

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

The Northwestern Mutual Life Insurance Company Federal PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on / / in the State of

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

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

03 / 01 / 2016 through 03 / 31 / 2016

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

Type or Print Name of Treasurer Michelle A. Hinze

Signature of Treasurer Michelle A. Hinze [Electronically Filed] Date / /

04 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		196955.78
(b) Cash on Hand at Beginning of Reporting Period.....	151745.78	
(c) Total Receipts (from Line 19)	35032.04	105540.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	186777.82	302495.90
7. Total Disbursements (from Line 31).....	19240.07	134958.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	167537.75	167537.75
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

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From: 03 / 01 / 2016 To: 03 / 31 / 2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27865.32	70413.80
(ii) Unitemized	7166.72	35126.32
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35032.04	105540.12
(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)	35032.04	105540.12
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	35032.04	105540.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35032.04	105540.12

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	240.07	708.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	240.07	708.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	120250.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	14000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19240.07	134958.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19240.07	134958.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	35032.04	105540.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35032.04	105540.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	240.07	708.15
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	240.07	708.15

**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 6 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Steven Fay Abbass
Full Name (Last, First, Middle Initial)
Mailing Address 9 Woodhull Ct
City Northport State NY Zip Code 11768-2844
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-67
Amount of Each Receipt this Period
125.00
 Memo Item

B. Steven Fay Abbass
Full Name (Last, First, Middle Initial)
Mailing Address 9 Woodhull Ct
City Northport State NY Zip Code 11768-2844
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-67
Amount of Each Receipt this Period
125.00
 Memo Item

C. Rick A. Abell
Full Name (Last, First, Middle Initial)
Mailing Address 6025 Princeton Reach Way
City Granite Bay State CA Zip Code 95746-6217
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-53
Amount of Each Receipt this Period
125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 Insurance Company Federal PAC

A. Rick A. Abell
 Full Name (Last, First, Middle Initial)
 Mailing Address 6025 Princeton Reach Way
 City State Zip Code
 Granite Bay CA 95746-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-53
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Eric D. Aslakson
 Full Name (Last, First, Middle Initial)
 Mailing Address 15323 SE 82nd St
 City State Zip Code
 Newcastle WA 98059-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-60
 Amount of Each Receipt this Period
 62.50
 Memo Item

C. Eric D. Aslakson
 Full Name (Last, First, Middle Initial)
 Mailing Address 15323 SE 82nd St
 City State Zip Code
 Newcastle WA 98059-9223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-60
 Amount of Each Receipt this Period
 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Leslie Barbi
Full Name (Last, First, Middle Initial)

Mailing Address 6620 N Lake Dr

City Fox Point State WI Zip Code 53217-4245

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Svp - Public Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-504

Amount of Each Receipt this Period 208.00

Memo Item

B. Leslie Barbi
Full Name (Last, First, Middle Initial)

Mailing Address 6620 N Lake Dr

City Fox Point State WI Zip Code 53217-4245

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Svp - Public Investments

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-503

Amount of Each Receipt this Period 208.00

Memo Item

C. Rebekah B. Barsch
Full Name (Last, First, Middle Initial)

Mailing Address N46W5455 Spring Ct

City Cedarburg State WI Zip Code 53012-2547

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Planning & Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-760

Amount of Each Receipt this Period 77.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 493.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Rebekah B. Barsch
 Full Name (Last, First, Middle Initial)
 Mailing Address N46W5455 Spring Ct
 City Cedarburg State WI Zip Code 53012-2547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Planning & Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-759
 Amount of Each Receipt this Period 77.00
 Memo Item

B. Douglas P. Bates
 Full Name (Last, First, Middle Initial)
 Mailing Address 5413 Mount Corcoran PI
 City Burke State VA Zip Code 22015-2188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-526
 Amount of Each Receipt this Period 55.00
 Memo Item

C. Douglas P. Bates
 Full Name (Last, First, Middle Initial)
 Mailing Address 5413 Mount Corcoran PI
 City Burke State VA Zip Code 22015-2188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-525
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	187.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 90
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Blaise C. Beaulier
Full Name (Last, First, Middle Initial)
Mailing Address 23300 Dover Line Rd
City Waterford State WI Zip Code 53185-4908
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Ent Proj & Supp
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **498.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-898
Amount of Each Receipt this Period **83.00**
 Memo Item

B. Blaise C. Beaulier
Full Name (Last, First, Middle Initial)
Mailing Address 23300 Dover Line Rd
City Waterford State WI Zip Code 53185-4908
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Ent Proj & Supp
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **498.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-897
Amount of Each Receipt this Period **83.00**
 Memo Item

C. Mitchell C. Beer
Full Name (Last, First, Middle Initial)
Mailing Address 3387 Hampton Ct
City Thousand Oaks State CA Zip Code 91362-1130
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-29
Amount of Each Receipt this Period **125.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **291.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Mitchell C. Beer
Full Name (Last, First, Middle Initial)
Mailing Address 3387 Hampton Ct
City Thousand Oaks State CA Zip Code 91362-1130
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-29
Amount of Each Receipt this Period **125.00**
 Memo Item

B. J. Philip Bender
Full Name (Last, First, Middle Initial)
Mailing Address 70 Forest St Apt 18D
City Stamford State CT Zip Code 06901-1881
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-31
Amount of Each Receipt this Period **50.00**
 Memo Item

c. J. Philip Bender
Full Name (Last, First, Middle Initial)
Mailing Address 70 Forest St Apt 18D
City Stamford State CT Zip Code 06901-1881
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-31
Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Beth M. Berger
Full Name (Last, First, Middle Initial)

Mailing Address 4141 N Murray Ave

City Shorewood State WI Zip Code 53211-2011

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Ast Gn Cnl & Ast Sec/Secur

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-521

Amount of Each Receipt this Period 38.00

Memo Item

B. Dwaan C. Black
Full Name (Last, First, Middle Initial)

Mailing Address 3520 Dumbarton Rd NW

City Atlanta State GA Zip Code 30327-2614

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-24

Amount of Each Receipt this Period 42.00

Memo Item

C. Dwaan C. Black
Full Name (Last, First, Middle Initial)

Mailing Address 3520 Dumbarton Rd NW

City Atlanta State GA Zip Code 30327-2614

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-24

Amount of Each Receipt this Period 42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 122.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Garrett J. Bleakley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5460 Chelsea Ave
 City La Jolla State CA Zip Code 92037-7607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-6
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Garrett J. Bleakley
 Full Name (Last, First, Middle Initial)
 Mailing Address 5460 Chelsea Ave
 City La Jolla State CA Zip Code 92037-7607
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-6
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Debra Blevons
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Pine Ct
 City Appleton State WI Zip Code 54914-8222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-66
 Amount of Each Receipt this Period
 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	375.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Debra Blevons
 Full Name (Last, First, Middle Initial)
 Mailing Address 165 Pine Ct
 City Appleton State WI Zip Code 54914-8222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-66
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Timothy John Bohannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 8677 Alvarado Ct
 City Inver Grove State MN Zip Code 55077-3121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-7
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Timothy John Bohannon
 Full Name (Last, First, Middle Initial)
 Mailing Address 8677 Alvarado Ct
 City Inver Grove State MN Zip Code 55077-3121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-7
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Sandra L. Botcher
Full Name (Last, First, Middle Initial)

Mailing Address 10260 N Range Line C

City Mequon	State WI	Zip Code 53092
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Facility Ops
-------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 201603111983-770

Amount of Each Receipt this Period
100.00

Memo Item

B. Sandra L. Botcher
Full Name (Last, First, Middle Initial)

Mailing Address 10260 N Range Line C

City Mequon	State WI	Zip Code 53092
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Facility Ops
-------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016032919752-769

Amount of Each Receipt this Period
100.00

Memo Item

C. Jennifer L. Brase
Full Name (Last, First, Middle Initial)

Mailing Address 12877 N Cobblestone Ct

City Mequon	State WI	Zip Code 53097-1812
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Div & Inclusion
-------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016032919752-802

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Michael T. Byrne
Full Name (Last, First, Middle Initial)

Mailing Address 395 La Casa Via

City Walnut Creek State CA Zip Code 94598-4842

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-22

Amount of Each Receipt this Period
208.00

Memo Item

B. Michael T. Byrne
Full Name (Last, First, Middle Initial)

Mailing Address 395 La Casa Via

City Walnut Creek State CA Zip Code 94598-4842

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-22

Amount of Each Receipt this Period
208.00

Memo Item

C. Michael G. Carter
Full Name (Last, First, Middle Initial)

Mailing Address 7322 N Mohawk Rd

City Fox Point State WI Zip Code 53217-3454

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation EVP & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-904

Amount of Each Receipt this Period
208.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Michael G. Carter
Full Name (Last, First, Middle Initial)

Mailing Address 7322 N Mohawk Rd

City State Zip Code
Fox Point WI 53217-3454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NML EVP & CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-903

Amount of Each Receipt this Period
208.00

Memo Item

B. Greg Castronovo
Full Name (Last, First, Middle Initial)

Mailing Address 317 Evening Star Ln

City State Zip Code
Bozeman MT 59715-7738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-38

Amount of Each Receipt this Period
42.00

Memo Item

C. Greg Castronovo
Full Name (Last, First, Middle Initial)

Mailing Address 317 Evening Star Ln

City State Zip Code
Bozeman MT 59715-7738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-38

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 292.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Scott G. Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 High Meadow Ln
 City Amherst State NH Zip Code 03031-2554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-37
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. Scott G. Christensen
 Full Name (Last, First, Middle Initial)
 Mailing Address 12 High Meadow Ln
 City Amherst State NH Zip Code 03031-2554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-37
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Eric P. Christophersen
 Full Name (Last, First, Middle Initial)
 Mailing Address N25W27286 Fairmount Ct
 City Pewaukee State WI Zip Code 53072-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML
 Occupation VP Strat Phil & Comm Rel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 201603111983-658
 Amount of Each Receipt this Period
 90.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Eric P. Christophersen
 Full Name (Last, First, Middle Initial)
 Mailing Address N25W27286 Fairmount Ct
 City Pewaukee State WI Zip Code 53072-4962
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Strat Phil & Comm Rel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **540.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-657
 Amount of Each Receipt this Period **90.00**
 Memo Item

B. R. Michael Condrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 907 Williamson Dr
 City Raleigh State NC Zip Code 27608-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-3
 Amount of Each Receipt this Period **208.00**
 Memo Item

C. R. Michael Condrey
 Full Name (Last, First, Middle Initial)
 Mailing Address 907 Williamson Dr
 City Raleigh State NC Zip Code 27608-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-3
 Amount of Each Receipt this Period **208.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	506.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Tait Cruse
 Full Name (Last, First, Middle Initial)
 Mailing Address 2961 Belclaire Dr
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 03 / 15 / 2016
Transaction ID : 2016031519747-28
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Tait Cruse
 Full Name (Last, First, Middle Initial)
 Mailing Address 2961 Belclaire Dr
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 03 / 31 / 2016
Transaction ID : 2016033119747-28
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Brian R. Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 6251 S Billings Way
 City Centennial State CO Zip Code 80111-6009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 03 / 15 / 2016
Transaction ID : 2016031519747-20
 Amount of Each Receipt this Period
 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Brian R. Cunningham
 Full Name (Last, First, Middle Initial)
 Mailing Address 6251 S Billings Way
 City Centennial State CO Zip Code 80111-6009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-20
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Paul Dodd
 Full Name (Last, First, Middle Initial)
 Mailing Address 7078 E Genesee St
 City Fayetteville State NY Zip Code 13066-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-25
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Paul Dodd
 Full Name (Last, First, Middle Initial)
 Mailing Address 7078 E Genesee St
 City Fayetteville State NY Zip Code 13066-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-25
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Steven Dugal
Full Name (Last, First, Middle Initial)

Mailing Address 9 Falcon Dr

City Mandeville State LA Zip Code 70471-2952

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-26

Amount of Each Receipt this Period
208.00

Memo Item

B. Steven Dugal
Full Name (Last, First, Middle Initial)

Mailing Address 9 Falcon Dr

City Mandeville State LA Zip Code 70471-2952

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-26

Amount of Each Receipt this Period
208.00

Memo Item

C. John E. Dunn
Full Name (Last, First, Middle Initial)

Mailing Address 4656 N Wilshire Rd

City Whitefish Bay State WI Zip Code 53211-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer NML
Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-594

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 471.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. John E. Dunn
Full Name (Last, First, Middle Initial)

Mailing Address 4656 N Wilshire Rd

City State Zip Code
Whitefish Bay WI 53211-1260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NML VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-593

Amount of Each Receipt this Period
55.00

Memo Item

B. Keith A. Erhard
Full Name (Last, First, Middle Initial)

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-14

Amount of Each Receipt this Period
42.00

Memo Item

C. Keith A. Erhard
Full Name (Last, First, Middle Initial)

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-14

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 139.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. John C. Ertz
Full Name (Last, First, Middle Initial)

Mailing Address 18235 Shaker Blvd

City Shaker Heights	State OH	Zip Code 44120-1754
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-13

Amount of Each Receipt this Period

150.00

 Memo Item

B. John C. Ertz
Full Name (Last, First, Middle Initial)

Mailing Address 18235 Shaker Blvd

City Shaker Heights	State OH	Zip Code 44120-1754
------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016033119747-13

Amount of Each Receipt this Period

150.00

 Memo Item

C. Lee M. Fortenberry
Full Name (Last, First, Middle Initial)

Mailing Address 114 Lake Ridge Dr

City Madison	State MS	Zip Code 39110-8291
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **252.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-39

Amount of Each Receipt this Period

42.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	342.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Lee M. Fortenberry
 Full Name (Last, First, Middle Initial)
 Mailing Address 114 Lake Ridge Dr
 City Madison State MS Zip Code 39110-8291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-39
 Amount of Each Receipt this Period
 42.00
 Memo Item

B. Lance P. Franczyk
 Full Name (Last, First, Middle Initial)
 Mailing Address 2224 E 24th St
 City Tulsa State OK Zip Code 74114-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-40
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. Lance P. Franczyk
 Full Name (Last, First, Middle Initial)
 Mailing Address 2224 E 24th St
 City Tulsa State OK Zip Code 74114-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-40
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	192.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Robert T. Frieling
Full Name (Last, First, Middle Initial)
Mailing Address 4 Windy Hill Ln
City Wayland State MA Zip Code 01778-2613
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2016
Transaction ID : 2016031519747-12
Amount of Each Receipt this Period
125.00
 Memo Item

B. Robert T. Frieling
Full Name (Last, First, Middle Initial)
Mailing Address 4 Windy Hill Ln
City Wayland State MA Zip Code 01778-2613
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016
Transaction ID : 2016033119747-12
Amount of Each Receipt this Period
125.00
 Memo Item

c. Chris K. Gawart
Full Name (Last, First, Middle Initial)
Mailing Address 1610 N Prospect Ave
City Milwaukee State WI Zip Code 53202-6702
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP & Tax Cnsl
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016
Transaction ID : 2016032919752-601
Amount of Each Receipt this Period
35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial) A. Timothy J. Gerend		Date of Receipt MM / DD / YYYY 03 / 15 / 2016 Transaction ID : 201603111983-588
Mailing Address 5421 N Idlewild Ave		Amount of Each Receipt this Period 124.00
City Whitefish Bay	State WI	Zip Code 53217-5331
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NML	Occupation Svp Distribution Growth & Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00	

Full Name (Last, First, Middle Initial) B. Timothy J. Gerend		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : 2016032919752-587
Mailing Address 5421 N Idlewild Ave		Amount of Each Receipt this Period 124.00
City Whitefish Bay	State WI	Zip Code 53217-5331
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NML	Occupation Svp Distribution Growth & Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 744.00	

Full Name (Last, First, Middle Initial) C. Walter M. Givler		Date of Receipt MM / DD / YYYY 03 / 15 / 2016 Transaction ID : 201603111983-582
Mailing Address 2036 N Prospect Ave		Amount of Each Receipt this Period 42.00
City Milwaukee	State WI	Zip Code 53202-1260
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NML	Occupation VP Solvency Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Walter M. Givler
 Full Name (Last, First, Middle Initial)
 Mailing Address 2036 N Prospect Ave
 City Milwaukee State WI Zip Code 53202-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Solvency Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016032919752-581
 Amount of Each Receipt this Period
 42.00
 Memo Item

B. Mitchell B. Glover
 Full Name (Last, First, Middle Initial)
 Mailing Address 6700 Old Darby Trl NE
 City Ada State MI Zip Code 49301-8360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-11
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Mitchell B. Glover
 Full Name (Last, First, Middle Initial)
 Mailing Address 6700 Old Darby Trl NE
 City Ada State MI Zip Code 49301-8360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-11
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	458.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Thomas J. Goes
Full Name (Last, First, Middle Initial)

Mailing Address 1000 Legion Pl
Ste 140

City Orlando State FL Zip Code 32801-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-61

Amount of Each Receipt this Period
42.00

Memo Item

B. Thomas J. Goes
Full Name (Last, First, Middle Initial)

Mailing Address 1000 Legion Pl
Ste 140

City Orlando State FL Zip Code 32801-1058

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-61

Amount of Each Receipt this Period
42.00

Memo Item

C. Kimberley Goode
Full Name (Last, First, Middle Initial)

Mailing Address 2485 W Fairy Chasm Rd
R

City River Hills State WI Zip Code 53217-1536

FEC ID number of contributing federal political committee. **C**

Name of Employer NML
Occupation VP Comm & Corp Aff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
558.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-537

Amount of Each Receipt this Period
93.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 177.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Kimberley Goode
Full Name (Last, First, Middle Initial)
Mailing Address 2485 W Fairy Chasm Rd
R
City River Hills State WI Zip Code 53217-1536
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Comm & Corp Aff
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **558.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-536
Amount of Each Receipt this Period **93.00**
 Memo Item

B. Patrick K. Gores
Full Name (Last, First, Middle Initial)
Mailing Address 2702 28th Ave S
City Fargo State ND Zip Code 58103-5045
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **252.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-5
Amount of Each Receipt this Period **42.00**
 Memo Item

C. Patrick K. Gores
Full Name (Last, First, Middle Initial)
Mailing Address 2702 28th Ave S
City Fargo State ND Zip Code 58103-5045
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **252.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-5
Amount of Each Receipt this Period **42.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	177.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Tom Goris Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 4735 Wellington Dr

City Long Grove State IL Zip Code 60047-5223

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-23

Amount of Each Receipt this Period
208.00

Memo Item

B. Tom Goris Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 4735 Wellington Dr

City Long Grove State IL Zip Code 60047-5223

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-23

Amount of Each Receipt this Period
208.00

Memo Item

C. Todd Matthew Grabner
Full Name (Last, First, Middle Initial)

Mailing Address 3086 E Silver Hawk Dr

City Holladay State UT Zip Code 84121-1572

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-70

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	541.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Todd Matthew Grabner
 Full Name (Last, First, Middle Initial)
 Mailing Address 3086 E Silver Hawk Dr
 City Holladay State UT Zip Code 84121-1572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-70
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. John M. Grogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 7860 N Club Cir
 City Fox Point State WI Zip Code 53217-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML
 Occupation Svp Ins & Invest Prod
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 201603111983-946
 Amount of Each Receipt this Period
 208.00
 Memo Item

c. John M. Grogan
 Full Name (Last, First, Middle Initial)
 Mailing Address 7860 N Club Cir
 City Fox Point State WI Zip Code 53217-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML
 Occupation Svp Ins & Invest Prod
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016032919752-945
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Stephen Gross
Full Name (Last, First, Middle Initial)

Mailing Address 1022 Savonne Ct

City Chesterfield	State MO	Zip Code 63005-4977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-41

Amount of Each Receipt this Period

125.00

 Memo Item

B. Stephen Gross
Full Name (Last, First, Middle Initial)

Mailing Address 1022 Savonne Ct

City Chesterfield	State MO	Zip Code 63005-4977
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016033119747-41

Amount of Each Receipt this Period

125.00

 Memo Item

C. Thomas C. Guay
Full Name (Last, First, Middle Initial)

Mailing Address W73N377 Mulberry Ave

City Cedarburg	State WI	Zip Code 53012-2648
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Risk Selection Strat
-------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **486.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 201603111983-608

Amount of Each Receipt this Period

81.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	331.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Thomas C. Guay
 Full Name (Last, First, Middle Initial)
 Mailing Address W73N377 Mulberry Ave
 City Cedarburg State WI Zip Code 53012-2648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Risk Selection Strat
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **486.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-607
 Amount of Each Receipt this Period **81.00**
 Memo Item

B. Stephen T. Guinan
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Waverly Cir
 City Phoenixville State PA Zip Code 19460-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-36
 Amount of Each Receipt this Period **42.00**
 Memo Item

C. Stephen T. Guinan
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Waverly Cir
 City Phoenixville State PA Zip Code 19460-2500
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-36
 Amount of Each Receipt this Period **42.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **165.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Gerard M. Hempstead
Full Name (Last, First, Middle Initial)
Mailing Address 49 W Walling Dr
City Creve Coeur State MO Zip Code 63141-7371
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.98

Date of Receipt
MM / DD / YYYY
03 / 15 / 2016
Transaction ID : 2016031519747-52
Amount of Each Receipt this Period
83.33
 Memo Item

B. Gerard M. Hempstead
Full Name (Last, First, Middle Initial)
Mailing Address 49 W Walling Dr
City Creve Coeur State MO Zip Code 63141-7371
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 499.98

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016
Transaction ID : 2016033119747-52
Amount of Each Receipt this Period
83.33
 Memo Item

C. Mark J. Heurung
Full Name (Last, First, Middle Initial)
Mailing Address 3315 Graham Hill Rd
City Orono State MN Zip Code 55356-5501
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2016
Transaction ID : 2016031519747-35
Amount of Each Receipt this Period
208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	374.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Mark J. Heurung
Full Name (Last, First, Middle Initial)

Mailing Address 3315 Graham Hill Rd

City Orono State MN Zip Code 55356-5501

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-35

Amount of Each Receipt this Period 208.00

Memo Item

B. Gary M. Hewitt
Full Name (Last, First, Middle Initial)

Mailing Address 2045 Elm Tree Rd

City Elm Grove State WI Zip Code 53122-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Treas & Inv Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-835

Amount of Each Receipt this Period 94.00

Memo Item

C. Gary M. Hewitt
Full Name (Last, First, Middle Initial)

Mailing Address 2045 Elm Tree Rd

City Elm Grove State WI Zip Code 53122-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Treas & Inv Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 564.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-834

Amount of Each Receipt this Period 94.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	396.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Steve H. Holter
Full Name (Last, First, Middle Initial)
Mailing Address 11390 N Creekside Ct
City Mequon State WI Zip Code 53092-4377
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-44
Amount of Each Receipt this Period
208.00
 Memo Item

B. Steve H. Holter
Full Name (Last, First, Middle Initial)
Mailing Address 11390 N Creekside Ct
City Mequon State WI Zip Code 53092-4377
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-44
Amount of Each Receipt this Period
208.00
 Memo Item

C. Scott Iodice
Full Name (Last, First, Middle Initial)
Mailing Address 1930 Old Court Rd
City Ruxton State MD Zip Code 21204-1849
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-17
Amount of Each Receipt this Period
125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Scott Iodice
Full Name (Last, First, Middle Initial)

Mailing Address 1930 Old Court Rd

City Ruxton State MD Zip Code 21204-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-17

Amount of Each Receipt this Period **125.00**

Memo Item

B. Meg E. Jansky
Full Name (Last, First, Middle Initial)

Mailing Address 4611 N Wildwood Ave

City Whitefish Bay State WI Zip Code 53211-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Field Integration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-894

Amount of Each Receipt this Period **44.00**

Memo Item

c. Meg E. Jansky
Full Name (Last, First, Middle Initial)

Mailing Address 4611 N Wildwood Ave

City Whitefish Bay State WI Zip Code 53211-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Field Integration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **264.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-893

Amount of Each Receipt this Period **44.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **213.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Ronald P. Joelson
Full Name (Last, First, Middle Initial)

Mailing Address 825 N Prospect Ave
U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation EVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-494

Amount of Each Receipt this Period
208.00

Memo Item

B. Ronald P. Joelson
Full Name (Last, First, Middle Initial)

Mailing Address 825 N Prospect Ave
U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation EVP & CIO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-493

Amount of Each Receipt this Period
208.00

Memo Item

C. Todd M. Jones
Full Name (Last, First, Middle Initial)

Mailing Address W252N4956 Aberdeen Dr

City Pewaukee State WI Zip Code 53072-1351

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Vice President-Cntrl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
564.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-744

Amount of Each Receipt this Period
94.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 510.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Todd M. Jones
Full Name (Last, First, Middle Initial)

Mailing Address W252N4956 Aberdeen Dr

City Pewaukee State WI Zip Code 53072-1351

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Vice President-Cntrl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **564.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : 2016032919752-743

Amount of Each Receipt this Period **94.00**

Memo Item

B. Shawn F. Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 7812 Remington Rd

City Montgomery State OH Zip Code 45242-7130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 15 / 2016**

Transaction ID : 2016031519747-58

Amount of Each Receipt this Period **125.00**

Memo Item

c. Shawn F. Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 7812 Remington Rd

City Montgomery State OH Zip Code 45242-7130

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : 2016033119747-58

Amount of Each Receipt this Period **125.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	344.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Troy B. Kemelgor
Full Name (Last, First, Middle Initial)

Mailing Address 7495 Bridlespur Ln

City Delaware State OH Zip Code 43015-8613

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-54

Amount of Each Receipt this Period 42.00

Memo Item

B. Troy B. Kemelgor
Full Name (Last, First, Middle Initial)

Mailing Address 7495 Bridlespur Ln

City Delaware State OH Zip Code 43015-8613

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-54

Amount of Each Receipt this Period 42.00

Memo Item

C. David Daniel Kiecker
Full Name (Last, First, Middle Initial)

Mailing Address 11696 Approach Blvd

City Fishers State IN Zip Code 46037-4146

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-65

Amount of Each Receipt this Period 208.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 292.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. David Daniel Kiecker
Full Name (Last, First, Middle Initial)

Mailing Address 11696 Approach Blvd

City Fishers State IN Zip Code 46037-4146

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-65

Amount of Each Receipt this Period
208.00

Memo Item

B. William S. Koch
Full Name (Last, First, Middle Initial)

Mailing Address 4645 Swilcan Bridge Ln S

City Jacksonville State FL Zip Code 32224-5621

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-9

Amount of Each Receipt this Period
125.00

Memo Item

C. William S. Koch
Full Name (Last, First, Middle Initial)

Mailing Address 4645 Swilcan Bridge Ln S

City Jacksonville State FL Zip Code 32224-5621

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-9

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	458.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. John L. Kordsmeier
 Full Name (Last, First, Middle Initial)
 Mailing Address 2522 W Daphne Rd
 City Glendale State WI Zip Code 53209-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Strat Phil & Comm Rel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **558.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-973
 Amount of Each Receipt this Period **93.00**
 Memo Item

B. John L. Kordsmeier
 Full Name (Last, First, Middle Initial)
 Mailing Address 2522 W Daphne Rd
 City Glendale State WI Zip Code 53209-3300
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Strat Phil & Comm Rel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **558.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-972
 Amount of Each Receipt this Period **93.00**
 Memo Item

C. Steven H. Kosnick
 Full Name (Last, First, Middle Initial)
 Mailing Address 5799 Windsona Cir
 City Fitchburg State WI Zip Code 53711-5839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-4
 Amount of Each Receipt this Period **42.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	228.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Steven H. Kosnick
 Full Name (Last, First, Middle Initial)
 Mailing Address 5799 Windsona Cir
 City Fitchburg State WI Zip Code 53711-5839
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 252.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-4
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Carol L. Kracht
 Full Name (Last, First, Middle Initial)
 Mailing Address 3357 N Lake Dr
 City Milwaukee State WI Zip Code 53211-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Dep Gc/Sec & Board Rel
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 264.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-905
 Amount of Each Receipt this Period 44.00
 Memo Item

C. Carol L. Kracht
 Full Name (Last, First, Middle Initial)
 Mailing Address 3357 N Lake Dr
 City Milwaukee State WI Zip Code 53211-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Dep Gc/Sec & Board Rel
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 264.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-904
 Amount of Each Receipt this Period 44.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	130.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. M. Kevin Lawhon
Full Name (Last, First, Middle Initial)

Mailing Address 2430 Vanderbilt Beach Rd
Unit 108-349

City Naples State FL Zip Code 34109-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-47

Amount of Each Receipt this Period
83.33

Memo Item

B. M. Kevin Lawhon
Full Name (Last, First, Middle Initial)

Mailing Address 2430 Vanderbilt Beach Rd
Unit 108-349

City Naples State FL Zip Code 34109-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-47

Amount of Each Receipt this Period
83.33

Memo Item

C. Robert D. Lowrey
Full Name (Last, First, Middle Initial)

Mailing Address 1108 W Goldthread Cir

City Sioux Falls State SD Zip Code 57108-2824

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-8

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	208.66
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Robert D. Lowrey
Full Name (Last, First, Middle Initial)

Mailing Address 1108 W Goldthread Cir

City State Zip Code
Sioux Falls SD 57108-2824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-8

Amount of Each Receipt this Period
42.00

Memo Item

B. Matthew James Lueder
Full Name (Last, First, Middle Initial)

Mailing Address 2359 N Wahl Ave

City State Zip Code
Milwaukee WI 53211-4513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-64

Amount of Each Receipt this Period
125.00

Memo Item

C. Matthew James Lueder
Full Name (Last, First, Middle Initial)

Mailing Address 2359 N Wahl Ave

City State Zip Code
Milwaukee WI 53211-4513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-64

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	292.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Jeffrey J. Lueken
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 E Goodrich Ln
 City Fox Point State WI Zip Code 53217-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Securities
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1008.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-832
 Amount of Each Receipt this Period **168.00**
 Memo Item

B. Jeffrey J. Lueken
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 E Goodrich Ln
 City Fox Point State WI Zip Code 53217-2946
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Securities
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1008.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-831
 Amount of Each Receipt this Period **168.00**
 Memo Item

C. Stephanie A. Lyons
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 E Sylvan Ave
 City Whitefish Bay State WI Zip Code 53217-5353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP - Era
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **312.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-686
 Amount of Each Receipt this Period **52.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **388.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Stephanie A. Lyons
 Full Name (Last, First, Middle Initial)
 Mailing Address 809 E Sylvan Ave
 City State Zip Code
 Whitefish Bay WI 53217-5353
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NML VP - Era
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 312.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016032919752-685
 Amount of Each Receipt this Period
 52.00
 Memo Item

B. Cory A. Mahaffey
 Full Name (Last, First, Middle Initial)
 Mailing Address 13764 Knaus Rd
 City State Zip Code
 Lake Oswego OR 97034-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-57
 Amount of Each Receipt this Period
 42.00
 Memo Item

C. Cory A. Mahaffey
 Full Name (Last, First, Middle Initial)
 Mailing Address 13764 Knaus Rd
 City State Zip Code
 Lake Oswego OR 97034-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-57
 Amount of Each Receipt this Period
 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	136.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Raymond J. Manista
Full Name (Last, First, Middle Initial)
Mailing Address 7236 N Crossway Rd
City Fox Point State WI Zip Code 53217-3519
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp Gen Cnsl & Sec
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-533
Amount of Each Receipt this Period **208.00**
 Memo Item

B. Raymond J. Manista
Full Name (Last, First, Middle Initial)
Mailing Address 7236 N Crossway Rd
City Fox Point State WI Zip Code 53217-3519
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp Gen Cnsl & Sec
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-532
Amount of Each Receipt this Period **208.00**
 Memo Item

C. Steven C. Mannebach
Full Name (Last, First, Middle Initial)
Mailing Address 101 Colorado St # 260
City Austin State TX Zip Code 78701-4103
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Managing Partner
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **462.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-639
Amount of Each Receipt this Period **77.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	493.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Steven C. Mannebach
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Colorado St
 # 260
 City Austin State TX Zip Code 78701-4103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Managing Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **462.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-638
 Amount of Each Receipt this Period **77.00**
 Memo Item

B. David C. Mc Avoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Mountview Rd
 City Wellesley State MA Zip Code 02481-2757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-2
 Amount of Each Receipt this Period **208.00**
 Memo Item

C. David C. Mc Avoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 11 Mountview Rd
 City Wellesley State MA Zip Code 02481-2757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-2
 Amount of Each Receipt this Period **208.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	493.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Brian W. McClure
Full Name (Last, First, Middle Initial)

Mailing Address 1402 Wyndemere Point Dr

City Champaign State IL Zip Code 61822-3349

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-62

Amount of Each Receipt this Period
42.00

Memo Item

B. Brian W. McClure
Full Name (Last, First, Middle Initial)

Mailing Address 1402 Wyndemere Point Dr

City Champaign State IL Zip Code 61822-3349

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-62

Amount of Each Receipt this Period
42.00

Memo Item

C. Mark J. McLennon
Full Name (Last, First, Middle Initial)

Mailing Address 2571 N 86th St

City Wauwatosa State WI Zip Code 53226-1921

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Ips Bus Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-565

Amount of Each Receipt this Period
39.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 123.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Jim E. Meeks Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 2460 Lennox Dr
City Germantown State TN Zip Code 38138-4925
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-16
Amount of Each Receipt this Period 125.00
 Memo Item

B. Jim E. Meeks Jr.
Full Name (Last, First, Middle Initial)
Mailing Address 2460 Lennox Dr
City Germantown State TN Zip Code 38138-4925
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-16
Amount of Each Receipt this Period 125.00
 Memo Item

C. Ben Miller
Full Name (Last, First, Middle Initial)
Mailing Address 11315 E Winchcomb Dr
City Scottsdale State AZ Zip Code 85255-1638
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-51
Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 53 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Ben Miller
Full Name (Last, First, Middle Initial)
Mailing Address 11315 E Winchcomb Dr
City State Zip Code
Scottsdale AZ 85255-1638
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed General Insurance Agent
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016
Transaction ID : 2016033119747-51
Amount of Each Receipt this Period
125.00
 Memo Item

B. Kevin E. Miller
Full Name (Last, First, Middle Initial)
Mailing Address 214 Schenley Rd
City State Zip Code
Pittsburgh PA 15217-1171
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed General Insurance Agent
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1248.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2016
Transaction ID : 2016031519747-34
Amount of Each Receipt this Period
208.00
 Memo Item

C. Kevin E. Miller
Full Name (Last, First, Middle Initial)
Mailing Address 214 Schenley Rd
City State Zip Code
Pittsburgh PA 15217-1171
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed General Insurance Agent
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1248.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016
Transaction ID : 2016033119747-34
Amount of Each Receipt this Period
208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	541.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Christian Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 640 E Carlisle Ave
City Whitefish Bay State WI Zip Code 53217-4832
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Pres & CEO Wealth Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-591
Amount of Each Receipt this Period 50.00
 Memo Item

B. Christian Mitchell
Full Name (Last, First, Middle Initial)
Mailing Address 640 E Carlisle Ave
City Whitefish Bay State WI Zip Code 53217-4832
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Pres & CEO Wealth Mgmt
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-590
Amount of Each Receipt this Period 50.00
 Memo Item

C. Karen A. Molloy
Full Name (Last, First, Middle Initial)
Mailing Address 2004 N 85th St
City Wauwatosa State WI Zip Code 53226-2846
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Treasurer
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 216.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-816
Amount of Each Receipt this Period 36.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 136.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Timothy Michael Mulroy
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 Oakbrook
 City Coto De Caza State CA Zip Code 92679-4742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2016
Transaction ID : 2016031519747-69
 Amount of Each Receipt this Period
42.00
 Memo Item

B. Timothy Michael Mulroy
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 Oakbrook
 City Coto De Caza State CA Zip Code 92679-4742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **252.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016
Transaction ID : 2016033119747-69
 Amount of Each Receipt this Period
42.00
 Memo Item

C. Kevin O Connell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4807 W Woodmere Rd
 City Tampa State FL Zip Code 33609-3632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2016
Transaction ID : 2016031519747-68
 Amount of Each Receipt this Period
125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Kevin O Connell
 Full Name (Last, First, Middle Initial)
 Mailing Address 4807 W Woodmere Rd
 City Tampa State FL Zip Code 33609-3632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-68
 Amount of Each Receipt this Period **125.00**
 Memo Item

B. Gregory C. Oberland
 Full Name (Last, First, Middle Initial)
 Mailing Address 4514 N Lake Dr
 City Whitefish Bay State WI Zip Code 53211-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-554
 Amount of Each Receipt this Period **208.00**
 Memo Item

c. Gregory C. Oberland
 Full Name (Last, First, Middle Initial)
 Mailing Address 4514 N Lake Dr
 City Whitefish Bay State WI Zip Code 53211-1252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-553
 Amount of Each Receipt this Period **208.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	541.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 57 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Brian G. Petrando
Full Name (Last, First, Middle Initial)

Mailing Address 9533 Marbella Dr

City Fort Worth State TX Zip Code 76126-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-21

Amount of Each Receipt this Period
42.00

Memo Item

B. Brian G. Petrando
Full Name (Last, First, Middle Initial)

Mailing Address 9533 Marbella Dr

City Fort Worth State TX Zip Code 76126-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-21

Amount of Each Receipt this Period
42.00

Memo Item

C. Matthew J. Plocher
Full Name (Last, First, Middle Initial)

Mailing Address 4324 Chevy Chase Dr

City La Canada State CA Zip Code 91011-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-43

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 209.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Matthew J. Plocher
 Full Name (Last, First, Middle Initial)
 Mailing Address 4324 Chevy Chase Dr
 City La Canada State CA Zip Code 91011-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-43
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Charles R. Pruett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1019 Stonewall Dr
 City Nashville State TN Zip Code 37220-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-45
 Amount of Each Receipt this Period
 208.00
 Memo Item

c. Charles R. Pruett
 Full Name (Last, First, Middle Initial)
 Mailing Address 1019 Stonewall Dr
 City Nashville State TN Zip Code 37220-1022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-45
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 Insurance Company Federal PAC

A. Steven M. Radke
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 W Ravine Ct
 City Thiensville State WI Zip Code 53092-5861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **318.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-757
 Amount of Each Receipt this Period **53.00**
 Memo Item

B. Steven M. Radke
 Full Name (Last, First, Middle Initial)
 Mailing Address 111 W Ravine Ct
 City Thiensville State WI Zip Code 53092-5861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Govt Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **318.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-756
 Amount of Each Receipt this Period **53.00**
 Memo Item

C. Jeff D. Reeter
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Williamsburg Ln
 City Houston State TX Zip Code 77024-5144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-59
 Amount of Each Receipt this Period **125.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	231.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial) A. Jeff D. Reeter		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : 2016033119747-59
Mailing Address 7 Williamsburg Ln		Amount of Each Receipt this Period 125.00
City Houston	State TX	Zip Code 77024-5144
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. David R. Remstad		Date of Receipt MM / DD / YYYY 03 / 15 / 2016 Transaction ID : 201603111983-698
Mailing Address 2634 N Lake Dr		Amount of Each Receipt this Period 105.00
City Milwaukee	State WI	Zip Code 53211-3837
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NML	Occupation Svp & Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

Full Name (Last, First, Middle Initial) C. David R. Remstad		Date of Receipt MM / DD / YYYY 03 / 31 / 2016 Transaction ID : 2016032919752-697
Mailing Address 2634 N Lake Dr		Amount of Each Receipt this Period 105.00
City Milwaukee	State WI	Zip Code 53211-3837
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer NML	Occupation Svp & Chief Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	

SUBTOTAL of Receipts This Page (optional).....▶	335.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Adam T. Rhoades
Full Name (Last, First, Middle Initial)

Mailing Address 2038 Rosemont Pl

City Vestavia State AL Zip Code 35243-1767

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-48

Amount of Each Receipt this Period
208.00

Memo Item

B. Adam T. Rhoades
Full Name (Last, First, Middle Initial)

Mailing Address 2038 Rosemont Pl

City Vestavia State AL Zip Code 35243-1767

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-48

Amount of Each Receipt this Period
208.00

Memo Item

C. Wesley H. Richardson
Full Name (Last, First, Middle Initial)

Mailing Address 73 Oakwood Rd

City Huntington State WV Zip Code 25701-4148

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-71

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 541.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Wesley H. Richardson
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 Oakwood Rd
 City State Zip Code
 Huntington WV 25701-4148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-71
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. J. Daniel Rivers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 River Ridge Cv
 City State Zip Code
 Prospect KY 40059-8038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-19
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. J. Daniel Rivers
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 River Ridge Cv
 City State Zip Code
 Prospect KY 40059-8038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed General Insurance Agent
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1248.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-19
 Amount of Each Receipt this Period
 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	541.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Bethany M. Rodenhuis
 Full Name (Last, First, Middle Initial)
 Mailing Address 3900 N Lake Dr
 City Shorewood State WI Zip Code 53211-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Distr Strat & Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-593
 Amount of Each Receipt this Period 133.00
 Memo Item

B. Bethany M. Rodenhuis
 Full Name (Last, First, Middle Initial)
 Mailing Address 3900 N Lake Dr
 City Shorewood State WI Zip Code 53211-2448
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Distr Strat & Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-592
 Amount of Each Receipt this Period 133.00
 Memo Item

C. Tammy M. Rou
 Full Name (Last, First, Middle Initial)
 Mailing Address N99W14710 Amber Dr
 City Germantown State WI Zip Code 53022-6611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP & Chief Risk Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-749
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 326.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 64 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Tammy M. Rouo
 Full Name (Last, First, Middle Initial)
 Mailing Address N99W14710 Amber Dr
 City Germantown State WI Zip Code 53022-6611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP & Chief Risk Officer
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **360.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-748
 Amount of Each Receipt this Period **60.00**
 Memo Item

B. Matt Russo
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 Deep Valley Rd
 City New Canaan State CT Zip Code 06840-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-50
 Amount of Each Receipt this Period **125.00**
 Memo Item

C. Matt Russo
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 Deep Valley Rd
 City New Canaan State CT Zip Code 06840-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-50
 Amount of Each Receipt this Period **125.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. R. Philip Sarnecki
Full Name (Last, First, Middle Initial)
Mailing Address 18240 Melrose Dr

City Bucyrus	State KS	Zip Code 66013-9081
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-30

Amount of Each Receipt this Period

83.33

 Memo Item

B. R. Philip Sarnecki
Full Name (Last, First, Middle Initial)
Mailing Address 18240 Melrose Dr

City Bucyrus	State KS	Zip Code 66013-9081
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
499.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016033119747-30

Amount of Each Receipt this Period

83.33

 Memo Item

C. Joseph M. Savino
Full Name (Last, First, Middle Initial)
Mailing Address 8 Benedek Rd

City Princeton	State NJ	Zip Code 08540-2227
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-1

Amount of Each Receipt this Period

208.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	374.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Joseph M. Savino
Full Name (Last, First, Middle Initial)

Mailing Address 8 Benedek Rd

City Princeton State NJ Zip Code 08540-2227

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-1

Amount of Each Receipt this Period 208.00

Memo Item

B. Timothy G. Schaefer
Full Name (Last, First, Middle Initial)

Mailing Address 1013 E Lexington Blvd

City Whitefish Bay State WI Zip Code 53217-5381

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation EVP Ent Ops & Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-789

Amount of Each Receipt this Period 208.00

Memo Item

c. Timothy G. Schaefer
Full Name (Last, First, Middle Initial)

Mailing Address 1013 E Lexington Blvd

City Whitefish Bay State WI Zip Code 53217-5381

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation EVP Ent Ops & Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1248.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-788

Amount of Each Receipt this Period 208.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	624.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. John E. Schlifske
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 Greenway Ter
 City Elm Grove State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Chairman & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-715
 Amount of Each Receipt this Period **208.00**
 Memo Item

B. John E. Schlifske
 Full Name (Last, First, Middle Initial)
 Mailing Address 1500 Greenway Ter
 City Elm Grove State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Chairman & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-714
 Amount of Each Receipt this Period **208.00**
 Memo Item

C. Kathleen H. Schluter
 Full Name (Last, First, Middle Initial)
 Mailing Address 5057 N Palisades Rd
 City Whitefish Bay State WI Zip Code 53217-5756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Tax Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-715
 Amount of Each Receipt this Period **40.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	456.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Calvin R. Schmidt
 Full Name (Last, First, Middle Initial)
 Mailing Address W205 Allen Rd
 City Oconomowoc State WI Zip Code 53066-9048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Int Cust Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **540.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-733
 Amount of Each Receipt this Period **90.00**
 Memo Item

B. Calvin R. Schmidt
 Full Name (Last, First, Middle Initial)
 Mailing Address W205 Allen Rd
 City Oconomowoc State WI Zip Code 53066-9048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Int Cust Ops
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **540.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-732
 Amount of Each Receipt this Period **90.00**
 Memo Item

C. Rodd Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 1415 E Fairy Chasm Rd # R
 City Bayside State WI Zip Code 53217-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Litig & Dist Counsel
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **264.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-498
 Amount of Each Receipt this Period **44.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **224.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Rodd Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 1415 E Fairy Chasm Rd
 # R
 City Bayside State WI Zip Code 53217-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Litig & Dist Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-497
 Amount of Each Receipt this Period 44.00
 Memo Item

B. Sarah R. Schneider
 Full Name (Last, First, Middle Initial)
 Mailing Address 4380 N Wildwood Ave
 City Shorewood State WI Zip Code 53211-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP-New Business
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-708
 Amount of Each Receipt this Period 36.00
 Memo Item

C. Todd M. Schoon
 Full Name (Last, First, Middle Initial)
 Mailing Address 9400 N Valley Hill Rd
 # R
 City River Hills State WI Zip Code 53217-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Loaned Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-1002
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	288.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Sarah E. Schott
 Full Name (Last, First, Middle Initial)
 Mailing Address 5712 N Kent Ave
 City Whitefish Bay State WI Zip Code 53217-4724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Compliance/Bp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 201603111983-681
 Amount of Each Receipt this Period **55.00**
 Memo Item

B. Sarah E. Schott
 Full Name (Last, First, Middle Initial)
 Mailing Address 5712 N Kent Ave
 City Whitefish Bay State WI Zip Code 53217-4724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Compliance/Bp
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **330.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-680
 Amount of Each Receipt this Period **55.00**
 Memo Item

C. Adam David Seiden
 Full Name (Last, First, Middle Initial)
 Mailing Address 44 Sunset Rd
 City Darien State CT Zip Code 06820-3527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-63
 Amount of Each Receipt this Period **208.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **318.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 71 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Adam David Seiden
Full Name (Last, First, Middle Initial)
Mailing Address 44 Sunset Rd
City Darien State CT Zip Code 06820-3527
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016
Transaction ID : 2016033119747-63
Amount of Each Receipt this Period
208.00
 Memo Item

B. Brad P. Seitzinger
Full Name (Last, First, Middle Initial)
Mailing Address 920 Pine Needle Trl
City Oakland Twp State MI Zip Code 48306-1034
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2016
Transaction ID : 2016031519747-33
Amount of Each Receipt this Period
208.00
 Memo Item

C. Brad P. Seitzinger
Full Name (Last, First, Middle Initial)
Mailing Address 920 Pine Needle Trl
City Oakland Twp State MI Zip Code 48306-1034
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed
Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1248.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016
Transaction ID : 2016033119747-33
Amount of Each Receipt this Period
208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	624.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. David W. Simbro
Full Name (Last, First, Middle Initial)

Mailing Address 311 E Erie St
Unit 4

City Milwaukee State WI Zip Code 53202-6040

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Svp Life & Ann Products

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-991

Amount of Each Receipt this Period
85.00

Memo Item

B. David W. Simbro
Full Name (Last, First, Middle Initial)

Mailing Address 311 E Erie St
Unit 4

City Milwaukee State WI Zip Code 53202-6040

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Svp Life & Ann Products

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-990

Amount of Each Receipt this Period
85.00

Memo Item

c. Steve P. Sperka
Full Name (Last, First, Middle Initial)

Mailing Address S67W17735 Copper Oaks Ct

City Muskego State WI Zip Code 53150-7503

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Field Rewards

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
582.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 201603111983-736

Amount of Each Receipt this Period
97.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	267.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Steve P. Sperka
Full Name (Last, First, Middle Initial)

Mailing Address S67W17735 Copper Oaks Ct

City Muskego State WI Zip Code 53150-7503

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Field Rewards

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 582.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-735

Amount of Each Receipt this Period 97.00

Memo Item

B. David G. Stoeffel
Full Name (Last, First, Middle Initial)

Mailing Address 6311 N Lake Dr

City Whitefish Bay State WI Zip Code 53217-4343

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Investment Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-812

Amount of Each Receipt this Period 77.00

Memo Item

c. David G. Stoeffel
Full Name (Last, First, Middle Initial)

Mailing Address 6311 N Lake Dr

City Whitefish Bay State WI Zip Code 53217-4343

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Investment Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-811

Amount of Each Receipt this Period 77.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	251.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 74 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Peter F. Striano III
Full Name (Last, First, Middle Initial)
Mailing Address 11050 NW 78th PI

City Parkland	State FL	Zip Code 33076-4723
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : 2016031519747-46

Amount of Each Receipt this Period

125.00

 Memo Item

B. Peter F. Striano III
Full Name (Last, First, Middle Initial)
Mailing Address 11050 NW 78th PI

City Parkland	State FL	Zip Code 33076-4723
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation General Insurance Agent
-----------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016033119747-46

Amount of Each Receipt this Period

125.00

 Memo Item

C. Brenda J. Stugelmeyer
Full Name (Last, First, Middle Initial)
Mailing Address 6970 W Fox Haven Ct

City Franklin	State WI	Zip Code 53132-7402
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP & Real Estate Counsel
-------------------------	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **234.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

Transaction ID : 2016032919752-815

Amount of Each Receipt this Period

39.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	289.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Christopher P. Swain
 Full Name (Last, First, Middle Initial)
 Mailing Address 10927 N Wyngate Trce
 City Mequon State WI Zip Code 53092-5862
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Msa Investments
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-765
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Michael F. Tews
 Full Name (Last, First, Middle Initial)
 Mailing Address 609 S 249th Cir
 City Waterloo State NE Zip Code 68069-4432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 2016031519747-15
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Michael F. Tews
 Full Name (Last, First, Middle Initial)
 Mailing Address 609 S 249th Cir
 City Waterloo State NE Zip Code 68069-4432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016033119747-15
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	285.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Scott P. Theodore
Full Name (Last, First, Middle Initial)

Mailing Address 12505 Ventana Mesa Cir

City Castle Pines State CO Zip Code 80108-9148

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-27

Amount of Each Receipt this Period
208.00

Memo Item

B. Scott P. Theodore
Full Name (Last, First, Middle Initial)

Mailing Address 12505 Ventana Mesa Cir

City Castle Pines State CO Zip Code 80108-9148

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-27

Amount of Each Receipt this Period
208.00

Memo Item

C. Michael S. Treptow
Full Name (Last, First, Middle Initial)

Mailing Address 8207 N Gray Log Ln

City Fox Point State WI Zip Code 53217-2863

FEC ID number of contributing federal political committee. **C**

Name of Employer NML
Occupation Dir Inv Plg & Ast Mgr Per

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016032919752-827

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 451.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Alex J. Tronco
Full Name (Last, First, Middle Initial)

Mailing Address 11 Stoneridge Dr

City Loudonville State NY Zip Code 12211-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
03 / 15 / 2016
Transaction ID : **2016031519747-56**

Amount of Each Receipt this Period
125.00

Memo Item

B. Alex J. Tronco
Full Name (Last, First, Middle Initial)

Mailing Address 11 Stoneridge Dr

City Loudonville State NY Zip Code 12211-2625

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
03 / 31 / 2016
Transaction ID : **2016033119747-56**

Amount of Each Receipt this Period
125.00

Memo Item

C. Leo C. Tucker
Full Name (Last, First, Middle Initial)

Mailing Address 605 Potomac River Rd

City Mc Lean State VA Zip Code 22102-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
03 / 15 / 2016
Transaction ID : **2016031519747-42**

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **375.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Leo C. Tucker
Full Name (Last, First, Middle Initial)

Mailing Address 605 Potomac River Rd

City State Zip Code
Mc Lean VA 22102-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-42

Amount of Each Receipt this Period
125.00

Memo Item

B. John Van Der Hyde
Full Name (Last, First, Middle Initial)

Mailing Address 849 Sabot Hill Rd

City State Zip Code
Manakin Sabot VA 23103-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 15 / 2016
Transaction ID : 2016031519747-18

Amount of Each Receipt this Period
208.00

Memo Item

C. John Van Der Hyde
Full Name (Last, First, Middle Initial)

Mailing Address 849 Sabot Hill Rd

City State Zip Code
Manakin Sabot VA 23103-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1248.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 2016033119747-18

Amount of Each Receipt this Period
208.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	541.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 79 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Alison F. Watson
Full Name (Last, First, Middle Initial)

Mailing Address 420 Independence Ave SE

City Washington State DC Zip Code 20003-1046

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Fed Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 201603111983-969

Amount of Each Receipt this Period 50.00

Memo Item

B. Alison F. Watson
Full Name (Last, First, Middle Initial)

Mailing Address 420 Independence Ave SE

City Washington State DC Zip Code 20003-1046

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Fed Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-968

Amount of Each Receipt this Period 50.00

Memo Item

C. Jeffrey B. Williams
Full Name (Last, First, Middle Initial)

Mailing Address 2004 N 72nd St

City Wauwatosa State WI Zip Code 53213-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Nmis-Nmwmc Chief Compl Off

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 03 / 31 / 2016
Transaction ID : 2016032919752-542

Amount of Each Receipt this Period 38.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 138.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. Kamilah D. Williams-Kemp
 Full Name (Last, First, Middle Initial)
 Mailing Address 8645 N Dean Cir
 City River Hills State WI Zip Code 53217-2038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Ltc
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **240.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-746
 Amount of Each Receipt this Period **40.00**
 Memo Item

B. Richard Worrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Beretania Cir
 City Charlotte State NC Zip Code 28211-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-55
 Amount of Each Receipt this Period **208.00**
 Memo Item

C. Richard Worrell
 Full Name (Last, First, Middle Initial)
 Mailing Address 2423 Beretania Cir
 City Charlotte State NC Zip Code 28211-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1248.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016033119747-55
 Amount of Each Receipt this Period **208.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	456.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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 Insurance Company Federal PAC

A. John William Wright II
 Full Name (Last, First, Middle Initial)
 Mailing Address 510 King Rd NW
 City Atlanta State GA Zip Code 30342-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 2016031519747-32
 Amount of Each Receipt this Period
 41.67
 Memo Item

B. John William Wright II
 Full Name (Last, First, Middle Initial)
 Mailing Address 510 King Rd NW
 City Atlanta State GA Zip Code 30342-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed
 Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.02

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016033119747-32
 Amount of Each Receipt this Period
 41.67
 Memo Item

C. Conrad C. York
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 511100
 City Milwaukee State WI Zip Code 53203-0191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML
 Occupation VP Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 606.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 201603111983-718
 Amount of Each Receipt this Period
 101.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	184.34
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Conrad C. York
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 511100
 City Milwaukee State WI Zip Code 53203-0191
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation VP Marketing
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **606.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-717
 Amount of Each Receipt this Period **101.00**
 Memo Item

B. Catherine M. Young
 Full Name (Last, First, Middle Initial)
 Mailing Address 929 N Astor Street Unit
 City Milwaukee State WI Zip Code 53202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Ast Gn Cn & Ast Sec/Re
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **240.00**

Date of Receipt **03 / 31 / 2016**
Transaction ID : 2016032919752-1017
 Amount of Each Receipt this Period **40.00**
 Memo Item

C. T. Scott Zach
 Full Name (Last, First, Middle Initial)
 Mailing Address 6630 Country Creek Ln
 City Cedar Rapids State IA Zip Code 52403-7023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) Memo Item
 Aggregate Year-to-Date **750.00**

Date of Receipt **03 / 15 / 2016**
Transaction ID : 2016031519747-49
 Amount of Each Receipt this Period **125.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **266.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. T. Scott Zach
Full Name (Last, First, Middle Initial)

Mailing Address 6630 Country Creek Ln

City Cedar Rapids State IA Zip Code 52403-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : 2016033119747-49

Amount of Each Receipt this Period **125.00**

Memo Item

B. Thomas D. Zale
Full Name (Last, First, Middle Initial)

Mailing Address 2818 E Menlo Blvd

City Shorewood State WI Zip Code 53211-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **03 / 15 / 2016**

Transaction ID : 201603111983-738

Amount of Each Receipt this Period **130.00**

Memo Item

c. Thomas D. Zale
Full Name (Last, First, Middle Initial)

Mailing Address 2818 E Menlo Blvd

City Shorewood State WI Zip Code 53211-2652

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : 2016032919752-737

Amount of Each Receipt this Period **130.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	385.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Rick T. Zehner
Full Name (Last, First, Middle Initial)

Mailing Address 203 W Ravine Baye Rd

City Bayside State WI Zip Code 53217-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Research & Special Projects

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 201603111983-906

Amount of Each Receipt this Period
 41.00

Memo Item

B. Rick T. Zehner
Full Name (Last, First, Middle Initial)

Mailing Address 203 W Ravine Baye Rd

City Bayside State WI Zip Code 53217-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Research & Special Projects

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2016
Transaction ID : 2016032919752-905

Amount of Each Receipt this Period
 41.00

Memo Item

c. Todd O. Zinkgraf
Full Name (Last, First, Middle Initial)

Mailing Address 118 Ferris Dr

City North Prairie State WI Zip Code 53153-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Ent Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 486.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 15 / 2016
Transaction ID : 201603111983-936

Amount of Each Receipt this Period
 81.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	163.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal PAC

A. Todd O. Zinkgraf
Full Name (Last, First, Middle Initial)

Mailing Address 118 Ferris Dr

City North Prairie State WI Zip Code 53153-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Ent Solutions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **486.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : 2016032919752-935

Amount of Each Receipt this Period
81.00

Memo Item

B. Jeffrey Zuzolo
Full Name (Last, First, Middle Initial)

Mailing Address 104 Wildwood Dr

City Avon State CT Zip Code 06001-4413

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1248.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 15 / 2016

Transaction ID : 2016031519747-10

Amount of Each Receipt this Period
208.00

Memo Item

C. Jeffrey Zuzolo
Full Name (Last, First, Middle Initial)

Mailing Address 104 Wildwood Dr

City Avon State CT Zip Code 06001-4413

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1248.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : 2016033119747-10

Amount of Each Receipt this Period
208.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	497.00
TOTAL This Period (last page this line number only).....	27865.32

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 777 E.Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Service Charge

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : B02FFF7F4B7108DE156

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Blaine for Congress

Mailing Address PO Box 98

City St. Elizabeth State MO Zip Code 65075

Purpose of Disbursement
2016 Primary

011

Candidate Name

W. Blaine Luetkemeyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District: 03

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : 5CDF565A9F10819454E

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Charles Boustany Jr. MD for Senate, Inc.

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement
2016 General

011

Candidate Name

Charles William Boustany Jr.

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: LA District:

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : 8B4FE62DE53A277CCBA

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Sherrod Brown

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement
2018 General

011

Candidate Name

Sherrod Campbell Brown

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2016

Transaction ID : 08D7E590545CFE1F354

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Kenny Marchant for Congress

Mailing Address PO Box 110187

City Carrollton State TX Zip Code 75011-0187

Purpose of Disbursement
2016 General

011

Candidate Name

Kenny Ewell Marchant

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 24

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2016

Transaction ID : 455297C78A6A5AF9B41

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Kinzinger for Congress

Mailing Address PO Box 2365

City Ottawa State IL Zip Code 61350-6965

Purpose of Disbursement
2016 General

011

Candidate Name

Adam Daniel Kinzinger

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IL District: 16

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : 41C0DCCDEB8B3E4B603

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lasee for Congress, Inc.

Mailing Address 1645 Swan Road

City Depere State WI Zip Code 54115

Purpose of Disbursement
2016 Primary

011

Candidate Name

Frank G. Lasee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District: 08

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2016

Transaction ID : 4E358841F6AB9F08A8C

Amount of Each Disbursement this Period

2500.00

Memo Item

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

10000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Luke Messer for Congress

Mailing Address PO Box 917

City Shelbyville State IN Zip Code 46176

Purpose of Disbursement
2016 Primary

011

Candidate Name

Allan Lucas Messer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: IN District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	6

Transaction ID : 5AB1FCAB5E2E7768312

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. Mike Crapo for US Senate

Mailing Address PO Box 1948

City Boise State ID Zip Code 83701

Purpose of Disbursement
2016 General

011

Candidate Name

Michael Dean Crapo

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: ID District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	6

Transaction ID : 5427CE7458D2742C06B

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Pat Meehan for Congress

Mailing Address 50 S Providence Rd

City Media State PA Zip Code 19063-3531

Purpose of Disbursement
2016 Primary

011

Candidate Name

Patrick L. Meehan

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	7		2	0	1	6

Transaction ID : 5355135616B2485DD66

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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 Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Pittenger for Congress LLC

Mailing Address PO Box 11207

City Charlotte State NC Zip Code 28220-1207

Purpose of Disbursement
2016 General

011
Category/ Type

Candidate Name

Robert M. Pittenger

Office Sought: House
 Senate
 President
State: NC District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2016

Transaction ID : 37375BAEE3EF9AA9601

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

--

Memo Item

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

2000.00

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

19000.00
