031519206-40 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		208.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]						
Full Name of Individual (Last, First, Mid C. Pruett, Charles, R, ,	Idle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1019 Stonewall Dr			03 / D D / Y Y Y Y 2018						
City Nashville	State TN	Zip Code 37220-1022	Transaction ID : 2018033019205-40 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		208.00						
Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item						
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]						
SUBTOTAL of Receipts This Page (option	nal)		492.00						
TOTAL This Period (last page this line nu	umber only)								

SCHEDULE A (FEC Form 3X) _____ _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 59 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
II EIVIIZED REGEIFIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			person for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Mic A. Radke, Steven, M, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 111 W Ravine Ct			M M / D D / Y Y Y Y 03 15 2018							
City Thiensville	State WI	Zip Code 53092-5861	Transaction ID : 2018031519354-684 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		53.00							
Name of Employer (for Individual) NML		upation (for Individual) Govt Relations	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 318.00]							
Full Name of Individual (Last, First, Mic B. Radke, Steven, M, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 111 W Ravine Ct			03 31 2018							
City Thiensville	State WI	Zip Code 53092-5861	Transaction ID : 2018033019355-684 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		53.00							
Name of Employer (for Individual) NML		upation (for Individual) Govt Relations	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 318.00]							
Full Name of Individual (Last, First, Mic C. Reeter, Jeff, D, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7 Williamsburg Ln			03 15 2018							
City Houston	State TX	Zip Code 77024-5144	Transaction ID : 2018031519206-54 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		130.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 780.00]							
SUBTOTAL of Receipts This Page (optio	nal)		236.00							
TOTAL This Period (last page this line nu	umber only)									

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 60 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
I LIVILLU RECEILIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1							
			person for the purpose of soliciting contributions for solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	.C							
Full Name of Individual (Last, First, Mic Reeter, Jeff, D, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7 Williamsburg Ln			03 31 Y Y Y Y 03 31 2018							
City Houston	State TX	Zip Code 77024-5144	Transaction ID : 2018033019205-54 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		130.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00]							
Full Name of Individual (Last, First, Mic B. Remstad, David, R, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2634 N Lake Dr			03 15 2018							
City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID : 2018031519354-629 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		117.00							
Name of Employer (for Individual) NML		upation (for Individual) & Chief Actuary	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 702.00]							
Full Name of Individual (Last, First, Mic C. Remstad, David, R, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2634 N Lake Dr			03 31 YYYY 03 31 2018							
City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID : 2018033019355-629 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		117.00							
NML Sv		upation (for Individual) & Chief Actuary	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 702.00	1							
SUBTOTAL of Receipts This Page (option	nal)		364.00							
TOTAL This Period (last page this line nu	umber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 61 OF

ידו			Use separate schedule(s)	(check only one)		one)									
			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the	purp	ose of	soliciting	contrib	utions					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С											
A.	Full Name of Individual (Last, First, Middle Initia Rhoades, Adam, T, ,	al) or Full O	rganization Name		Date of	Red	ceipt								
	Mailing Address 2038 Rosemont PI						03 15 2018								
	City Vestavia	State AL	Zip Code 35243-1767					2018031 eceipt th							
FEC ID number of contributing federal political committee.							y		208	3.00					
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00	1											
в.	Full Name of Individual (Last, First, Middle Initia Rhoades, Adam, T, ,	t Pl			Date of	Red	ceipt								
	Mailing Address 2038 Rosemont Pl				03 / D D / Y Y Y Y 2018										
	City Vestavia	State AL	Zip Code 35243-1767	Transaction ID : 2018033019205-43 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) General Insurance Agent			208.00										
	Name of Employer (for Individual) Self-Employed				Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate]												
с.	Full Name of Individual (Last, First, Middle Initia Richardson, Wesley, H, ,	al) or Full O	rganization Name		Date of	Red	ceipt								
	Mailing Address 1 Open Gate Whitaker Hill Rd				03	/	D D D 15	/ Y	2018	Y					
	City Huntington	State WV	Zip Code 25701				-	2018031 eceipt th							
FEC ID number of contributing federal political committee.						_	y .	, <u>,</u>	125	5.00					
Self-Employed Ge			upation (for Individual) eral Insurance Agent		Me	emo	ltem								
Receipt For: Aggre Primary General Other (specify) Image: Constraint of the specify in the specify in the specify in the specific of the speci			gate Year-to-Date ▼ 750.00												
s	UBTOTAL of Receipts This Page (optional)			•			, .	7	541	.00					
т	OTAL This Period (last page this line number or	nly)		•			,								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 62 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	the name and a	ddress of any political committe									
Full Name of Individual (Last, First, Middle A. Richardson, Wesley, H, ,	,	rganization Name	Date of Receipt								
Mailing Address 1 Open Gate Whitaker Hill	Rd										
City Huntington	State WV	Zip Code 25701	Transaction ID : 2018033019205-71 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		125.00								
Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify) ▼	Ger	upation (for Individual) eral Insurance Agent Year-to-Date ▼ 750.00	Memo Item								
Full Name of Individual (Last, First, Middle Rivers , J , Daniel , , Mailing Address 3601 River Ridge Cv	Initial) or Full O		Date of Receipt								
City Prospect	State KY	Zip Code 40059-8038	Transaction ID : 2018031519206-14 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]								
Full Name of Individual (Last, First, Middle C. Rivers, J, Daniel, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3601 River Ridge Cv			03 31 2018								
City Prospect	State KY	Zip Code 40059-8038	Transaction ID : 2018033019205-14 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify)	Gen	upation (for Individual) eral Insurance Agent Year-to-Date ▼ 1248.00	Memo Item								
SUBTOTAL of Receipts This Page (optional)			541.00								
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 63 OF

Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	address of any political committee	to solicit contributions from such committee.
		2
	Organization Name	
NML Svp	Zip Code 53211-2448 upation (for Individual) o Transformation Year-to-Date ▼ 900.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial) or Full C B. Rodenhuis, Bethany, M, , Mailing Address 3900 N Lake Dr	-19 ² - 49 ² - 42 ²	Date of Receipt
NML Svi Receipt For: Aggregate	Zip Code 53211-2448	03 31 2018 Transaction ID : 2018033019355-533 Amount of Each Receipt this Period 150.00 Memo Item
Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full C Roou, Tammy, M, , Mailing Address N99W14710 Amber Dr	900.00 Organization Name	Date of Receipt 03 15 2018
NML Vp	Zip Code 53022-6611 upation (for Individual) & Chief Risk Officer Year-to-Date ▼ 360.00	Transaction ID : 2018031519354-678 Amount of Each Receipt this Period 60.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		360.00

SCHEDULE A (FEC Form 3X) _ _ _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 64 OF

ידו	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
111			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
\rangle	The Northwestern Mutual Life Ins	surance	Company Federal PA	C							
Α.	Full Name of Individual (Last, First, Middle Initia Roou, Tammy, M, ,	al) or Full Oi	rganization Name	Date of Receipt							
	Mailing Address N99W14710 Amber Dr			03 31 2018							
	City	State	Zip Code	Transaction ID : 2018033019355-678							
	Germantown	WI	53022-6611	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.				60.00							
	Name of Employer (for Individual)	Occu	upation (for Individual)	Memo Item							
	NML	Vp 8	& Chief Risk Officer								
	Receipt For: Primary General	Aggregate	Year-to-Date V								
	Other (specify) ▼		360.00								
B	Full Name of Individual (Last, First, Middle Initia Russo, Matt, , ,	al) or Full O	rganization Name	Date of Receipt							
	Mailing Address 139 Deep Valley Rd			03 / 15 / 2018 Transaction ID : 2018031519206-45							
	City	State	Zip Code								
	New Canaan	СТ	06840-2804	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		, 1248.00]							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Russo, Matt, , ,	al) or Full O	rganization Name	Date of Receipt							
-	Mailing Address 139 Deep Valley Rd			03 31 2018							
	City	State CT	Zip Code	Transaction ID : 2018033019205-45							
	New Canaan		06840-2804	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
Self-Employed G			upation (for Individual) eral Insurance Agent	Memo Item							
		1	Year-to-Date V	_							
	Primary General	Aggregate		1							
	Other (specify)		1248.00								
s	UBTOTAL of Receipts This Page (optional)			476.00							
т	OTAL This Period (last page this line number or	וy)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 65 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Check only one) Image: The image: The image is a straight one image is a s
Any information copied from such Reports and Stat or for commercial purposes, other than using the na	ements may not be sold or used by any pe ame and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance Company Federal PAC	
Full Name of Individual (Last, First, Middle Initial A. Sarnecki, R, Philip, , Mailing Address 18240 Melrose Dr City Bucyrus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed Receipt For: Other (specify) ▼) or Full Organization Name State Zip Code KS 66013-9081 C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 600.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial B. Sarnecki, R, Philip, , Mailing Address 18240 Melrose Dr City Bucyrus FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify) ▼) or Full Organization Name State Zip Code KS 66013-9081 C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 600.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial C. Schaefer, Timothy, G, , Mailing Address 1013 E Lexington Blvd City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)) or Full Organization Name State Zip Code WI 53217-5381 C Occupation (for Individual) Evp Client And Dig Exp Aggregate Year-to-Date ▼ 1248.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	-	408.00

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 66 OF

		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using th			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Middle In Schaefer, Timothy, G, ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1013 E Lexington Blvd			03 31 2018							
City Whitefish Bay	State WI	Zip Code 53217-5381	Transaction ID : 2018033019355-714 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) NML		upation (for Individual) Client And Dig Exp	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]							
Full Name of Individual (Last, First, Middle In B. Schattschneider, Cal, D, ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5940 Stefanie Way			03 31 2018							
City Caledonia	State WI	Zip Code 53108-9563	Transaction ID : 2018033019355-873 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.00							
Name of Employer (for Individual) NML		upation (for Individual) Campus Planning&Ops	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 204.00								
Full Name of Individual (Last, First, Middle In C. Schenkel, Christopher, J, ,	nitial) or Full O	rganization Name	Date of Receipt							
Mailing Address 27085 Saddlerock Pl			03 15 2018							
City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018031519206-64 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00]							
SUBTOTAL of Receipts This Page (optional)			284.00							
TOTAL This Period (last page this line numbe	r only)									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE 67 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
The Northwestern Mutual Lif	e Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Middl Schenkel, Christopher, J, ,	Name of Individual (Last, First, Middle Initial) or Full Organization Name henkel, Christopher, J, ,									
Mailing Address 27085 Saddlerock Pl			03 / D D / Y Y Y Y Y 03 31 2018							
City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018033019205-64 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00								
Full Name of Individual (Last, First, Middl	e Initial) or Full O	rganization Name								
B. Schlifske, John, E, , Mailing Address 1500 Greenway Ter			Date of Receipt							
City	State	Zip Code	Transaction ID : 2018031519354-647							
Elm Grove	WI	53122-1611	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) NML		upation (for Individual) iirman & Ceo	Memo Item							
Receipt For:	Aggregate	Year-to-Date ▼	_							
Other (specify) ▼		1248.00	1							
Full Name of Individual (Last, First, Middl C. Schlifske, John, E, ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1500 Greenway Ter			03 / D D / Y Y Y Y Y 2018							
City Elm Grove	State WI	Zip Code 53122-1611	Transaction ID : 2018033019355-647 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) NML		upation (for Individual) irman & Ceo	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]							
SUBTOTAL of Receipts This Page (optiona	l)		458.00							
TOTAL This Period (last page this line num	iber only)									

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PAGE 68 OF

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11			for each category of the Detailed Summary Page		K 11a		11b	11c	12	1 -7					
	y information copied from such Reports and Sta for commercial purposes, other than using the r														
$\overline{)}$	NAME OF COMMITTEE (In Full)														
	The Northwestern Mutual Life Ins	surance	Company Federal PA	0											
A.	Full Name of Individual (Last, First, Middle Initia Schmidt, Calvin, R, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt								
	Mailing Address W205 Allen Rd						03 15 2018								
	City Oconomowoc	State WI	Zip Code 53066-9048						1519354-6 his Period	60					
	FEC ID number of contributing federal political committee.	C						-	105.	00					
	Name of Employer (for Individual) NML		upation (for Individual) Product Services		Me	emo	Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 630.00]											
в.	Full Name of Individual (Last, First, Middle Initia Schmidt, Calvin, R, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt								
	Mailing Address W205 Allen Rd				03	/	31		2018	Y					
	City Oconomowoc	State WI	Zip Code 53066-9048				-		019355-6 nis Period	60					
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) Svp Product Services			105.00										
	Name of Employer (for Individual) NML				Me	emo	Item								
	Receipt For:	Aggregate	Year-to-Date ▼ 630.00												
<u> </u>	Full Name of Individual (Last, First, Middle Initia Schneider, Rodd, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt								
	Mailing Address 1415 E Fairy Chasm Rd # R				03	/	D 15		2018	Y					
	City Bayside	State WI	Zip Code 53217-1433						1519354-4 nis Period	54					
	FEC ID number of contributing federal political committee.	С			Ē	_	y .		46.	00					
	Name of Employer (for Individual) NML		upation (for Individual) itig & Dist Counsel		Me	emc	ltem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 276.00	1											
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			,	, ,	256.0	00					
т	OTAL This Period (last page this line number or	1ly)		•			_								

Use separate schedule(s)

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PAGE 69 OF

	-	Use separate schedule(s)	(check	only a	one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11		11b	11c	12				
Any information copied from such Reports and or for commercial purposes, other than using				the pu							
NAME OF COMMITTEE (In Full)				oona							
The Northwestern Mutual Life	Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middle Schneider, Rodd, , ,	Initial) or Full O	rganization Name	Dat	e of F	Receipt						
Mailing Address 1415 E Fairy Chasm Rd # R				03 31 2018							
City Bayside	State WI	Zip Code 53217-1433				: 2018033 Receipt th	019355-4	54			
FEC ID number of contributing federal political committee.	C			_	-gr. 1	1.45	46.0	00			
Name of Employer (for Individual)		upation (for Individual) .itig & Dist Counsel		Merr	no Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 276.00									
Full Name of Individual (Last, First, Middle B. Schneider, Sarah, R, ,	Initial) or Full O	tial) or Full Organization Name			Receipt						
Mailing Address 4380 N Wildwood Ave					03 / D D / Y Y Y Y 03 15 2018						
City Shorewood	State WI	Zip Code 53211-1436					519354-64	41			
FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period						
Name of Employer (for Individual) NML					no Item						
Receipt For:	Aggregate										
Other (specify) ▼		582.00	1								
Full Name of Individual (Last, First, Middle C. Schneider, Sarah, R, ,	Initial) or Full O	rganization Name	Dat	e of F	Receipt						
Mailing Address 4380 N Wildwood Ave)3)	/ D 31		2018	_			
City Shorewood	State WI	Zip Code 53211-1436				: 2018033 Receipt th	019355-6 iis Period	41			
FEC ID number of contributing federal political committee.	C			_	y	. ,	97.0	00			
NML		Occupation (for Individual) Vp-New Business			no Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 582.00									
SUBTOTAL of Receipts This Page (optional)					,	. ,	240.0	00			
TOTAL This Period (last page this line numb	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 70 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
The Northwestern Mutual Life	e Insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Middle A. Schott, Sarah, E, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5712 N Kent Ave			03 / D D / Y Y Y Y 2018								
City Whitefish Bay	State WI	Zip Code 53217-4724	Transaction ID : 2018031519354-614 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		50.00								
Name of Employer (for Individual) NML		upation (for Individual) Compliance/Bp	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]								
Full Name of Individual (Last, First, Middle B. Schott, Sarah, E, ,	Date of Receipt										
Mailing Address 5712 N Kent Ave	03 / D D / Y Y Y Y 2018										
City Whitefish Bay	State WI	Zip Code 53217-4724	Transaction ID : 2018033019355-614 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		50.00								
Name of Employer (for Individual) NML		upation (for Individual) Compliance/Bp	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]								
Full Name of Individual (Last, First, Middle C. Schultz, Deborah, A, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1219 S Waterville Lane	03 / D D / Y Y Y Y 03 15 2018										
City Oconomowoc	State WI	Zip Code 53066	Transaction ID : 2018031519354-755 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		52.00								
Name of Employer (for Individual) NML		upation (for Individual) Financial Management	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 312.00]								
SUBTOTAL of Receipts This Page (optional))		152.00								
TOTAL This Period (last page this line num	per only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 71 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)										
			for each category of the Detailed Summary Page		11a 13		11b 14	11c		2 6	17			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to so	for the plicit cor	pur ntrib	pose of outions f	soliciting	g cont h com	ributio	ons e.			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	C										
Α.	Full Name of Individual (Last, First, Middle Initi Schultz, Deborah, A, ,	rganization Name	Date of Receipt											
	Mailing Address 1219 S Waterville Lane			03 / D D / Y Y Y Y Y 03 2018										
	City Oconomowoc	State WI	Zip Code 53066	_				2018033 Receipt th			5			
	FEC ID number of contributing federal political committee.	С			52.00									
	Name of Employer (for Individual) NML		Occupation (for Individual) Vp Financial Management				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate												
В.	Full Name of Individual (Last, First, Middle Initi Seiden, Adam, David, ,	al) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 44 Sunset Rd				03 15 2018									
	City Darien	State CT	Zip Code 06820-3527					2018031 leceipt th			_			
	FEC ID number of contributing federal political committee.	C			208.00									
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent												
	Receipt For: Primary General Other (specify) ▼	Aggregate												
<u> </u>	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Seiden, Adam, David, ,					f Re	eceipt							
	Mailing Address 44 Sunset Rd				03 / D D / Y Y Y Y 03 31 2018									
	City Darien	State CT	Zip Code 06820-3527					2018033						
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. ,		208.00)			
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			М	emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1248.00												
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	. ,	4	68.00)			
Т	OTAL This Period (last page this line number c	only)	•	-										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 72 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a		11b 14	11c 15	12	17					
Any information copied from such Reports a or for commercial purposes, other than usin			erson for the		pose of	soliciting	g contribut	ions					
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	e Insurance	Company Federal PA	С										
Full Name of Individual (Last, First, Midd Seitzinger, Brad, P, ,	le Initial) or Full O	nitial) or Full Organization Name			Date of Receipt								
Mailing Address 920 Pine Needle Trl				M M / D D / Y Y Y Y Y 03 15 2018									
City Oakland Twp	State MI				Transaction ID : 2018031519206-27 Amount of Each Receipt this Period 208.00								
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	ים ך	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 1248.00											
Full Name of Individual (Last, First, Midd B. Seitzinger, Brad, P, ,	le Initial) or Full O	rganization Name	Date	of Br	eceint								
Mailing Address 920 Pine Needle Trl					Date of Receipt 03 31 2018								
City Oakland Twp	State MI	Zip Code 48306-1034	Transaction ID : 2018033 Amount of Each Receipt th					7					
FEC ID number of contributing federal political committee.	С	208.00											
Name of Employer (for Individual) Self-Employed	upation (for Individual) Ieral Insurance Agent												
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]										
Full Name of Individual (Last, First, Midd C. Simbro, David, W, ,	le Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 311 E Erie St Unit 4	03		15) / Y	2018	Y							
City Milwaukee	State WI	Zip Code 53202-6040					1 519354-9 nis Period	00					
FEC ID number of contributing federal political committee.	С			_	y	, ,	85.0)0					
Name of Employer (for Individual) NML		Occupation (for Individual) Svp Life, Annuity & Prod Sol			o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 510.00	1										
SUBTOTAL of Receipts This Page (optional	al)				y	. ,	501.0	0					
TOTAL This Period (last page this line num	nber only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 73 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check	(check only one)								
TTEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11		11b	11c	12	47				
	y information copied from such Reports and S for commercial purposes, other than using the				the pu	urpose of							
	NAME OF COMMITTEE (In Full)		duress of any pointear commuter	, 10 301011	conti	ibutions							
	The Northwestern Mutual Life In	surance	Company Federal PA	C									
Α.	Full Name of Individual (Last, First, Middle Init Simbro, David, W, ,	ial) or Full O	rganization Name	Date	Date of Receipt								
	Mailing Address 311 E Erie St Unit 4)3	/ D 31	D / Y	ү ү 2018	Y				
	City Milwaukee	State WI	Zip Code 53202-6040		Transaction ID : 2018033019355-900 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			85.00								
	Name of Employer (for Individual)		upation (for Individual) Life, Annuity & Prod Sol		Merr	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00										
в.	Full Name of Individual (Last, First, Middle Init Sperka, Steve, P, ,	ial) or Full O	rganization Name	Date	e of F	Receipt							
	Mailing Address S67W17735 Copper Oaks Ct)3	/ D 15		2018	Y				
	City	State WI	Zip Code				2018031						
	Muskego	VVI	53150-7503	Amo	ount o	of Each F	Receipt th	is Period					
	FEC ID number of contributing federal political committee.	C					-	94.	.00				
	Name of Employer (for Individual) NML		Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		564.00	1									
с.	Full Name of Individual (Last, First, Middle Init Sperka, Steve, P, ,	ial) or Full O	rganization Name	Date	e of F	Receipt							
	Mailing Address S67W17735 Copper Oaks Ct			()3	/ 31		2018					
	City Muskego	State WI	Zip Code 53150-7503				: 2018033 Receipt th						
	FEC ID number of contributing federal political committee.	С			_	y	,	94.	.00				
	Name of Employer (for Individual)		upation (for Individual) Field Rewards		Men	no Item							
	Receipt For: Primary General Other (specify)	Primary General General											
s	UBTOTAL of Receipts This Page (optional)					,	,	273.	00				
т	OTAL This Period (last page this line number of	only)				-							

Use separate schedule(s)

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	*	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other that	n using the name and a	ddress of any political committe	e to solicit contributions from such committee.							
The Northwestern Mutu	al Life Insurance	Company Federal PA	С							
Full Name of Individual (Last, First A. Stanley, Tony, , ,	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 3914 White Stone	Rd		03 15 / Y Y Y Y 03 15							
City Newtown Sq	State PA	Zip Code 19073-1095	Transaction ID : 2018031519206-66 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]							
Full Name of Individual (Last, First Stanley, Tony, , ,		rganization Name	Date of Receipt							
Mailing Address 3914 White Stone	Rd	Zip Code	03 31 2018 Transaction ID : 2018033019205-66							
Newtown Sq	PA	19073-1095	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		42.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]							
Full Name of Individual (Last, First C. Striano, Peter, F, , III	, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11050 NW 78th P	1		03 / D D / Y Y Y Y 2018							
City Parkland	State FL	Zip Code 33076-4723	Transaction ID : 2018031519206-41 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]							
SUBTOTAL of Receipts This Page (optional)		292.00							
TOTAL This Period (last page this li	ne number only)									

Use separate schedule(s)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any p name and address of any political committe	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance Company Federal PA	С
Full Name of Individual (Last, First, Middle Initi A. Striano, Peter, F, , III Mailing Address 11050 NW 78th PI City Parkland FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code FL 33076-4723 C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 1248.00	Date of Receipt O3 / 31 / 2018 Transaction ID : 2018033019205-41 Amount of Each Receipt this Period 208.00 Memo Item
Full Name of Individual (Last, First, Middle Initi B. Stribling, Steven, J, , Mailing Address 11830 W Whitaker Ave City Greenfield FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code WI 53228-2455 C Occupation (for Individual) Vp Product Development Aggregate Year-to-Date ▼	Date of Receipt
Full Name of Individual (Last, First, Middle Initi Stugelmeyer, Brenda, J, , Mailing Address 6970 W Fox Haven Ct City Franklin FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	al) or Full Organization Name State Zip Code WI 53132-7402 C Occupation (for Individual) Vp & Real Estate Counsel Aggregate Year-to-Date ▼ 276.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		294.00

Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Crieck only one) Image: Market only one) I
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any pe address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	Company Federal PAC	;
NML Vp	Drganization Name Zip Code 53132-7402 cupation (for Individual) & Real Estate Counsel • Year-to-Date ▼ 276.00	Date of Receipt 03 / 31 / 2018 Transaction ID : 2018033019355-734 Amount of Each Receipt this Period 46.00 Memo Item
NML Vp	Zip Code 53092-5862 cupation (for Individual) Public Investments Year-to-Date ▼ 228.00	Date of Receipt 03 / 31 / 2018 Transaction ID : 2018033019355-691 Amount of Each Receipt this Period 38.00 Memo Item
NML Avp	Drganization Name Zip Code 53211-1741 cupation (for Individual) o Tax And Tax Policy 9 Year-to-Date ▼ 228.00	Date of Receipt 03 / 31 / 2018 Transaction ID : 2018033019355-721 Amount of Each Receipt this Period 38.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	· · ·	122.00

Use separate schedule(s)

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			Use separate schedule(s)	(ch	(check only one)							
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	Г	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	g contri	ibutio	ns	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
Α.	Full Name of Individual (Last, First, Middle Initia Tews, Michael, F, ,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 609 S 249th Cir				M M / D D / Y Y Y Y 03 15 2018							
	City Waterloo	State NE	Zip Code 68069-4432		Transaction ID : 2018031519206-10 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С							12	25.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00									
в.	Full Name of Individual (Last, First, Middle Initia Tews, Michael, F, ,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 609 S 249th Cir				м м 03	/	D D D 31	/ Y	2018			
	City Waterloo	State NE	Zip Code 68069-4432	-				2018033				
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period							
	Name of Employer (for Individual) Self-Employed	upation (for Individual) neral Insurance Agent		Me	emc	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00									
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Theodore, Scott, P, ,	al) or Full O	rganization Name		Date of	Re	eceipt					
	Mailing Address 12505 Ventana Mesa Cir	Idle Initial) or Full Organization Name					D D 15	/ Y	2018			
	City Castle Pines	State CO	Zip Code 80108-9148					2018031 eceipt th				
	FEC ID number of contributing federal political committee.	С			Ē		,	. y	20	08.00		
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00									
s	UBTOTAL of Receipts This Page (optional)		••••••	•			,		45	58.00		
т	OTAL This Period (last page this line number or	nly)		-			-	1 415		-		

SCHEDULE A (FEC Form 3X) DEAEIDTA

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		Use separate schedule(s)				(check only one)						
			for each category of the Detailed Summary Page		× 11a 13		11b 14	11c 15	12	17		
	nformation copied from such Reports and Stat commercial purposes, other than using the n				for the		pose of	soliciting	, contribu	tions		
	ME OF COMMITTEE (In Full) he Northwestern Mutual Life Ins	urance	Company Federal P	AC								
A T	ll Name of Individual (Last, First, Middle Initial heodore, Scott, P, ,) or Full Or	rganization Name		Date of	Re	ceipt					
Ma	iling Address 12505 Ventana Mesa Cir				03 31 / Y Y Y Y Y 03 31 2018							
Cit	y astle Pines	State CO	Transaction ID : 2018033019205-21 Amount of Each Receipt this Period									
	C ID number of contributing leral political committee.	С							208.	00		
	me of Employer (for Individual) If-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item					
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `										
в. Т	Il Name of Individual (Last, First, Middle Initial ronco, Alex, J, ,) or Full Or	rganization Name		Date of	Re	ceipt					
	iling Address 11 Stoneridge Dr				03 / D D / Y Y Y Y 15 2018					Y		
Cit Lo	y udonville	State NY	Zip Code 12211-2625						519206-5 iis Period			
	C ID number of contributing leral political committee.	С							125.	_		
	ame of Employer (for Individual) If-Employed	Occupation (for Individual) General Insurance Agent			Me	emo	ltem					
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00									
	II Name of Individual (Last, First, Middle Initial) or Full Or	rganization Name		Date of	Re	ceipt					
Ma	iling Address 11 Stoneridge Dr				03	/	31		2018	Y		
Cit	y budonville	State NY	Zip Code 12211-2625						019205-5 iis Period			
	C ID number of contributing leral political committee.	С			<u> </u>		,	. ,	125.	00		
Se	me of Employer (for Individual)		upation (for Individual) eral Insurance Agent		Me	emc	ttem					
Re	Ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00									
SUB	TOTAL of Receipts This Page (optional)			•	—		, ,	. ,	458.	00		
тот	AL This Period (last page this line number on	ly)						<u> </u>				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 79 OF

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			for each category of the Detailed Summary Page		1 1a		11b 14	11c			17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g conti	ributio	ons		
\setminus	NAME OF COMMITTEE (In Full)			~									
	The Northwestern Mutual Life Ins	surance	Company Federal PA	C									
Α.	Full Name of Individual (Last, First, Middle Initia Trost, Chris, G, ,	l) or Full Oi		Date of Receipt									
	Mailing Address 1218 E Olive St				03	/	15) / Y	y 201	۲ ۲ 8			
	City	State WI	Zip Code 53211-1825		Transaction ID : 2018031519354-514								
	Shorewood			Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С	C				-			41.00)		
	Name of Employer (for Individual) NML		upation (for Individual) Actuary		M	emo	o Item						
	Receipt For:	Aggregate											
	Primary General Other (specify) ▼		246.00]									
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name										
В.	Trost, Chris, G, ,	,			Date of	Re	eceipt						
	Mailing Address 1218 E Olive St				03	1	D 31) / Y	2018	8			
	City Shorewood	State WI	Zip Code 53211-1825					2018033			4		
		C	55211-1625		Amoun	tot	Each F	leceipt th	nis Per	riod	_		
	FEC ID number of contributing federal political committee.			Ļ.		-y			41.00)			
	Name of Employer (for Individual) NML	upation (for Individual) Actuary		M	emo	o Item							
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		, 246.00]									
<u>с</u>	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name		Date of	Re	eceipt						
	Mailing Address 605 Potomac River Rd				03	/	15		2018				
	City	State	Zip Code		Trans	act	ion ID :	2018031	151920	06-37			
	Mc Lean	VA	22102-1402		Amount	t of	Each F	Receipt th	nis Per	riod			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	1	25.00)		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Memo Item								
	Paggint For:		Year-to-Date ▼										
	Other (specify)		750.00]									
	UBTOTAL of Receipts This Page (optional)				_	-			2	07.00)		
	OTAL This Period (last page this line number or		•	• •			y			-	i		

Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
			berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
The Northwestern Mutual Li	fe Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Mide A. Tucker, Leo, C, ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 605 Potomac River Rd			03 31 Y Y Y Y Y 2018							
City Mc Lean	State VA	Zip Code 22102-1402	Transaction ID : 2018033019205-37 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		125.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00]							
Full Name of Individual (Last, First, Mide B. Van Der Hyde, John, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 849 Sabot Hill Rd			03 / D D / Y Y Y Y 2018							
City Manakin Sabot	State VA	Zip Code 23103-3009	Transaction ID : 2018031519206-13 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]							
Full Name of Individual (Last, First, Mide C. Van Der Hyde, John, , ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 849 Sabot Hill Rd			03 / D D / Y Y Y Y 2018							
City Manakin Sabot	State VA	Zip Code 23103-3009	Transaction ID : 2018033019205-13 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]							
SUBTOTAL of Receipts This Page (option	al)		541.00							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 81 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions be to solicit contributions from such committee.						
The Northwestern Mutual Life	e Insurance	Company Federal PA	C						
Full Name of Individual (Last, First, Middle Williams, Jeffrey, B, ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2004 N 72nd St			03 / D D / Y Y Y Y 2018						
City Wauwatosa	State WI	Zip Code 53213-1828	Transaction ID : 2018031519354-491 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) NML		upation (for Individual) Nmis-Nmwmc Chief Compl Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]						
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Williams, Jeffrey, B, ,								
Mailing Address 2004 N 72nd St			Date of Receipt						
City Wauwatosa	State WI	Zip Code 53213-1828	Transaction ID : 2018033019355-491 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer (for Individual) NML		upation (for Individual) Nmis-Nmwmc Chief Compl Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00]						
Full Name of Individual (Last, First, Middle C. Williams-Kemp, Kamilah, D, ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8645 N Dean Cir			03 / D D / Y Y Y Y 2018						
City River Hills	State WI	Zip Code 53217-2038	Transaction ID : 2018031519354-676 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		80.00						
Name of Employer (for Individual) NML		upation (for Individual) Di & Ltc	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00]						
SUBTOTAL of Receipts This Page (optional)		164.00						
TOTAL This Period (last page this line num	ber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 82 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	e Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Midd Williams-Kemp, Kamilah, D, , Mailing Address 8645 N Dean Cir	le Initial) or Full C	Organization Name	Date of Receipt							
City River Hills	State WI	Zip Code 53217-2038	Transaction ID : 2018033019355-676 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		80.00							
Name of Employer (for Individual)		upation (for Individual) Di & Ltc	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00]							
Full Name of Individual (Last, First, Midd B. Worrell, Richard, , , Mailing Address 2423 Beretania Cir	le Initial) or Full C	Organization Name	Date of Receipt							
City Charlotte	State NC	Zip Code 28211-3631	03 15 2018 Transaction ID : 2018031519206-50 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1248.00]							
Full Name of Individual (Last, First, Middl C. Worrell, Richard, , , Mailing Address 2423 Beretania Cir	le Initial) or Full C	Organization Name	Date of Receipt							
City	State	Zip Code	03 31 2018 Transaction ID : 2018033019205-50							
Charlotte FEC ID number of contributing federal political committee.	C	28211-3631	Amount of Each Receipt this Period							
Name of Employer (for Individual) Self-Employed		upation (for Individual) ieral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1248.00]							
SUBTOTAL of Receipts This Page (optiona	al)		496.00							
TOTAL This Period (last page this line nun	nber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 83 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
ILEIVILLED RECEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	C							
Full Name of Individual (Last, First, Mide A. Wright, John, William, , II	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 510 King Rd NW			03 15 2018							
City Atlanta	State GA	Zip Code 30342-4011	Transaction ID : 2018031519206-26 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		41.67							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02]							
Full Name of Individual (Last, First, Mide B. Wright, John, William, , II	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 510 King Rd NW			03 / D D / Y Y Y Y 03 31 2018							
City Atlanta	State GA	Zip Code 30342-4011	Transaction ID : 2018033019205-26 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		41.67							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02]							
Full Name of Individual (Last, First, Mide C. Young, Catherine, M, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 929 N Astor Street Unit			03 / D D / Y Y Y Y 2018							
City Milwaukee	State WI	Zip Code 53202	Transaction ID : 2018031519354-926 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		50.00							
Name of Employer (for Individual) NML		upation (for Individual) Gn Cn & Ast Sec/Re	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00]							
SUBTOTAL of Receipts This Page (option	al)		133.34							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 84 OF

IТ	EMIZED RECEIPTS		Use separate schedule(s)			(check only one)							
11			for each category of the Detailed Summary Page		1 1a		11b	11c 15	12	Г	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson e to so	for the	pur; ntrib	pose of	soliciting	, contri	ibutic	ons		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PAC	С									
Α.	Full Name of Individual (Last, First, Middle Init Young, Catherine, M, ,	ial) or Full O	rganization Name		Date of Receipt								
	Mailing Address 929 N Astor Street Unit				03 31 2018								
	City Milwaukee	State WI	Zip Code 53202	_	Transaction ID : 2018033019355-926 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>				ę	50.00)		
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cn & Ast Sec/Re		M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate											
в.	Full Name of Individual (Last, First, Middle Init Zach, T Scott, , , Mailing Address 6630 Country Creek Ln	ial) or Full O	organization Name		Date of	f Re	ceipt	/ Y	Ý	YYY	_		
	City	State	Zip Code	_	03		15	2018031	2018	3			
	Cedar Rapids	IA	52403-7023					eceipt th		-			
	FEC ID number of contributing federal political committee.	C Occupation (for Individual) General Insurance Agent			125.00								
	Name of Employer (for Individual) Self-Employed				M	emo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Zach, T Scott, , ,	ial) or Full O	organization Name		Date of	Re	ceipt						
	Mailing Address 6630 Country Creek Ln	1			03	1	D D D 31	JL	2018	3]		
	City Cedar Rapids	State IA	Zip Code 52403-7023					2018033 eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. <u>,</u>	12	25.00)		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 750.00										
⊢	UBTOTAL of Receipts This Page (optional)		•	• -			,		30	00.00			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 85 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check d	(check only one)									
11			for each category of the Detailed Summary Page	X 11a	a 🗌	11b 14	11c 15	12 16	17					
	ny information copied from such Reports and S for commercial purposes, other than using the													
$\left \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	surance	Company Federal PA	C										
\square														
Α.	Full Name of Individual (Last, First, Middle Init Zale, Thomas, D, ,	ial) or Full O	rganization Name	Date	Date of Receipt									
	Mailing Address 2818 E Menlo Blvd				03 / D D / Y Y Y Y 2018									
	City Shorewood	State WI	Zip Code 53211-2652		Transaction ID : 2018031519354-665 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						174.						
	· .						-9-							
	Name of Employer (for Individual) NML		upation (for Individual) Real Estate		Mem	o Item								
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General		1044.00											
	Other (specify) v		7											
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name											
в.	Zale, Thomas, D, ,					eceipt								
	Mailing Address 2818 E Menlo Blvd	Ototo	Zin Oode	0		31	/ Y	2018	Y					
	City Shorewood	State WI	Zip Code 53211-2652					019355-6						
	FEC ID number of contributing	C	33211-2032	Amo	unt of	Each H	eceipt tr	nis Period 174.	_					
	federal political committee.					-y-								
	Name of Employer (for Individual) NML		upation (for Individual) Real Estate		Mem	o Item								
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		1044.00											
_	Full Name of Individual (Last, First, Middle Init	ial) or Full O	rganization Name											
C.	Zehner, Rick, T, ,					eceipt								
	Mailing Address 203 W Ravine Baye Rd	1 -		M 0	3	15		2018						
	City Bayside	State WI	Zip Code 53217-1334					1519354-8						
	•			Amo	unt of	Each H	eceipt tr	nis Period						
	FEC ID number of contributing federal political committee.	C				y		44.	00					
	Name of Employer (for Individual) NML		upation (for Individual) Research & Special Projects		Mem	o Item								
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		264.00											
s	UBTOTAL of Receipts This Page (optional)		•			, ,		392.	00					
т	OTAL This Period (last page this line number of	only)		· L	_	-	-							

Use separate schedule(s)

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ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
II LIVIIZED KEVEIF13		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16										
Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane and a	l ay not be sold or used by any p ddress of any political committe	person for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	.C										
Full Name of Individual (Last, First, Middle I A. Zehner, Rick, T, ,	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address 203 W Ravine Baye Rd			03 / D D / Y Y Y Y 03 31 2018										
City Bayside	State WI	Zip Code 53217-1334	Transaction ID : 2018033019355-812 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		44.00										
Name of Employer (for Individual) NML		upation (for Individual) Research & Special Projects	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 264.00]										
Full Name of Individual (Last, First, Middle I B.	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V]										
Full Name of Individual (Last, First, Middle I	nitial) or Full O	rganization Name	Date of Receipt										
Mailing Address													
City	State	Zip Code	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С												
Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item										
Receipt For: Primary General Other (specify)		Year-to-Date ▼]										
SUBTOTAL of Receipts This Page (optional)			44.00										

	CHEDULE B (FEC Form 3X)				LINE N	87 (DF 98									
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(c		c only 21b	one) 22		23	Γ	26	; [27			
		Detailed	Summary Page		\square	28a	28b		28c	ł	29	·	30b			
	y information copied from such Reports and State for commercial purposes, other than using the na															
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	0				• •										
	The Northwestern Mutual Life Insu	Jrance C	ompany Fed	erai	I PA	4C										
Α.	Full Name (Last, First, Middle Initial) US Bank						Date o		sburse			Y	YY	Y		
	Mailing Address 777 E.Wisconsin Ave.															
	City Milwaukee	State WI	Zip Code 53202				FEC Identification Number									
	Purpose of Disbursement Service Charge		33202	0	001	7	C Transaction ID : E743C1B2DD Amount of Each Disbursement this Period									
	Candidate Name			Cate	egory ype	y/										
	Senate	Primary	General		<u> </u>		236.62									
	State: District:	cify) 🔻				Memo Item										
B.	Full Name (Last, First, Middle Initial)		Date o		sburse			V	YY	V						
	Mailing Address															
	City	State Zip Code					FEC Identification Number									
	Purpose of Disbursement					1	C									
	Candidate Name		Category/ Type		y/	Amount of Each Disbursement this Period										
	Senate	ement For: Primary	General													
	State: District:	Other (spec	cify)				Memo Item									
C.	Full Name (Last, First, Middle Initial)						Date c	_								
	Mailing Address						M	/	D			Ŷ	ΥΥ	Y		
	City	State	Zip Code				FEC lo	denti	ficatio	on	Numb	er				
	Purpose of Disbursement					٦	С	_				_				
	Candidate Name		Cate T	egory ype	y/	Amour	nt of	Each)isburs	seme	nt this	Period			
	Office Sought: House Disburse Senate	ement For: Primary	General				L.		y							
_	State: District:	Other (spec	cify) ▼				M	emo	Item							
s	UBTOTAL of Disbursements This Page (optional).	•			-j-	2			236.	62						
т	OTAL This Period (last page this line number only	/)				•			,	2	. ,		236.	62		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE (check on 21b							
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ments may	not be sold or used								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu										
Full Name (Last, First, Middle Initial) A. AI Lawson For Congress Mailing Address 400 North Adams St.				Date of Disbursement						
City Tallahassee Purpose of Disbursement 2018 General	State FL	Zip Code 32301	011	FEC Identification Number						
Candidate Name Lawson, Alfred, J., , Jr. Office Sought:	ment For: 2 Primary Other (spe	x General	Category/ Type	Transaction ID : D110E88E03/ Amount of Each Disbursement this Period						
State: FL District: 05 Full Name (Last, First, Middle Initial) B. Ben Sasse For US Senate Inc Mailing Address 700 R St		City) V		Date of Disbursement						
Unit 83978 City Lincoln Purpose of Disbursement 2020 Primary Candidate Name Sasse, Benjamin, Eric, , Office Sought: House Disburse	State NE ment For: ; Primary Other (spec	General	011 Category/ Type	FEC Identification Number C C00547976 Transaction ID : F8ECB65B6A Amount of Each Disbursement this Period 1000.00						
State: NE District: Full Name (Last, First, Middle Initial) C. Citizens For Waters Mailing Address 249 E Ocean Blvd # 685				Date of Disbursement						
City Long Beach Purpose of Disbursement 2018 Primary Candidate Name Waters, Maxine, , ,	State CA	Zip Code 90802	011 Category/ Type	FEC Identification Number C C00167585 Transaction ID : 2D43E5F043 Amount of Each Disbursement this Period						

SCF	IEDULE B (FEC Form 3X)		FC	DR L	LINE N	NUMBER: PAGE 89 OF									
ITE	MIZED DISBURSEMENTS	for each	rate schedule(s) category of the Summary Page			only (21b 28a			23 28c		16 19	27 30b			
	nformation copied from such Reports and State commercial purposes, other than using the nar														
	AME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	irance Co	ompany Fed	eral	PÆ	٩C									
-	II Name (Last, First, Middle Initial) Democratic Party Of Wisconsin						Date of Disbursement								
M	ailing Address 15 N. Pinckney St. Suite 200		03 15 2018												
	adison	State WI	Zip Code 53703					FEC Identification Number							
2	Irpose of Disbursement 018 Contribution andidate Name				11		Tra	nsac		ID : F	CC142				
D	emocratic Party Of Wisconsin	ment For: 2	2018	Cate Ty	egory /pe	y/	Amount	of E	ach	Disbu	rsemer	nt this P 5000.00			
	ate: District:	Primary Other (spec	Memo Item												
_	Il Name (Last, First, Middle Initial) Devin Nunes Campaign Committe		Date of	Disb /	oursei		Y	YY	Ý						
_	ailing Address P.O. Box 6545			03		02	2		2018						
Pi 2	salia urpose of Disbursement 2018 Primary	State Zip Code CA 93290-6545					FEC Identification Number C C00370056 Transaction ID : 42A46C3834A								
Ν	Senate x	Category/ Type Primary General					Amount of Each Disbursement this Period								
St	ate: CA District: 22	Other (spec	cify)				Memo Item								
C. [III Name (Last, First, Middle Initial) Donnelly For Indiana						Date of	Disb /	D	D /		Y Y	Y		
	ailing Address 910 17Th St NW Ste 925	04-14-	Ziz Osta				03	_	13	3		2018			
Ρι	iy ashington irpose of Disbursement 018 Primary	State DC	Zip Code 20006	0	11			C003	39365	52					
E	andidate Name Donnelly, Joseph, Simon, , Sr. ffice Sought: House Disburse	ment For: 2		Cate Ty	egory /pe	y/	Transaction ID : 67F56A32AD Amount of Each Disbursement this Period								
	ate: IN District:	Primary Other (spec		Mer	mo It	em		.	2500.00						
SUE	TOTAL of Disbursements This Page (optional).				10000.00										

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page PAGE 90 OF Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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) The Northwestern Mutual Life Insurance Company Federal PAC	
In reach category of the Detailed Summary Page 21b 22 23 26 27 Detailed Summary Page 28a 28b 28c 29 30b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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)	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribution 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)	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.	
The Northwestern Mutual Life Insurance Company Federal PAC	
Full Name (Last, First, Middle Initial) A. Doug Jonos For Sonato Committee Date of Disbursement	
Mailing Address PO Box 131025	
City State Zip Code FEC Identification Number	
Purpose of Disbursement C C00640623	
2018 Primary 011 Transaction ID : DCB3403D0B	
Candidate Name Category/ Amount of Each Disbursement this Per	od
Jones, Doug, , , Office Sought: House Disbursement For: 2018 1000.00	
	_
President Other (specify)	
State: AL District:	
Full Name (Last, First, Middle Initial) Date of Disbursement B. Emmer For Congress Date of Disbursement	
Mailing Address PO Box 998 03 02 2018	
City State Zip Code FEC Identification Number	
Anoka MN 55303	
2018 Primary 011	
Candidate Name Transaction ID : F60C3DC4566 Category/ Amount of Each Disbursement this Per	iod
Emmer, Thomas, Earl, , Jr.	
Office Sought: X House Disbursement For: 2018 1000.00	
Senate Primary General	
State: MN District: 06 Other (specify) Memo Item	
Full Name (Last, First, Middle Initial)	
C. Enzi For US Senate	
Mailing Address PO Box 2775	
City State Zip Code FEC Identification Number	
Cody WY 82414	
Purpose of Disbursement 2020 Primary 011 C C00317503 Transaction ID : D90B4DB8D'	
Candidate Name Category/ Amount of Each Disbursement this Per	od
Enzi, Michael, Bradley, ,TypeOffice Sought:HouseDisbursement For:20201000.00	
Senate Primary General	
President Other (specify) ▼ Memo Item	
State: WY District:	
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	ny information copied from such Reports and State for commercial purposes, other than using the na													
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance C	ompany Fed	eral	PAG	;								
Α.	Full Name (Last, First, Middle Initial) Freedom Fund					Date of Disbur	sement							
	Mailing Address 701 8Th Street, NW Suite 500		1			03 08 2018								
	City Washington	State DC	Zip Code 20001			FEC Identification Number								
	Purpose of Disbursement 2018 Contribution			0'	11	C C00390	0674 on ID : D348797B82E							
	Candidate Name Freedom Fund				gory/ pe	Amount of Eac	h Disbursement this Period							
	Office Sought: House Disburse Senate President X	ement For: 2 Primary Other (spec	General			Memo Item	2500.00							
 R	State: District: Full Name (Last, First, Middle Initial)	_	Contribution			Date of Disburg								
υ.	Friends Of Chris Murphy Mailing Address PO Box 127						23 / Y Y Y Y 2018							
	City Cheshire Purpose of Disbursement	State CT	Zip Code 06410			FEC Identificati								
	2018 Convention Candidate Name			_	11 gory/		on ID : 4E11DC02503 h Disbursement this Period							
		ement For: 2		Ту	pe	1000.00								
	x Senate President x State: CT District:	Primary Other (spec	General cify) Convention			Memo Item	1							
C.	Full Name (Last, First, Middle Initial) Friends Of John Barrasso					Date of Disbur	sement							
	Mailing Address PO Box 52008					03 / D	13 / Y Y Y Y 13 2018							
	City Casper	State WY	Zip Code 82605			FEC Identificati	ion Number							
	Purpose of Disbursement 2018 Primary Candidate Name			_	11 gory/		3386 on ID : 1ED9827AFA h Disbursement this Period							
	Barrasso, John, Anthony, , Office Sought: House Disburse x Senate x	ement For: 2	2018 General	Ту	pe	-	1000.00							
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	The Northwestern Mutual Life Insu	urance C	ompany Feo	deral	I PA	٩C								
Α.	Full Name (Last, First, Middle Initial) Friends Of Pat Toomey						Date of Disbursement							
	Mailing Address 228 S. Washington St., Suite 115													
	City	State	Zip Code				FEC Identification Number							
	Alexandria Purpose of Disbursement	VA	22314				C C00461046							
	2022 General			0	011		Transaction ID : 46BC6B6F97							
	Candidate Name			Cate	egory	<i>y</i> /	Amount of Each Disbursement this Period							
	Toomey, Patrick, Joseph, , Office Sought: House Disburse	ement For: 2		Ty	ype		5000.00							
	X Senate President	Primary Other (spe	X General											
	State: PA District:					Memo Item								
В.	Full Name (Last, First, Middle Initial) Giving Willingly Empowering Natio Mailing Address PO Box 75357	onally (G	WEN) PAC				Date of Disbursement							
			-											
	City Washington	State DC	Zip Code 20013				FEC Identification Number							
	Purpose of Disbursement 2018 Contribution	DC	20013	C	011	٦	C C00431478 Transaction ID : C523E2521A9							
	Candidate Name						Amount of Each Disbursement this Period							
	Giving Willingly Empowering National Office Sought: House Disburse													
	Senate	ement For: 2018 Primary General					5000.00							
	State: District:						Memo Item							
C.	Full Name (Last, First, Middle Initial) Judy Chu For Congress						Date of Disbursement							
	Mailing Address 16633 Ventura Blvd # 1008						03 / D D / Y Y Y Y 02 2018							
	City	State	Zip Code				FEC Identification Number							
	Encino Purpose of Disbursement 2018 Primary	CA	91436	0)11		C C00458125							
	Candidate Name Chu, Judy, May, ,			Cate	egory	<i>y</i> /	Transaction ID : 73380CD70F Amount of Each Disbursement this Period							
		ement For: 2	2018			1000.00								
	State: CA District: 27	Primary Other (spe	General cify) ▼			Memo Item								
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	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	irance C	ompany Feo	deral F	PAC							
Α.	Full Name (Last, First, Middle Initial) Kuster For Congress, Inc Mailing Address PO Box 1498					Date of Disbursement 03 13 2018						
	City Concord	State NH	Zip Code 03302			FEC Identification Number						
	Purpose of Disbursement 2018 Primary		03302	011	1	C C00462861 Transaction ID : 1A5292AA7F						
	Candidate Name Kuster, Ann, McLane, , Office Sought: x House Disburse	ment For: 2	2018	Categ Typ		Amount of Each Disbursement this Period						
	Senate President State: NH District: 02	Primary Other (spec	General			Memo Item						
в.	Full Name (Last, First, Middle Initial) LaHood for Congress					Date of Disbursement						
	Mailing Address P.O. Box 10735	State	Zip Code			03 13 2018						
	Peoria Purpose of Disbursement 2018 Primary Candidate Name	IL	61612	01 ² Catego	- H.	FEC Identification Number C C00575050 Transaction ID : ECBBD4A3C7 Amount of Each Disbursement this Period						
		ment For: 2 Primary Other (spec	General	Тур		2000.00						
	State: IL District: 18					Memo Item						
C.	LEGPAC Mailing Address 38 IVv St., SE					Date of Disbursement						
	City	State	Zip Code			FEC Identification Number						
	Washington Purpose of Disbursement 2018 Contribution Candidate Name	DC	20003	011 Categ	- H	C C00385534 Transaction ID : 92D8A85DA1 Amount of Each Disbursement this Period						
	Senate	ment For: 2 Primary	General	Тур	e	5000.00						
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee to solicit contributions from s	ittee.
The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) A. Mark Pocan For Congress Mailing Address PO Box 327 City Madison Purpose of Disbursement 2018 Primary Candidate Name Pocan, Mark, , , Office Sought: X House Disbursement For: 2018 State: WI District: 02 Q2 Coto Mailing Address PO Box 327 011 Candidate Name Categoriv/ President Disbursement For: 2018 State: WI District: 02 Q2 City Mailing Address: Por Congress Mailing Address: Por Box 327 City State Mailing Address: Por Congress Mailing Address: Disbursement For: 2018 City State Mailing Address: Por Congress Mailing Address: Disbursement For: 2018 City Senate Disbursement For: 2018	- Y
A. Mark Pocan For Congress Date of Disbursement Mailing Address PO Box 327 03 02 2018 City State Zip Code 53701 FEC Identification Number Purpose of Disbursement 011 Category/ Transaction ID : 253B48781 Amount of Each Disbursement For: 2018 FEC Identification Number Cooscol179 Candidate Name President Primary General Other (specify) ▼ Office Sought: X House Disbursement For: 2018 State: WI District: 02 2000 Mailing Address PO Box 327 Memo Item Full Name (Last, First, Middle Initial) B. Mark Pocan For Congress Date of Disbursement Mailing Address PO Box 327 Other (specify) ▼ Transaction ID : 014003F441, Amount of Each Disbursement thi City City State Disbursement For: 2018 FEC Identification Number Purpose of Disbursement Other (specify) Transaction ID : 014003F441, Amount of Each Disbursement thi Office Sought: Y House Disbursement For: 2018 Office So	Y
Madison WI 53701 Purpose of Disbursement 2018 Primary 011 011 Candidate Name 011 011 Pocan, Mark, , , Disbursement For: 2018 Transaction ID : 2E3B4B7B1 Amount of Each Disbursement thi Office Sought: X House Disbursement For: 2018 Y President Y Primary General Other (specify) V Memo Item Full Name (Last, First, Middle Initial) B. Mark Pocan For Congress Date of Disbursement Mailing Address PO Box 327 011 03 02 2018 City State Zip Code VI State Zip Code S3701 FEC Identification Number Purpose of Disbursement 2018 General 011 Category/ Type 011 Category/ Type Transaction ID : 014003F441, Amount of Each Disbursement thi Office Sought: X House Disbursement For: 2018 011 General 011 Office Sought: X House Disbursement For: 2018 300 Memo Item	1
2018 Primary 011 Candidate Name Office Sought: Image: Category/Type Office Sought: Image: Category/Type Image: Category/Type State: Image: Category/Type Image: Category/Type Full Name (Last, First, Middle Initial) Image: Category/Type Image: Category/Type B. Mark Pocan For Congress Image: Category/Type Image: Category/Type Mailing Address PO Box 327 Image: Category/Type Image: Category/Type City State Zip Code State Image: Category/Type Madison Image: Category/Type Image: Category/Type Image: Category/Type Office Sought: Im	
B. Mark Pocan For Congress Date of Disbursement Mailing Address PO Box 327 City State Zip Code Madison WI 53701 Purpose of Disbursement 011 2018 General 011 Candidate Name 011 Pocan, Mark, , , Disbursement For: 2018 Office Sought: x Y Primary Y General Other (specify) Memo Item	s Period
Madison WI 53701 Purpose of Disbursement 2018 General 011 C Candidate Name 011 Category/ Type Pocan, Mark, , , Disbursement For: 2018 General Office Sought: X House Disbursement For: 2018 President Other (specify) Memo Item	Y
Office Sought: X House Disbursement For: 2018 300 Senate Primary X General President Other (specify) Memo Item	
	0.00
Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address PO Box 32248 03	Ý
City State Zip Code Newark NJ 07102-0648 Purpose of Disbursement 2018 General 011 Candidate Name 011 Menendez, Robert, , , Category/ Type	
SUBTOTAL of Disbursements This Page (optional)	0.00

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$\left \right\rangle$	NAME OF COMMITTEE (In Full)			_											
	The Northwestern Mutual Life Insu	Irance Co	ompany Fed	eral	P/										
٨	Full Name (Last, First, Middle Initial)						Date of	Diek		mont					
А.	Menendez For Senate							Dist							
	Mailing Address PO Box 32248		03 / D D / Y Y Y Y 03 02 2018												
	City Newark	State NJ	Zip Code 07102-0648				FEC Ide	entific	cation	Num	ber				
	Purpose of Disbursement			_	-		С	C002	26456	4					
	2018 Primary			0	11			nsac	ction	ID : CE	336F37	7014:			
	Candidate Name				egory	y/	Amount	of E	Each	Disbur	semen	t this Pe	riod		
	Menendez, Robert, , , Office Sought: House Disburse	ment For: 2	019	Ŋ	ype							2000.00			
	x Senate	Primary	General					- 7		-7		1	- H.		
	President	Other (spec					Mo	mo li	tom						
	State: NJ District:						Memo Item								
в.	Full Name (Last, First, Middle Initial) People For Patty Murray						Date of	Dist	ourse	ment					
	reopier of raily multay						M M	/	D	_	Y Y	YY			
	Mailing Address PO Box 3662						03		1:			018			
	5	State	Zip Code				FEC Ide	entific	cation	Numb	ber				
	Seattle Purpose of Disbursement	WA	98124				C	<u></u>		0		- T			
	2022 Primary			C)11		U		25764	-					
	Candidate Name			Cate	aor	v/				D:6C		t this Pe	riod		
	Murray, Patricia, Lynn, ,				ype	, 									
		ment For: 2					1000.00								
	X Senate X	Primary Other (spec	General				-								
	State: WA District:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Mei	mo li	tem						
_	Full Name (Last, First, Middle Initial)														
C.	Portman For Senate Committee						Date of	Dist	ourse	nent					
	Mailing Address 9856 Archer Lane						м м 03	/	D 02			018			
	City	State	Zip Code						0.0 ^{1!} -	NI					
	Dublin	ОН	43017-8914				FEC Ide	entitio	cation	Num	Jel.				
	Purpose of Disbursement 2022 Primary			0	11		0		45846						
	Candidate Name									ID:F5		62CC t this Pe	vriod		
	Portman, Rob, J., ,				egory ype	y/	Amount		acri	JISDUI	semen		nou		
		ment For: 2	.022									3000.00			
	× Senate ×	General cify) ▼													
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NAME OF COMMITTEE (In Full)													
The Northwestern Mutual Life Insu	Irance Co	mpany Fed	leral	PA	AC								
Full Name (Last, First, Middle Initial)						Date of	Dich	urooi	nont				
A. Republican Party Of Wisconsin							0150						
Mailing Address 148 E. Johnson St.			03 15 2018										
City Madison	State WI	Zip Code 53703				FEC Ide	entific	ation	Num	ber			
Purpose of Disbursement			_	-		С	C000	7445	0				
2018 Contribution			0	11			nsac	tion	D : D7	4C912	2A504		
Candidate Name			Cate		//	Amount	of E	ach	Disbur	semen	t this Pe	eriod	
Republican Party Of Wisconsin Office Sought: House Disburse	ment For: 20	04.0	Ту	/pe							5000.00	- T	
Senate	Primary	General					- 7	_					
President	Other (speci					Ma	ma lt	- m					
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Full Name (Last, First, Middle Initial)						Data of	Diab	uroo	nont				
B. Rothfus For Congress						Date of	Disp					_	
Mailing Address PO Box 435						03	/	02			018		
City	State		FEC Ide	entific	ation	Num	ber						
Sewickley Purpose of Disbursement	PA	15143									-		
2018 General			0	11		C	C004	9711	5				
Candidate Name			Cate	aon	//	Tra Amount			D:2E			ariod	
Rothfus, Keith, James, ,				/pe	″	Amount		aon		senten		,1100	
Office Sought: 🗶 House Disburse	ment For: 2										1000.00		
Senate	Primary	X General							,				
State: PA District: 17	Other (speci	ify)				Mer	no Ite	em					
Full Name (Last, First, Middle Initial)													
C. Rothfus For Congress						Date of	Disb	urse			Y Y	_	
Mailing Address PO Box 435						03	,	08			018		
City	State	Zip Code				FEC Ide	entific	ation	Num	her			
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Candidate Name			Cate	egory	//	Amount	of E	ach	Disbur	semen	t this Pe	eriod	
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Office Sought: K House Disburse	Primary	General					-	-	-7		1 2 2 3 6 1 0 0		
President	Other (speci		Memo Item										
State: PA District: 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)					
The Northwestern Mutual Life Inst	Irance Col	mpany ⊦ede	eral PAC		
Full Name (Last, First, Middle Initial) A. Stabenow For US Senate				Date of Disbursement	
Mailing Address P.O. Box 4945				03 02 2018	
City East Lansing	State Z MI	Zip Code 48826		FEC Identification Number	
Purpose of Disbursement 2018 Primary	C C00344473				
Candidate Name Category/				Transaction ID: 98E13F6BBE. Amount of Each Disbursement this Period	
Stabenow, Deborah, , , Type Office Sought: House Disbursement For: 2018 X Senate X				1000.00	
State: MI District:	Other (specify	<i>y</i>) ▼		Memo Item	
Full Name (Last, First, Middle Initial) B. Steve Daines For Montana				Date of Disbursement	
Mailing Address PO Box 1598				03 02 2018	
City Helena	State Z MT	Zip Code 59624-1598		FEC Identification Number	
Purpose of Disbursement 2020 Primary 011				C C00491357 Transaction ID : 0C091B49DC	
Candidate Name Deinose Stavio Devid				Amount of Each Disbursement this Period	
Daines, Steve, David, ,TypeOffice Sought:HouseDisbursement For:2020				1000.00	
XSenatePresident	Primary Other (specify	General			
State: MT District:	1			Memo Item	
Full Name (Last, First, Middle Initial) C. Terri Sewell For Congress				Date of Disbursement	
Mailing Address P.O. Box 1964				03 / D D / Y Y Y Y Y 02 2018	
City Birmingham	State Z	Zip Code 35201		FEC Identification Number	
Purpose of Disbursement 2018 General 011				C C00458976 Transaction ID : 6C11FB4977	
Candidate Name Sewell, Terri, Andrea, , Type				Amount of Each Disbursement this Period	
Office Sought: Image: Weight and the second secon				2000.00	
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 98 OF 98
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 28a	One) 22 X 23 26 27 28b 28c 29 30b
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NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	rance Company Fed	eral PAC	
Full Name (Last, First, Middle Initial)			
A. Terri Sewell For Congress Mailing Address P.O. Box 1964	Date of Disbursement 03 02 2018		
	State Zip Code AL 35201		FEC Identification Number
Purpose of Disbursement 2018 Primary	C C00458976 Transaction ID : 7263F5DD7E:		
Candidate Name	Amount of Each Disbursement this Period		
Sewell, Terri, Andrea, , Office Sought: x House Disbursem	3000.00		
	Primary General Other (specify) v		Memo Item
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Mailing Address			
City S	State Zip Code		FEC Identification Number
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Candidate Name	Amount of Each Disbursement this Period		
Office Sought: House Disbursem			
State: District:	Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) C.			Date of Disbursement
Mailing Address	M M / D D / Y Y Y Y		
City	State Zip Code		FEC Identification Number
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Candidate Name	Amount of Each Disbursement this Period		
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