Image# 20	1809289	912425	5395
-----------	---------	--------	------

09/28/2018 17 : 57

PAGE 1 / 127

FEC FORM 3X	REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼Example: If typing, type over the lines.12FE4M5	
ADDRESS (number and street)	utual Life Insurance Company Federal PAC	
▼ Check if different		
than previously reported. (ACC)	Milwaukee WI 532	02
2. FEC IDENTIFICATION	NUMBER ▼ CITY ▲ STATE ▲	ZIP CODE
C C00197095	3. IS THIS REPORT (N) OR (A)	C
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report October 15 	(C) 12-Day Primary (12P) General (12G)	(Non-Election Year Only)) Dec 20 (M12) (Non-Election Year Only)
October 15 Quarterly Report January 31 Year-End Report		in the State of
July 31 Mid-Year Report (Non-elec Year Only) (MY)		Special (30S)
Termination Repo (TER)		in the State of
5. Covering Period	08 01 Y Y Y Y Y Y 08 01 2018 through 08 31 2	2018
Type or Print Name of Treasu	inze Michelle A	lete. 28 / Y Y Y Y 2018
NOTE: Submission of false, erro	oneous, or incomplete information may subject the person signing this Report to the pena	Ilties of 52 U.S.C. § 30109 C FORM 3X Rev. 05/2016

X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

The Northwestern Mutual Life Insurance Company Federal PAC

R	Report Covering the Period: From:		To: 08 / D D / Y Y Y Y 08 31 2018
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		358573.58
	(b) Cash on Hand at Beginning of Reporting Period	310659.80	
	(c) Total Receipts (from Line 19)	35793.66	288412.08
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	346453.46	646985.66
7.	Total Disbursements (from Line 31)	13235.13	313767.33
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	333218.33	333218.33
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From:	/ D D / Y Y Y Y 01 2018 To	b: 08 / D D / Y Y Y Y 08 31 2018
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From: (a) Individuals/Persons Other		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	32101.34	228830.54
(ii) Unitemized	3692.32	54581.54
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	35793.66	283412.08
(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	35793.66	283412.08
Totals to Line 33, page 5)▶	33793.00	200412.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
Faity Committees		
13. All Loans Received	0.00	0.00
	41 41 41	4 4 4
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	5000.00
17. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account	0.00	0.00
(from Schedule H3)	0.00	0.00
	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
		0.00
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	35793.66	288412.08
20. Total Federal Receipts		
(subtract Line 18(c) from Line 19)	35793.66	288412.08

Page 3

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 05/2016)	of Disbursements	Page 4			
	II. Disbursements	COLUMN B Calendar Year-to-Date				
	rating Expenditures: Allocated Federal/Non-Federal Activity (from Schedule H4)	Total This Period	Calendar Tear-to-Date			
	(i) Federal Share	0.00	0.00			
	(ii) Non-Federal Share	0.00	0.00			
(b)	Other Federal Operating Expenditures	235.13	1967.33			
(C)	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	235.13	1967.33			
	usfers to Affiliated/Other Party	0.00	0.00			
Con Fede	tributions to eral Candidates/Committees					
Inde	Other Political Committeespendent Expenditures	13000.00	299500.00			
Coo	Schedule E) rdinated Party Expenditures U.S.C. § 30116(d))	0.00	0.00			
(use	Schedule F)	0.00	0.00			
Loar	n Repayments Made	0.00	0.00			
Loar	ns Made Inds of Contributions To:	0.00	0.00			
	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			
	er Disbursements (Including -Federal Donations)	0.00	12300.00			
	eral Election Activity (52 U.S.C. § 30101(Allocated Federal Election Activity (from Schedule H6)	43. 43. 43.				
	(i) Federal Share	0.00	0.00			
(b)	(ii) "Levin" Share Federal Election Activity Paid	0.00	0.00			
. ,	Entirely With Federal Funds Total Federal Election Activity (add	0.00	0.00			
(0)	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00			
	I Disbursements (add Lines 21(c), 22, 24, 25, 26, 27, 28(d), 29 and 30(c))	13235.13	313767.33			
Tota	I Federal Disbursements		4			
	tract Line 21(a)(ii) and Line 30(a)(ii) Line 31)▶	13235.13	313767.33			

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
1 20	1 01111	57	(110 .	05/2010	,

III. Net Contributions/ Operating Expenditures

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

(subtract Line 37 from Line 36)

			1			35793.66
		7			-7	
						0.00
	-	-	÷	÷	-	
						35793.66
**	÷	-	÷	÷	-	
Ι.					-	235.13
	÷		÷	÷	-	
		-				0.00
		ŕ			í	
		-7-			_	235.13
Ē	İ	-7-	Ì	Ì	-7-	

283412.08						- 1
203412.00	-7		7		<u></u>	1
0.00						- 1
	7			1		- 5
283412.08						- [
	- 7		-1			- 5
1967.33						- [
1 /85	-7		-7			- 5
0.00						- [
	-7-		-7-			- 5
1967.33					E .	- [
		 			1. A.	

COLUMN B

Calendar Year-to-Date

Page 5

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I LIVILLU REVEILIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	_										
The Northwestern Mutual Lif	e Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middl A. Abbass, Steven, Fay, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9 Woodhull Ct			08 15 2018								
City Northport	State NY	Zip Code 11768-2844	Transaction ID : 2018081519174-63 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed	upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]								
Full Name of Individual (Last, First, Middl B. Abbass, Steven, Fay, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 9 Woodhull Ct			08 31 2018								
City	State	Zip Code	Transaction ID : 2018083119135-63								
Northport	NY	11768-2844	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]								
Full Name of Individual (Last, First, Middl C. Abell, Rick, A, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 6025 Princeton Reach W	-		08 / D D / Y Y Y Y 2018								
City Granite Bay	State CA	Zip Code 95746-6217	Transaction ID : 2018081519174-45 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00]								
SUBTOTAL of Receipts This Page (optiona			375.00								
TOTAL This Period (last page this line num	ber only)										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 7

OF

Any information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Full Name of Individual (Last, First, Middle Initial) or Full Organization Na Abell, Rick, A, , Mailing Address 6025 Princeton Reach Way	Federal PAC	e to so	Date of	ntrib	outio	e of s										
or for commercial purposes, other than using the name and address of any NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Full Name of Individual (Last, First, Middle Initial) or Full Organization Na Abell, Rick, A, ,	Federal PAC	e to so	Date of	ntrib	outio	ons fr										
The Northwestern Mutual Life Insurance Company Full Name of Individual (Last, First, Middle Initial) or Full Organization Na Abell, Rick, A, ,	me		M M	f Re	eceip	ot										
Abell, Rick, A, ,			M M	f Re	eceip	ot										
Mailing Address 6025 Princeton Reach Way	217					μ			Date of Receipt							
	217		08 31 Y Y Y Y Y 08 31 2018													
City State Zip Code	217	Transaction ID : 2018083119135-45														
Granite Bay CA 95746-6		/	Amount of Each Receipt this Period													
FEC ID number of contributing federal political committee.					-				125.0	0						
Name of Employer (for Individual)Occupation (for IndSelf-EmployedGeneral Insurance	,		M	emo	o Ite	em										
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼	2000.00															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Na Aslakson, Eric, D, ,	me		Date of	f Re	ecei	pt										
Mailing Address 15323 SE 82nd St								08 / D D / Y Y Y Y 2018								
City State Zip Code Newcastle WA 98059-92		Transaction ID : 201808151								}						
FEC ID number of contributing federal political committee.								Amount of Each Receipt this Period 62.50								
Name of Employer (for Individual)Occupation (for Individual)Self-EmployedGeneral Insurance	,		Memo Item													
Paggint For:	Aggregate Year-to-Date ▼ 1000.00															
Full Name of Individual (Last, First, Middle Initial) or Full Organization Na S. Aslakson, Eric, D, ,	me		Date of	f Re	eceip	pt										
Mailing Address 15323 SE 82nd St			м м 08	/		31	/) 18	Y						
City State Zip Code Newcastle WA 98059-92		-					201808			3						
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 62.50						60							
	Occupation (for Individual) General Insurance Agent					Memo Item										
Receipt For: Aggregate Year-to-Date V	•															
Primary General Other (specify)	1000.00															
SUBTOTAL of Receipts This Page (optional)					7				250.0	0						

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

		Use separate schedule(s)	(check on	y one)			
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	× 11a 13	11		12	17
Any information copied from such Reports or for commercial purposes, other than us			erson for the	purpos	e of solicitir	ng contribut	tions
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С				
Full Name of Individual (Last, First, Mic Backe, Mark, J, ,	dle Initial) or Full O	rganization Name	Date o	f Receij	pt		
Mailing Address 1918 E Lafayette Pl			M M 08	/ [15	2018	Y
City Milwaukee	State WI	Zip Code 53202-1395			ID : 201808 ch Receipt 1		51
FEC ID number of contributing federal political committee.	С			-		22.0	00
Name of Employer (for Individual) NML		upation (for Individual) ns & Ops Counsel	M	emo Ite	em		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00]				
Full Name of Individual (Last, First, Mic B. Backe, Mark, J, ,	dle Initial) or Full O	rganization Name	Date o	f Receij	pt		
Mailing Address 1918 E Lafayette Pl			08	/ [31	2018	Y
City Milwaukee	State WI	Zip Code 53202-1395			ID : 201809 ch Receipt 1		50
FEC ID number of contributing federal political committee.	С					22.0	00
Name of Employer (for Individual) NML		upation (for Individual) ns & Ops Counsel	M	emo Ite	em		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00]				
Full Name of Individual (Last, First, Mic C. Bailey, Brian, D, ,	dle Initial) or Full O	rganization Name	Date o	f Receij	pt		
Mailing Address 2741 N Anacortes Ln			M M 08	/ [15	2018	Y
City Eagle	State ID	Zip Code 83616-3669			ID:201808		1
FEC ID number of contributing federal political committee.	С			9	,	17.5	50
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	N	lemo Ite	em		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00]				
SUBTOTAL of Receipts This Page (option	nal)			. ,	,	61.5	50
TOTAL This Period (last page this line nu	umber only)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

ידו			Use separate schedule(s)	(ch	eck only	y or	ne)	L		
111			for each category of the Detailed Summary Page		4 11a		11b	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r						pose of			
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С						
A.	Full Name of Individual (Last, First, Middle Initia Bailey, Brian, D, ,	al) or Full Or	rganization Name		Date of	Re	eceipt			
	Mailing Address 2741 N Anacortes Ln				M M 08	1	D D D 31	/ Y	y y 2018	Y
	City Eagle	State ID	Zip Code 83616-3669						119135-3 is Period	1
	FEC ID number of contributing federal political committee.	С			<u> </u>		-yr-		17.	50
	Name of Employer (for Individual) Self-Employed		pation (for Individual) eral Insurance Agent		Me	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00]						
в.	Full Name of Individual (Last, First, Middle Initia Barbi, Leslie, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt			
	Mailing Address 6620 N Lake Dr		- 1		M M 08	1	D D 15	/ Y	2018	Y
	City Fox Point	State WI	Zip Code 53217-4245	-			-		6 19136-4 is Period	51
	FEC ID number of contributing federal political committee.	С				. 01	1		208.	00
	Name of Employer (for Individual) NML		ipation (for Individual) - Public Investments		Me	emo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]						
с.	Full Name of Individual (Last, First, Middle Initia Barbi, Leslie, , ,	al) or Full Or	ganization Name		Date of	Re	eceipt			
	Mailing Address 6620 N Lake Dr				м м 08	/	D D D 31	/ Y	ү ү 2018	Y
	City Fox Point	State WI	Zip Code 53217-4245						619135-4 is Period	50
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .		208.	00
	Name of Employer (for Individual) NML		pation (for Individual) Public Investments		Me	emc	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]						
s	UBTOTAL of Receipts This Page (optional)			•			, .		433.	50
т	OTAL This Period (last page this line number or	nly)	b	→						

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 10 OF

				or each category of the Detailed Summary Page	×	-	1a 3		-	11b 4	F		11c 15	12		17
or f	information copied from such Reports and Stateme or commercial purposes, other than using the name					or	the		po	ose		soli	iciting	contrib		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance	Сс	ompany Federal PAC)											
A	Full Name of Individual (Last, First, Middle Initial) or Barras, David, A, , Mailing Address 8700 W Bennington Ct	Full C	Drgar	nization Name			te of	Re	ece	·	t D		/ Y	YY	Y	
_		ate		Zip Code		_	08 rans	acti	io		15 D:2	201	80816	2018 6 19136	-563	
_	Mequon W	1		53097-3440	_ A	٩m	ount	of	E	acł	ו Re	әсе	eipt this	s Perio	d	
	EC ID number of contributing ederal political committee.								,				-g	2:	2.00	
١	Name of Employer (for Individual)		•	ion (for Individual) ng Director			Me	emo	b l	lten	n					
ŀ	Receipt For: Aggr Primary General Other (specify) ▼	regate	Yea	rr-to-Date ▼ 352.00												
	Full Name of Individual (Last, First, Middle Initial) or Barras, David, A, ,	Full C	Orgai	nization Name		Da	te of	Re	ece	eipt	t					
Ν	Aailing Address 8700 W Bennington Ct			_			м 08	/	l		д 31	1	/ Y	y y 2018	Y	
	Dity Sta Mequon W	ate /I		Zip Code 53097-3440					-			-		5 19135 s Perio		
	EC ID number of contributing ederal political committee.								,		_	_	-g=-	22	2.00	
	Name of Employer (for Individual) IML			tion (for Individual) ng Director			Me	emo	o l	lten	n					
Ē	Receipt For: Aggr Primary General Other (specify) ▼	regate	Yea	r-to-Date ▼ 352.00												
	Full Name of Individual (Last, First, Middle Initial) or Bay, Michael, , ,	Full C	Orgai	nization Name		Da	te of	Re	ece	eipt	 t					
Ν	Aailing Address 6361 N Berkeley Blvd						08 ^M	/	l		15	1	/ Y	y y 2018	Y	
	City Sta Whitefish Bay W	ate /I		Zip Code 53217-4334					-			-		6 19136 s Perio		
	EC ID number of contributing ederal political committee.								,		_	_	,	20	0.00	
1	Name of Employer (for Individual)		•	ion (for Individual) ir Priv Plcmts			Me	emo	o I	lter	n					
F	Receipt For: Aggr Primary General Other (specify) Image: Control of the specify in the specify in the specify in the specify in the specific term in	regate	Yea	ar-to-Date ▼ 320.00												
SU	BTOTAL of Receipts This Page (optional)			•••••					7			T	,	64	1.00	
то	TAL This Period (last page this line number only)			····· •									-q			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 11 OF

171			Use separate schedule(s)	(ch	eck only	/ or	ne)	L		
111			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c 15	12	17
	y information copied from such Reports and Star for commercial purposes, other than using the n				for the		pose of	soliciting	contribu	tions
$\overline{)}$	NAME OF COMMITTEE (In Full)									
	The Northwestern Mutual Life Ins	urance	Company Federal PAC	2						
A.	Full Name of Individual (Last, First, Middle Initia Bay, Michael, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 6361 N Berkeley Blvd				M M 08	1	31) / Y	2018	Y
	City Whitefish Bay	State WI	Zip Code 53217-4334					2018090 leceipt th	619135-4	35
	FEC ID number of contributing federal political committee.	С				U			20.0	00
	Name of Employer (for Individual) NML		upation (for Individual) g Dir Priv Plcmts		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00							
R	Full Name of Individual (Last, First, Middle Initia Beer, Mitchell, C, ,	l) or Full Or	rganization Name		Date of	Re	ceint			
	Mailing Address 3387 Hampton Ct				08	/	D 15	/ Y	2018	Y
	City Thousand Oaks	State CA	Zip Code 91362-1130						519174-2 is Period	0
	FEC ID number of contributing federal political committee.	С				U			62.	50
	Name of Employer (for Individual) Self-Employed		upation (for Individual) leral Insurance Agent		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00							
<u></u> с.	Full Name of Individual (Last, First, Middle Initia Beer, Mitchell, C, ,	l) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 3387 Hampton Ct				м м 08	/	31) / Ү	2018	Y
	City Thousand Oaks	State CA	Zip Code 91362-1130						119135-2 is Period	0
	FEC ID number of contributing federal political committee.	С					,	, , , , , , , , , , , , , , , , , , ,	62.	50
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emc) Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00							
s	UBTOTAL of Receipts This Page (optional)		•••••				, ,	.,	145.(00
т	OTAL This Period (last page this line number on	ly)	••••••	•			, .			

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

	WIZED RECEIPTS			Detailed Summary Page	×	-	a			1b		11c	\vdash	2	
Any	information copied from such Reports and Statem	ents m	lay r	not be sold or used by any pe	rson 1	13 for tl	ne	purr	14 200		sc	15 bliciting		6 ributi	17 ons
or fo	or commercial purposes, other than using the name	e and a	addr	ess of any political committee	to so	licit	cor	trib	uti	ons f	ror	m such	com	mitte	e.
\	IAME OF COMMITTEE (In Full)														
/ -	The Northwestern Mutual Life Insur	ance	C	ompany Federal PAC)										
	ull Name of Individual (Last, First, Middle Initial) o Belli-Fuchs, Lisa, M, ,	r Full C	Drga	nization Name		Date	of	Re	ce	ipt					
_	Aailing Address 1465 Rolling Meadow Dr			1		[™] 0		/	E	D 15)	/ Y	y 201	ү 18	Y
		tate		Zip Code		Tra	Ins	acti	ion	ו ID :	20	18081	<u>61913</u>	36-82	0
-	Brookfield V	VI		53045-5413	_ /	Amo	unt	of	Ea	ach R	lec	eipt thi	s Pe	riod	
	EC ID number of contributing ederal political committee.	;							-		-	-yr-		15.0	0
	lame of Employer (for Individual) IML		•	tion (for Individual) g & Sys Admin			Me	emo) It	em					
F	Receipt For: Aad	predate	Yea	ar-to-Date 🔻											
	Primary General Other (specify) ▼	, - <u>,</u>	-	240.00											
	Full Name of Individual (Last, First, Middle Initial) of Belli-Fuchs, Lisa, M, ,	r Full C	Drga	nization Name		Date	of	Re	ce	ipt					
N	Jailing Address 1465 Rolling Meadow Dr					[™] 0		1	Γ	31		/ Y	201	ү 8	Y
C	City S	tate		Zip Code		Tra	nsa	acti	on	ID :	20	18090	51913	35-81	9
E	Brookfield	NI		53045-5413		Amo	unt	of	Ea	ach R	lec	eipt th	is Pe	riod	
	EC ID number of contributing ederal political committee.	;							,		-	-y		15.0	0
	Name of Employer (for Individual) IML		•	tion (for Individual) g & Sys Admin			Me	emo) It	em					
F	Receipt For: Agg Primary General Other (specify) ▼	gregate	e Yea	ar-to-Date ▼ 240.00											
	Full Name of Individual (Last, First, Middle Initial) of Bender, J, Philip, ,	r Full C	Drga	nization Name		Date	of	Re	ce	ipt					
N	Aailing Address 70 Forest St Apt 17E					0	8 ^M	/	E	15		/ Y	201		Y
	5	tate		Zip Code		Tra	ins	acti	ior	ו ID :	20	018081	5191	74-22	2
_	Stamford C	СТ		06901-1881	/	Amo	unt	of	Ea	ach R	lec	eipt thi	s Pe	riod	
	EC ID number of contributing ederal political committee.	;				<u> </u>		_	,		_	y	2	208.0	0
N	Jame of Employer (for Individual)	Occ	cupa	tion (for Individual)	_	п	Me	emo	b It	em					
	Self-Employed		•	I Insurance Agent											
F	Receipt For: Aad	aredate	Yea	ar-to-Date 🔻											
	Primary General	J • J • •	-												
	Other (specify)			3328.00											
SU	BTOTAL of Receipts This Page (optional)			•••••					,		-	9	2	238.0	0
то	TAL This Period (last page this line number only).								_		I	-		-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
			13 14 15 16 17 person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	С
Full Name of Individual (Last, First, M A. Bender, J, Philip, ,	liddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 70 Forest St Apt 17E			08 31 2018
City Stamford	State CT	Zip Code 06901-1881	Transaction ID : 2018083119135-22 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]
Full Name of Individual (Last, First, M B. Bentley, John, E, ,	liddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2012 E Glendale Ave			08 15 / Y Y Y Y 08 15
City Whitefish Bay	State WI	Zip Code 53211-1239	Transaction ID : 2018081619136-439 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		48.00
Name of Employer (for Individual) NML		upation (for Individual) nvestment Strat	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 432.00]
Full Name of Individual (Last, First, M C. Bentley, John, E, ,	liddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2012 E Glendale Ave	1		08 / D D / Y Y Y Y Y 2018
City Whitefish Bay	State WI	Zip Code 53211-1239	Transaction ID : 2018090619135-438 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		48.00
Name of Employer (for Individual) NML	Vp II	upation (for Individual) nvestment Strat	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 432.00]
SUBTOTAL of Receipts This Page (opt	ional)		304.00
TOTAL This Period (last page this line	number only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

ITEMIZED RECEIPTS		parate schedule(s)	(check only one)
IILIVIIZED REGEIFIJ		h category of the d Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutua	I Life Insurance Compa	any Federal PA	С
Full Name of Individual (Last, First, Berndt, Evert, M, ,	Middle Initial) or Full Organization	ו Name	Date of Receipt
Mailing Address 10048 S 31st St			08 / D D / Y Y Y Y 08 15 2018
City Franklin	StateZip CWI531	ode 32-7208	Transaction ID : 2018081619136-821 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual)	Occupation (fo Risk Manager	,	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	228.00]
Full Name of Individual (Last, First, B. Berndt, Evert, M, ,	Middle Initial) or Full Organization	ו Name	Date of Receipt
Mailing Address 10048 S 31st St			08 / D D / Y Y Y Y 2018
City Franklin	State Zip C WI 5313	ode 32-7208	Transaction ID : 2018090619135-820 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		15.00
Name of Employer (for Individual) NML	Occupation (fo Risk Managen	,	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 228.00]
Full Name of Individual (Last, First, C. Black, Dwaan, C, ,	Middle Initial) or Full Organization	ו Name	Date of Receipt
Mailing Address 3520 Dumbarton F	d NW		08 / D D / Y Y Y Y 08 15 2018
City Atlanta	State Zip C GA 3032	ode 27-2614	Transaction ID : 2018081519174-15 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		42.00
Name of Employer (for Individual) Self-Employed	Occupation (fo General Insura	,	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Da	672.00]
SUBTOTAL of Receipts This Page (btional)		72.00
TOTAL This Period (last page this lir	e number only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

171			Use separate schedule(s)	(ch	eck only	y or	ne)			
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	
	y information copied from such Reports and Sta for commercial purposes, other than using the						pose of			
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In:	surance	Company Federal PA	С						
Α.	Full Name of Individual (Last, First, Middle Initia Black, Dwaan, C, ,	al) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 3520 Dumbarton Rd NW				м м 08	/	D D D) / Y	y y 2018	Y
	City Atlanta	State GA	Zip Code 30327-2614						119135-1 is Period	5
	FEC ID number of contributing federal political committee.	C			<u> </u>				42.	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emc	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]						
в.	Full Name of Individual (Last, First, Middle Initia Blevons, Debra, , ,	al) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 165 Pine Ct				M M 08	/	D D D 15	/ Y	2018	Y
	City Appleton	State WI	Zip Code 54914-8222	-			-		519174-6 is Period	1
	FEC ID number of contributing federal political committee.	С				. 01			125.	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emc	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]						
С.	Full Name of Individual (Last, First, Middle Initia Blevons, Debra, , ,	al) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 165 Pine Ct				08 M	1	31) / Y	ү ү 2018	Y
	City Appleton	State WI	Zip Code 54914-8222				-		119135-6 is Period	1
	FEC ID number of contributing federal political committee.	С			<u> </u>		, .	, y	125.	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	tem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00]						
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	292.	00
т	OTAL This Period (last page this line number o	nly)		•			-		4	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16 OF

IT.			Use separate schedule(s)	(chec	k only	y or	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	11c		2	17
Ar or	y information copied from such Reports and Stafor commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p ddress of any political committed	erson for	the	pur ntrib	pose of	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full)										
$\langle \rangle$	The Northwestern Mutual Life In	surance	Company Federal PA	С							
Α.	Full Name of Individual (Last, First, Middle Initi Botcher, Sandra, L, ,	al) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 10260 N RANGE LINE C				08	1	D 15		۲ 20	18	
	City MEQUON	State WI	Zip Code 53092					201808 1 Receipt th			1
	FEC ID number of contributing federal political committee.	С								107.00)
	Name of Employer (for Individual)		upation (for Individual) Distribution Development		M	emc	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1712.00]							
R	Full Name of Individual (Last, First, Middle Initi Botcher, Sandra, L, ,	al) or Full O	rganization Name	Di	ate of	Be	ceipt				
0.	Mailing Address 10260 N RANGE LINE C			_	08	/	31		201	8	
	City	State	Zip Code					2018090			0
	MEQUON	WI	53092	Ar	nount	tof	Each F	Receipt th	nis Pe	riod	_
	FEC ID number of contributing federal political committee.	С		15	_		-			107.00	כ
	Name of Employer (for Individual) NML		upation (for Individual) Distribution Development		M	emc	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1712.00]							
с.	Full Name of Individual (Last, First, Middle Initi Brase, Jennifer, L, ,	al) or Full O	rganization Name	Da	ate of	Re	ceipt				
	Mailing Address 12877 N Cobblestone Ct				08	1	15		201		
	City Mequon	State WI	Zip Code 53097-1812					201808 Receipt th			8
	FEC ID number of contributing federal political committee.	С		ļ			, .	. y		40.00)
	Name of Employer (for Individual)		upation (for Individual) 0&I And McMs		M	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 640.00]							
	UBTOTAL of Receipts This Page (optional)				-	-	,	· · ·	2	254.00	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company Federal PAC	;
NML Y		Date of Receipt
NML		Date of Receipt
NML V		Date of Receipt
SUBTOTAL of Receipts This Page (optional)		105.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 18 OF

IТ	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y on	ie)	L			
11			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any p adress of any political committee	erson e to s	for the	purp	oose of	soliciting	, contri	butio	ns
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
A.	Full Name of Individual (Last, First, Middle Init Brower, Anne, T, ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 2314 E Edgewood Ave				08	/	D D 15	/ Y	2018]
	City Shorewood	State WI	Zip Code 53211-2939					2018081 eceipt th			\$
	FEC ID number of contributing federal political committee.	С			<u> </u>		7		2	24.00	
	Name of Employer (for Individual)		upation (for Individual) Gn Cnl & Ast Sec/Secur		M	emo	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.00]							
В.	Full Name of Individual (Last, First, Middle Init Brower, Anne, T, , Mailing Address 2314 E Edgewood Ave	ial) or Full O	rganization Name		Date of	F Re	ceipt	/ Y	YY	Y Y	-
	City	State	Zip Code		08 Trans	acti	31 on ID · 2	2018090	2018 619135		,
	Shorewood	WI	53211-2939					eceipt th			
	FEC ID number of contributing federal political committee.	С					7	-7	2	24.00	·
	Name of Employer (for Individual) NML		upation (for Individual) Gn CnI & Ast Sec/Secur		M	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 384.00]							
с.	Full Name of Individual (Last, First, Middle Init Byhardt, Pency, P, ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address W148N10042 Windsong Cir E				08 M	/	D D D 15	JL	2018		
	City Germantown	State WI	Zip Code 53022-5274					2018081 eceipt th			3
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	y	2	20.00	
	Name of Employer (for Individual) NML Receipt For:	Vp J	upation (for Individual) Iourney Transformation		М	emo	Item				
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 320.00]							
⊢	UBTOTAL of Receipts This Page (optional)			▶ -		_	, . , .	5	6	8.00	-
Г	OTAL This Period (last page this line number of	only)	••••••	•		-	,			-	السد

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

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b	11c	12	
Any information conied from such Departs	d Statamanta	hu not be cold or used by arm		13 r tho		14	15	16	17
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)		_	_						
The Northwestern Mutual Life	Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Middle Byhardt, Pency, P, ,	Initial) or Full C	rganization Name	D	ate of	Re	ceipt			
Mailing Address W148N10042 Windsong C				м м 08	1	D D 31	/ Y	2018	Y
City	State WI	Zip Code				-		0619135-8	-
Germantown	VVI	53022-5274	A	mount	of	Each R	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С					-		20.	00
Name of Employer (for Individual) NML		upation (for Individual) Journey Transformation		Me	emo	Item			
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		320.00	1						
Full Name of Individual (Last, First, Middle 3. Byrne, Michael, T, ,	Initial) or Full C	rganization Name		oto of	De	opint			
Mailing Address 395 La Casa Via			_	ate of	не	·			24
	01-1-	Zin Onda		08 08	/	15	/ ү	2018	Y
City Webut Creek	State CA	Zip Code						519174-1	
Walnut Creek	UA	94598-4842	A	mount	OŤ	Each R	eceipt tr	nis Period	
FEC ID number of contributing federal political committee.	С							208.	00
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item			
Receipt For:	Aggregate	Year-to-Date V							
Primary General Other (specify) ▼		3328.00]						
Full Name of Individual (Last, First, Middle C. Byrne, Michael, T, ,	Initial) or Full C	rganization Name	D	ate of	Re	ceipt			
Mailing Address 395 La Casa Via				08	/	D D D 31	/ Y	2018	Y
City	State	Zip Code		Trans	acti	ion ID :	2018083	3119135-1	3
Walnut Creek	CA	94598-4842	A	mount	of	Each R	eceipt th	nis Period	
FEC ID number of contributing federal political committee.	С					y .	, y	208.	00
Name of Employer (for Individual)	Occ	upation (for Individual)	- 1	Me	emo	Item			
Self-Employed		eral Insurance Agent							
Receipt For:		Year-to-Date ▼							
Primary General	i iggi ogulo		11						
Other (specify)		3328.00	1						
SUBTOTAL of Receipts This Page (optional).						9		436.	00
TOTAL This Period (last page this line numb	er only)	······	Ī						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 20 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	чС
Full Name of Individual (Last, First, Middle Cadotte, Lisa, A, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7009 W Rawson Ave			08 / D D / Y Y Y Y Y 2018
City Franklin	State WI	Zip Code 53132-8113	Transaction ID : 2018081619136-796 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer (for Individual) NML		upation (for Individual) nvestment Risk & Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00]
Full Name of Individual (Last, First, Middle B. Cadotte, Lisa, A, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7009 W Rawson Ave			08 31 Y Y Y Y 08 31
City Franklin	State WI	Zip Code 53132-8113	Transaction ID : 2018090619135-795 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual) NML		upation (for Individual) Investment Risk & Ops	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00]
Full Name of Individual (Last, First, Middle C. Carter, Michael, G, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7322 N Mohawk Rd			08 / D D / Y Y Y Y 2018
City Fox Point	State WI	Zip Code 53217-3454	Transaction ID : 2018081619136-790 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer (for Individual) NML		upation (for Individual) & Cfo	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]
SUBTOTAL of Receipts This Page (optional)			268.00
TOTAL This Period (last page this line numb	er only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 21 OF

ıт.			Use separate schedule(s)	(ch	eck onl	y or	ne)				
11			for each category of the Detailed Summary Page		* 11a 13		11b	11c 15		2 6	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any pe ddress of any political committee	erson e to se	for the	pur htrib	pose of	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full)										
	The Northwestern Mutual Life In	surance	Company Federal PA	C							
Α.	Full Name of Individual (Last, First, Middle Initi Carter, Michael, G, ,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 7322 N Mohawk Rd				08	1	D D D 31	/ Y	201	8	
	City Fox Point	State WI	Zip Code 53217-3454	_				2018090 eceipt th			9
	FEC ID number of contributing federal political committee.	С			<u> </u>				2	208.00)
	Name of Employer (for Individual) NML		upation (for Individual) & Cfo		М	emo	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00								
R	Full Name of Individual (Last, First, Middle Initi Castronovo, Greg, , ,	ial) or Full O	rganization Name		Date of	Be					
υ.	Mailing Address 317 Evening Star Ln				08	/	15	/ Y	201		
	City	State	Zip Code		Trans	acti	ion ID : 1	2018081	51917	74-30	
	Bozeman	MT	59715-7738	_	Amoun	t of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С					-			42.00)
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		М	emo	ttem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00								
<u></u>	Full Name of Individual (Last, First, Middle Initi Castronovo, Greg, , ,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 317 Evening Star Ln				08 N	/	31	/ Y	201		
	City Bozeman	State MT	Zip Code 59715-7738					2018083 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,			42.00	D
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		M	emo	o Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 672.00								
⊢	UBTOTAL of Receipts This Page (optional)			•			y		2	292.00	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 22 OF

ıт.	Use separate schedule(s)				ck only	on	e)			
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the p		ose of	soliciting	g contribu	tions
$\overline{)}$	NAME OF COMMITTEE (In Full)			<u>`</u>						
/	The Northwestern Mutual Life Ins	surance	Company Federal PAC	,						
Α.	Full Name of Individual (Last, First, Middle Initia Christensen, Scott, G, ,	al) or Full O	rganization Name	D	ate of	Ree	ceipt			
	Mailing Address 45 Middle Rd			ПГ	м м 08	/	D D 15	/ Y	2018	Y
	City Portsmouth	State NH	Zip Code 03801-4802						519174-2 nis Period	8
	FEC ID number of contributing federal political committee.	С			mount				75.0	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00							
в.	Full Name of Individual (Last, First, Middle Initia Christensen, Scott, G, ,	al) or Full O	rganization Name	D	ate of	Ree	ceipt			
	Mailing Address 45 Middle Rd				м м 08	/	, 31	/ Y	2018	Y
	City Portsmouth	State NH	Zip Code 03801-4802						119135-2	8
	FEC ID number of contributing federal political committee.	С			mount			eceipt tr	nis Period 75.0	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	10	Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00							
с.	Full Name of Individual (Last, First, Middle Initia Christophersen, Eric, P, ,	al) or Full O	rganization Name	D	ate of	Red	ceipt			
	Mailing Address N25W27286 Fairmount Ct				м м 08	/	D D D 15	/ Y	ү ү 2018	Y
	City Pewaukee	State WI	Zip Code 53072-4962				-		619136-5 his Period	84
	FEC ID number of contributing federal political committee.	С			_		,	,	95.	00
	Name of Employer (for Individual) NML		upation (for Individual) Strat Phil & Comm Rel		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1520.00							
s	UBTOTAL of Receipts This Page (optional)						,	. ,	245.0	00
Т	OTAL This Period (last page this line number or	nly)	••••••				,	1.45		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 23 OF

	EWIZED RECEIPTS			or each category of the Detailed Summary Page	×]11a] 1	11b		11c		12	
				, ,		13		_	14		15		16	17
An or	y information copied from such Reports and Statem for commercial purposes, other than using the name	ents ma e and a	ay n Iddre	ot be sold or used by any peess of any political committee	to so	or the icit co	pur ntrib	pc out	ose c tions	of s frc	oliciting om suc	j coi n co	ntribut	ions ee.
\backslash	NAME OF COMMITTEE (In Full)		0	www.env.c.dowel.DAC	`									
/	The Northwestern Mutual Life Insur	ance		mpany Federal PAC	ر									
A.	Full Name of Individual (Last, First, Middle Initial) of Christophersen, Eric, P, ,	r Full O	rgai	nization Name		Date o	f Re	ec	eipt					
	Mailing Address N25W27286 Fairmount Ct					^M 08			D 3	1	/ Y	20	й 018	
	5	tate VI		Zip Code 53072-4962							018090			83
	FEC ID number of contributing federal political committee.	;	ï			Amoun		-	ach	Re	ceipt th	IS P	95.0	00
	Name of Employer (for Individual) NML		•	ion (for Individual) t Phil & Comm Rel		N	lemo	o I	Item					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 1520.00										
В.	Full Name of Individual (Last, First, Middle Initial) or Condrey, R, Michael, ,	r Full O	rga	nization Name		Date o	f Re	ec	eipt					
	Mailing Address 907 Williamson Dr					M M 08	/	I	D 1:		/ Y)18	Y
	,	tate NC		Zip Code 27608-2307							018081 ceipt th			
	FEC ID number of contributing federal political committee.	;						-,			- yr.	_	208.0	00
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent		N	lemo	o I	ltem					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 3328.00										
с.	Full Name of Individual (Last, First, Middle Initial) or Condrey, R, Michael, ,	r Full O	rga	nization Name		Date o	f Re	ec	eipt					
	Mailing Address 907 Williamson Dr					M 08	/	l	D 3		/ Y)18 [°]	Y
	,	tate NC		Zip Code 27608-2307				-			018083 ceipt th			
	FEC ID number of contributing federal political committee.	;						7			y	-	208.0	00
	Name of Employer (for Individual) Self-Employed		•	ion (for Individual) Insurance Agent		N	lemo	0	ltem					
	Receipt For: Agg Primary General Other (specify)	gregate	Yea	ar-to-Date ▼ 3328.00										
s	UBTOTAL of Receipts This Page (optional)			•••••				,			,		511.0	0
т	OTAL This Period (last page this line number only).							-			-		1.40	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 24 OF

ודכ			Use separate schedule(s)	(ch	eck only					
			for each category of the Detailed Summary Page		11a	\square	11b	11c	12	47
	information copied from such Reports and Sta or commercial purposes, other than using the r									
	IAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С						
	ull Name of Individual (Last, First, Middle Initia Cruse, Tait, , ,	ll) or Full Or	ganization Name		Date of	Red	ceipt			
N	Aailing Address 2961 Belclaire Dr				м м 08	/	D D D 15	/ Y	y y 2018	Y
	City Frisco	State TX	Zip Code 75034-5969						519174-1 is Period	9
	EC ID number of contributing ederal political committee.	С					<u>т</u>		208.	00
S	lame of Employer (for Individual) Self-Employed		pation (for Individual) eral Insurance Agent		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]						
	ull Name of Individual (Last, First, Middle Initia Cruse, Tait, , ,	ll) or Full Or	ganization Name		Date of	Red	ceipt			
_	Aailing Address 2961 Belclaire Dr				08	1	D D D 31	/ Y	2018	Y
	Sity Frisco	State TX	Zip Code 75034-5969						119135-1 is Period	9
	EC ID number of contributing ederal political committee.	С					<u>т</u>		208.	00
	lame of Employer (for Individual) elf-Employed		pation (for Individual) eral Insurance Agent		Me	emo	Item			
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]						
	ull Name of Individual (Last, First, Middle Initia Cuffie, Sheldon, I, ,	l) or Full Or	ganization Name		Date of	Red	ceipt			
_	Iailing Address 9412 N Carlotta Ln	1			08 M	/	D D D 15	/ Y	ү ү 2018	Y
	Sity Brown Deer	State WI	Zip Code 53223-1367						619136-8 is Period	30
	EC ID number of contributing ederal political committee.	С			<u> </u>		y .	, <u>,</u>	20.	00
Ν	lame of Employer (for Individual)		pation (for Individual) fo Risk Mgmt Privacy		Me	emo	ltem			
F	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 320.00]						
SU	BTOTAL of Receipts This Page (optional)			•			, .		436.	00
то	TAL This Period (last page this line number or	ıly)		→						

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

				or each category of the Detailed Summary Page	×	11a 13		-	11b 4		11c		12	
	y information copied from such Reports and Statem for commercial purposes, other than using the name					or the		pc	ose					
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance	Сс	ompany Federal PAC	;									
Α.	Full Name of Individual (Last, First, Middle Initial) of Cuffie, Sheldon, I, , Mailing Address 9412 N Carlotta Ln	r Full O	Irga	nization Name		ate of	Re	ece	·				(Y	V
		tate		Zip Code	- 1	08 Trans	acti	io		81	01809	2	2018	
	Brown Deer V	VI		53223-1367	A	mount	of	Е	ach	Re	ceipt t	his i	Period	
	FEC ID number of contributing federal political committee.	;						,				_	20.	00
	Name of Employer (for Individual) NML		•	tion (for Individual) Risk Mgmt Privacy		M	emo		ltem					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 320.00										
	Full Name of Individual (Last, First, Middle Initial) of Cunningham, Brian, R, ,	r Full O)rgai	nization Name		ate of	Re	ece	eipt					
	Mailing Address 6251 S Billings Way			-		м м 08	1	l		р 5			018	Y
	5	tate CO		Zip Code 80111-6009		Trans mount								2
	FEC ID number of contributing federal political committee.	;						-,			-	_	208.	00
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent		M	emo		ltem					
	Receipt For: Agg Primary General Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 2498.00										
С.	Full Name of Individual (Last, First, Middle Initial) of Cunningham, Brian, R, ,	r Full O)rgai	nization Name		ate of	Re	ece	eipt					
	Mailing Address 6251 S Billings Way					^M 08	1	I	D 3	р 31	/		018	Y
		tate CO		Zip Code 80111-6009	A	Trans					01808 ceipt t			2
	FEC ID number of contributing federal political committee.	;				_		,			y	_	208.	00
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) Insurance Agent		M	emc	5 I	ltem	1				
	Receipt For: Agg Primary General Other (specify)	gregate	Yea	ar-to-Date ▼ 2498.00										
S	UBTOTAL of Receipts This Page (optional)			•••••				,			,		436.	00
т	DTAL This Period (last page this line number only).			•				7			-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 26 OF

171			Use separate schedule(s)	(ch	eck only	or or	ne)			
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		4 11a		11b	11c	12	<u> </u>
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any p ddress of any political committee	erson e to so	for the policit con	purp ntrib	14 Dose of utions	15 soliciting from suc	16 contribut h committ	lions ee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	surance	Company Federal PA	0						
A.	Full Name of Individual (Last, First, Middle Initia Dexheimer, Blane, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 350 Sheffield Dr				м м 08	/	D 31	D / Y	Y Y 2018	Y
	City Brookfield	State WI	Zip Code 53005-7926						619135-4 his Period	68
	FEC ID number of contributing federal political committee.	С			<u> </u>				13.0	00
	Name of Employer (for Individual) NML	Occu Direc	ipation (for Individual) ctor		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.00							
в.	Full Name of Individual (Last, First, Middle Initia Dodd, Paul, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 7078 E Genesee St		I		M M 08	/	D 15		ү ү 2018	Y
	City Fayetteville	State NY	Zip Code 13066-1123				-		519174-1 his Period	6
	FEC ID number of contributing federal political committee.	С				U			208.0	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3328.00							
C.	Full Name of Individual (Last, First, Middle Initia Dodd, Paul, , ,	al) or Full Or	rganization Name		Date of	Re	ceipt			
	Mailing Address 7078 E Genesee St				M M 08	/	D 31		2018	Y
	City Fayetteville	State NY	Zip Code 13066-1123				-		8119135-1 his Period	6
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	9	208.	00
	Name of Employer (for Individual) Self-Employed		pation (for Individual) eral Insurance Agent		Me	emo	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00							
s	UBTOTAL of Receipts This Page (optional)		•	•			, .		429.0	00
т	OTAL This Period (last page this line number o	nly)		•						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 27 OF

		Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions te to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			2
angle The Northwestern Mutual Li	te Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Mide A. Dugal, Steven, , ,	dle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 9 Falcon Dr			08 15 2018
City	State	Zip Code	Transaction ID : 2018081519174-17
Mandeville	LA	70471-2952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item
Self-Employed	Gen	eral Insurance Agent	
Receipt For:	Aggregate	Year-to-Date ▼	
Other (specify) ▼		3328.00	1
			-
Full Name of Individual (Last, First, Mide	lle Initial) or Full O	rganization Name	
B. Dugal, Steven, , ,			Date of Receipt
Mailing Address 9 Falcon Dr			08 31 2018
City	State	Zip Code	Transaction ID : 2018083119135-17
Mandeville	LA	70471-2952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		208.00
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			1
Other (specify) ▼		3328.00	_
Full Name of Individual (Last, First, Mide C. Dunn, John, E, ,	dle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4656 N Wilshire Rd			08 15 2018
City	State WI	Zip Code	Transaction ID : 2018081619136-525
Whitefish Bay	VVI	53211-1260	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		55.00
Name of Employer (for Individual) NML		upation (for Individual) Ipas Cnsl	Memo Item
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify)		880.00	
			-
SUBTOTAL of Receipts This Page (option	al)		471.00
TOTAL This Period (last page this line nu	mber only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 28 OF

ITE	Use separate schedule(s)			(ch	eck only	nly one)				
	MIZED RECEIPTS		for each category of the Detailed Summary Page		K 11a 13		11b 14	11c	12	17
	information copied from such Reports and Sta r commercial purposes, other than using the n				for the		pose of	soliciting	g contribu	tions
\ \	AME OF COMMITTEE (In Full)		_	_						
	he Northwestern Mutual Life Ins	urance (Company Federal PA	C						
	ull Name of Individual (Last, First, Middle Initia Dunn, John, E, ,	l) or Full Or	ganization Name		Date of	Re	eceipt			
M	ailing Address 4656 N Wilshire Rd				м м 08	1	31) / Y	ү ү 2018	Y
	ity Vhitefish Bay	State WI	Zip Code 53211-1260					2018090 Receipt th		24
	EC ID number of contributing deral political committee.	С				01			55.	00
Ν	ame of Employer (for Individual) ML		pation (for Individual) Ipas Cnsl		Me	emc	tem			
R	eceipt For: Primary General Other (specify) ▼	Aggregate	/ear-to-Date ▼ 880.00							
	ull Name of Individual (Last, First, Middle Initia Ekeroth, Eric, J, ,	l) or Full Or	ganization Name		Date of	Re	eceipt			
_	ailing Address 19672 Stanford Hall Pl				M M 08	1	15) / Y	ү ү 2018	Y
	ity shburn	State VA	Zip Code 20147-5223	_				2018081 Receipt th		00
FI	EC ID number of contributing deral political committee.	С				U			20.	00
	ame of Employer (for Individual) ML		pation (for Individual) onal Director		Me	emc	tem			
R	eceipt For:	Aggregate \	/ear-to-Date ▼							
-	Primary General Other (specify) ▼		320.00							
	ull Name of Individual (Last, First, Middle Initia Ekeroth, Eric, J, ,	l) or Full Or	ganization Name		Date of	Re	eceipt			
Μ	ailing Address 19672 Stanford Hall PI				08 ^M	/	D 31		2018	Y
	ity Nshburn	State VA	Zip Code 20147-5223	_				2018090 Receipt th		
	EC ID number of contributing deral political committee.	С			Ľ.		, i		20.	00
Ν	ame of Employer (for Individual) ML		pation (for Individual) onal Director		Me	emo	ttem			
R	eceipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 320.00							
SUE	STOTAL of Receipts This Page (optional)		•	•			, ,	. ,	95.	00
тот	TAL This Period (last page this line number on	ly)		-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 29 OF

IТ	TEMIZED RECEIPTS Use separate schedule(s) for each category of the		(che	eck only one)								
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12 16	Г	17	
	ny information copied from such Reports and S for commercial purposes, other than using the											
$\left \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С								
Ľ	Full Name of Individual (Last, First, Middle Init	tial) or Full O	rganization Name									
Α.	Ekstrand, Diane, L, , Mailing Address S77W26988 River Ridge Cir				Date o		D [) / Y	Y Y		1	
	City Mukwonago	State WI	Zip Code 53149-8767					201808		6-845	i	
		VVI	55149-6767	A	Amoun	t of	Each F	Receipt t	nis Peri	od		
	FEC ID number of contributing federal political committee.	С		15.00								
	Name of Employer (for Individual) NML		upation (for Individual) Hr Bus Partners		M	lemo	tem					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			1								
	Other (specify) v		240.00									
Б	Full Name of Individual (Last, First, Middle Init Ekstrand, Diane, L, ,	tial) or Full O	rganization Name			4 0-						
р.				- '	Date o							
	Mailing Address S77W26988 River Ridge Cir				м м 08		31) / Y	2018	Y ≡ Y		
	City		Trans	acti	ion ID :	2018090)619135	5-844				
	Mukwonago	WI	53149-8767	A				Receipt t				
	FEC ID number of contributing federal political committee.	С							1	5.00		
	Name of Employer (for Individual) NML		upation (for Individual) Hr Bus Partners		M	lemo	tem					
	Receipt For:	Aggregate	Year-to-Date ▼	_								
	Primary General	, iggi oguto										
	Other (specify)		, 240.00									
с.	Full Name of Individual (Last, First, Middle Init Erhard, Keith, A, ,	tial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 4807 Timberwood Ct				м м 08	/	D 15		2018		1	
	City	State	Zip Code		Trans	sact	ion ID :	201808	1519174	4-6		
	W Des Moines	IA	50265-5447	A	Amoun	t of	Each F	Receipt t	nis Peri	od		
	FEC ID number of contributing federal political committee.	С			_		y	,	4	2.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		N	lemo	o Item					
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify)		672.00									
s	UBTOTAL of Receipts This Page (optional)						y .	· ·	7	2.00	-	
т	OTAL This Period (last page this line number	only)	••••••	.			_			-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 30 OF

	IZED RECEIPTS Use separate schedule(s for each category of the			(ch	eck only					
			for each category of the Detailed Summary Page	×	11a		1b	11c	12	
	on copied from such Reports and s rcial purposes, other than using the					purpo				
	COMMITTEE (In Full) orthwestern Mutual Life I	nsurance	Company Federal PA	С						
Full Name A. Erhard, I	of Individual (Last, First, Middle In Keith, A, ,	itial) or Full O	rganization Name		Date of	Rece	eipt			
Mailing Ad	dress 4807 Timberwood Ct				м м 08	1	D D D 31	/ Y	y y 2018	Y
City W Des Mo	vines	State IA	Zip Code 50265-5447						119135-6 s Period	
	imber of contributing itical committee.	С						-7-	42.0	00
Self-Emplo			upation (for Individual) neral Insurance Agent		Me	emo l	tem			
Receipt Fo		Aggregate	Year-to-Date ▼ 672.00	1						
B. Ertz, Jo		itial) or Full O	rganization Name		Date of	Rece	eipt			
	dress 18235 Shaker Blvd				м м 08	1	D D 15	/ Y	2018	Y
City Shaker Ht	5	State OH	Zip Code 44120-1754						519174-5 s Period	
	imber of contributing itical committee.	С						- -	208.0	00
Name of E Self-Emplo	Employer (for Individual) yed		upation (for Individual) neral Insurance Agent		Me	emo l	tem			
Receipt Fo		Aggregate	Year-to-Date ▼ 3328.00]						
Full Name C. Ertz, Jo	of Individual (Last, First, Middle In Dhn, C, ,	itial) or Full O	rganization Name		Date of	Rece	eipt			
	dress 18235 Shaker Blvd				08	1	31	/ Y	y y 2018	Y
City Shaker Ht	s	State OH	Zip Code 44120-1754						119135-5 s Period	
	imber of contributing itical committee.	С			<u> </u>	,		y	208.0	00
Self-Emplo		Gen	upation (for Individual) eral Insurance Agent		Me	emo I	ltem			
Receipt Fo		Aggregate	Year-to-Date ▼ 3328.00]						
SUBTOTAL	of Receipts This Page (optional)			•				9	458.0	00
TOTAL This	Period (last page this line number	only)		→						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 31 OF

	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	person for the purpose of soliciting contributions be to solicit contributions from such committee.
The Northwestern Mutual Life	Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Middle A. Eull, Bradley, L, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2363 N 81st St			08 15 2018
City Wauwatosa	State WI	Zip Code 53213-1001	Transaction ID : 2018081619136-654 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		22.00
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec / Ipas	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00]
Full Name of Individual (Last, First, Middle B. Eull, Bradley, L, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2363 N 81st St			08 31 2018
City Wauwatosa	State WI	Zip Code 53213-1001	Transaction ID : 2018090619135-653 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec / Ipas	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00]
Full Name of Individual (Last, First, Middle C. Fradin, Gerald, E, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 120 Belle Ave			08 15 2018
City _Highland Park	State IL	Zip Code 60035-2504	Transaction ID : 2018081619136-497 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		30.00
Name of Employer (for Individual) NML		upation (for Individual) Vmc Inv Mgmt	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00]
SUBTOTAL of Receipts This Page (optional)			74.00
TOTAL This Period (last page this line numb	er only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 32 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	× 11a		11b	11c	12						
Any information copied from such Reports or for commercial purposes, other than usi	and Statements ma ng the name and a	ay not be sold or used by any p ddress of any political committe	erson for the to solicit of	e pur contrit	pose of putions f	15 soliciting from such	16 contribut committe	17 ions ee.					
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С										
Full Name of Individual (Last, First, Mid A. Fradin, Gerald, E, ,	dle Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 120 Belle Ave				08 / D D / Y Y Y Y Y 2018									
City Highland Park	State IL	Zip Code 60035-2504					619135-49	96					
FEC ID number of contributing federal political committee.	С			30.00									
Name of Employer (for Individual) NML		upation (for Individual) Vmc Inv Mgmt		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00]										
Full Name of Individual (Last, First, Mid B. Franczyk, Lance, P, ,	Date	of Re	eceipt										
Mailing Address 2224 E 24th St	M 08		D D D 15	/ Y	2018	Y							
City Tulsa	State OK	Zip Code 74114-2912					519174-32 iis Period	2					
FEC ID number of contributing federal political committee.	C			42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Memo	o Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]										
Full Name of Individual (Last, First, Mid C. Franczyk, Lance, P, ,	dle Initial) or Full O	rganization Name	Date	of Re	eceipt								
Mailing Address 2224 E 24th St			M 08		31) / Y	2018 Y	Y					
City Tulsa	State OK	Zip Code 74114-2912					119135-3	2					
FEC ID number of contributing federal political committee.	C				y	, <u>,</u>	42.0	0					
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Memo	o Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 672.00	1										
SUBTOTAL of Receipts This Page (option	' nal)				, .	. ,	114.0	0					
TOTAL This Period (last page this line nu	mber only)												

Use separate schedule(s)

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 33 OF 127 (check only one)								
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using the		erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	Insurance Company Federal PA									
Full Name of Individual (Last, First, Middle I Frankl, Stephen, J, ,	nitial) or Full Organization Name	Date of Receipt								
Mailing Address 3225 Somers Ln	State Zip Code	08 / 15 / 2018 Transaction ID : 2018081619136-879								
Port Washington	WI 53074-9503	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	21.00								
Name of Employer (for Individual) NML	Occupation (for Individual) Director Planning & Sales	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 324.00]								
Full Name of Individual (Last, First, Middle I B. Frankl, Stephen, J, ,	nitial) or Full Organization Name	Date of Receipt								
Mailing Address 3225 Somers Ln		08 / D D / Y Y Y Y 2018								
City Port Washington	State Zip Code WI 53074-9503	Transaction ID : 2018090619135-878 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С	21.00								
Name of Employer (for Individual) NML	Occupation (for Individual) Director Planning & Sales	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 324.00]								
Full Name of Individual (Last, First, Middle I C. Frieling, Robert, T, ,	nitial) or Full Organization Name	Date of Receipt								
Mailing Address 4 Windy Hill Ln	State Zip Code	08 / 15 / Y Y Y Y 2018 Transaction ID : 2018081519174-4								
Wayland	MA 01778-2613	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	208.00								
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3328.00]								
SUBTOTAL of Receipts This Page (optional)	······	250.00								
TOTAL This Period (last page this line numbe	r 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

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
or	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PAC	>									
Α.	Full Name of Individual (Last, First, Middle Initial Frieling, Robert, T, ,	Date of Receipt											
	Mailing Address 4 Windy Hill Ln	08 / D D / Y Y Y Y 2018											
	City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2018083119135-4									
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) neral Insurance Agent Year-to-Date ▼	Memo Item									
	Primary General Other (specify) ▼												
в.	Full Name of Individual (Last, First, Middle Initial Gahan, Christopher, T, ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 425 M St NW			08 15 2018									
	City Washington	State DC	Zip Code 20001-4672	Transaction ID : 2018081619136-433 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		23.00									
	Name of Employer (for Individual) NML		upation (for Individual) Ieral Relations, Vp	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 368.00										
	Full Name of Individual (Last, First, Middle Initial Gahan, Christopher, T, ,) or Full O	rganization Name	Date of Receipt									
	Mailing Address 425 M St NW	08 31 2018											
	City Washington	State DC	Zip Code 20001-4672	Transaction ID : 2018090619135-432 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		23.00									
	Name of Employer (for Individual) NML		upation (for Individual) eral Relations, Vp	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 368.00										
s	UBTOTAL of Receipts This Page (optional)		•	254.00									
Т	OTAL This Period (last page this line number on	ly)	••••••										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 35 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)											
			for each category of the Detailed Summary Page		K 11a 13		11b 14	11c	12	г	17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any poddress of any political committee	erson e to s	for the	purp	ose of	soliciting	g contri	butio	ns				
\setminus	NAME OF COMMITTEE (In Full)			~											
	The Northwestern Mutual Life In	surance	Company Federal PAG	Ĵ											
Α.	Full Name of Individual (Last, First, Middle Initi Gavin, Sheila, M, ,	ial) or Full O	rganization Name		Date of Receipt										
	Mailing Address 5735 N Crestwood Blvd				08 / D D / Y Y Y Y 2018										
	City Glendale	State Zip Code WI 53209-4309				Transaction ID : 2018081619136-863									
	FEC ID number of contributing			_ Amount of Each Receipt this Period											
	federal political committee.	С			22.00										
	Name of Employer (for Individual) NML	Occu Ast		M	emo	Item									
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Other (specify) ▼		352.00	1											
в.	Full Name of Individual (Last, First, Middle Initi Gavin, Sheila, M, ,	ial) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 5735 N Crestwood Blvd				08 / D D / Y Y Y Y 2018										
	City	State WI	Zip Code					2018090			2				
	Glendale	_	53209-4309	_	Amount	tot	Each Re	eceipt th	is Peri	od	_				
	FEC ID number of contributing federal political committee.	С			22.00										
	Name of Employer (for Individual) NML		upation (for Individual) Gn CnI & Ast Sec/Ins		M	emo	Item								
	Receipt For:														
	Primary General Other (specify) ▼		352,00												
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Gawart, Chris, K, ,	ial) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 1610 N Prospect Ave				08 15 2018										
	City Milwaukee	State WI	Zip Code 53202-6702	_				2018081			3				
	FEC ID number of contributing	_	33202 0102	_	Amount	tot	Each Re	eceipt th	is Peri	od	_				
	federal political committee.	C		Ļ.	-	9	9	5	51.00						
	Name of Employer (for Individual)	Осси Vp G		M	emo	Item									
	Receipt For:	Aggregate													
	Other (specify)		444.00												
s	UBTOTAL of Receipts This Page (optional)			•			,		ę	95.00					
т	OTAL This Period (last page this line number of	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

				Detailed Summary Page	X	11a 13] 11 14	1b		11c 15	12	17							
	y information copied from such Reports and Statem for commercial purposes, other than using the nam					or the		pos	se of		liciting	contribu	tions							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance	Сс	ompany Federal PAC	C															
Α.	Gawart, Chris, K, ,									Date of Receipt										
	Mailing Address 1610 N Prospect Ave	State		Zip Code	_ [08 31 2018 Transaction ID : 2018090619135-532														
	5	NI		53202-6702	Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	;		51.00																
	Name of Employer (for Individual) NML	Occu Vp G	Memo Item																	
	Receipt For: Ag Primary General Other (specify) ▼	gregate																		
	Full Name of Individual (Last, First, Middle Initial) c Gerend, Timothy, J, ,	or Full Oi	rgar	nization Name		Date of	Re	ece	eipt											
	Mailing Address 5421 N Idlewild Ave							M M / D D / Y												
		State WI		Zip Code 53217-5331	Transaction ID : 2018081619136-519 Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	;		136.00																
	Name of Employer (for Individual) NML	Occu Svp		Memo Item																
	Receipt For: Ag Primary General Other (specify) ▼	gregate	Yea	r-to-Date ▼ 2176.00																
c.	Full Name of Individual (Last, First, Middle Initial) c Gerend, Timothy, J, ,	or Full Oi	rgar	nization Name		Date of	Re	ece	eipt											
	Mailing Address 5421 N Idlewild Ave		08 ^M	/	l	D D D)	/ Y	2018	Y										
	,	State WI	A							619135-5 is Period	18									
	FEC ID number of contributing federal political committee.)						y			9	136.	00							
	Name of Employer (for Individual) NML			ion (for Individual) eer Distribution		Me	emo	o It	tem											
	Receipt For: Ag Primary General Other (specify)	gregate																		
s	UBTOTAL of Receipts This Page (optional)			•••••	[9		l	y	323.0	00							
т	OTAL This Period (last page this line number only).				. [-			-									

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

FOR LINE NUMBER:

PAGE 37 OF

		Use separate schedule(s) (check only one)		
			Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	C
Α.	Full Name of Individual (Last, First, Middle Init Glover, Mitchell, B, ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 6700 Old Darby Trl NE			08 15 2018
	City Ada	State MI	Zip Code 49301-8360	Transaction ID : 2018081519174-3 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer (for Individual) Self-Employed Receipt For:		upation (for Individual) eral Insurance Agent	Memo Item
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00	1
в.	Full Name of Individual (Last, First, Middle Init Glover, Mitchell, B, ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 6700 Old Darby Trl NE			08 31 2018
	City Ada	State MI	Zip Code 49301-8360	Transaction ID : 2018083119135-3
	FEC ID number of contributing federal political committee.	C	49301-0300	Amount of Each Receipt this Period
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00	
с.	Full Name of Individual (Last, First, Middle Ini Goes, Thomas, J, ,	tial) or Full O	rganization Name	Date of Receipt
	Mailing Address 1526 Harston Ave			08 / D D / Y Y Y Y 2018
	City Orlando	State FL	Zip Code 32814-6700	Transaction ID : 2018081519174-54 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 838.00	1
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			541.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 38 OF

	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	11b	11c	12	
Any information copied from such Reports and or for commercial purposes, other than using							
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,					
The Northwestern Mutual Life	Insurance	Company Federal PA	C				
Full Name of Individual (Last, First, Middle Goes, Thomas, J, ,	Initial) or Full C	organization Name	Date of	f Receipt			
Mailing Address 1526 Harston Ave			м м 08	/ D D 31	/ Y	2018	Y
City Orlando	State FL	Zip Code 32814-6700		action ID : 2 t of Each Re			l .
FEC ID number of contributing federal political committee.	С					125.0	0
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	M	emo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 838.00	1				
Full Name of Individual (Last, First, Middle B. Goris, Tom, , , JR	Initial) or Full C	organization Name	Date of	f Receipt			
Mailing Address 4735 Wellington Dr			M M 08	/ D D 15	/ Y	2018	Y
City Long Grove	State IL	Zip Code 60047-5223		action ID : 2 t of Each Re			.
FEC ID number of contributing federal political committee.	С					208.0	0
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	— П м	emo Item			
Receipt For:	Aggregate	Year-to-Date V					
Other (specify) ▼		3328.00]				
Full Name of Individual (Last, First, Middle C. Goris, Tom, , , JR	Initial) or Full C	organization Name	Date of	f Receipt			
Mailing Address 4735 Wellington Dr			08	/ D D 31	/ Y	2018	Ŷ
City Long Grove	State IL	Zip Code 60047-5223		action ID : 2 t of Each Re			4
FEC ID number of contributing federal political committee.	С				5	208.0	0
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	м	emo Item			
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]				
SUBTOTAL of Receipts This Page (optional)				, , , ,	,	541.0	0
TOTAL This Period (last page this line numb	er only)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 39 OF

ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
11			for each category of the Detailed Summary Page		1 1a		11b 14	11c 15		г	17
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson e to so	for the	purp	oose of	soliciting	g contr	ibutic	ons
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PA	С							
Α.	Full Name of Individual (Last, First, Middle Init Gouverneur, Karl, G, ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 12895 N Cobblestone Ct				м м 08	/	D D 15	/ Y	ү 201	ү ү 8	
	City Mequon	State WI	Zip Code 53097-1812	_				2018081 eceipt th			D
	FEC ID number of contributing federal political committee.	С					-	 		20.00)
	Name of Employer (for Individual)		upation (for Individual) Dig Wrkplce & Corp Sol		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00								
B.	Full Name of Individual (Last, First, Middle Init Gouverneur, Karl, G, , Mailing Address 12895 N Cobblestone Ct	ial) or Full O	rganization Name		Date of	Re	ceipt		V	YYY	_
	City	State	Zip Code	_	08	ĺ	31		2018	3	
	Mequon	WI	53097-1812					2018090 eceipt th			
	FEC ID number of contributing federal political committee.	С					7			20.00)
	Name of Employer (for Individual) NML		upation (for Individual) Dig Wrkplce & Corp Sol		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00								
с.	Full Name of Individual (Last, First, Middle Init Grabner, Todd, Matthew, ,	ial) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 3086 E Silver Hawk Dr				08 ^M	/	D D D 15	/ Y	2018		
	City Holladay	State UT	Zip Code 84121-1572					2018081 eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>		9	- y	1:	25.00)
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		M	emo	Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00								
⊢	UBTOTAL of Receipts This Page (optional)		•	• -			, . , .	· ·	1(65.00	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 40 OF

	-	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions see to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
The Northwestern Mutual Life	Insurance	Company Federal PA	.C					
Full Name of Individual (Last, First, Middle A. Grabner, Todd, Matthew, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3086 E Silver Hawk Dr			08 31 Y Y Y Y 2018					
City Holladay	State UT	Zip Code 84121-1572	Transaction ID : 2018083119135-67 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		125.00					
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]					
Full Name of Individual (Last, First, Middle B. Grogan, John, M, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7860 N Club Cir			08 / Y Y Y Y 2018					
City Fox Point	State WI	Zip Code 53217-2939	Transaction ID : 2018081619136-842					
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					
Name of Employer (for Individual) NML		upation (for Individual) Ins Prod Client	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]					
Full Name of Individual (Last, First, Middle C. Grogan, John, M, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7860 N Club Cir			M M / D D / Y					
City Fox Point	State WI	Zip Code 53217-2939	Transaction ID : 2018090619135-841 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		208.00					
Name of Employer (for Individual) NML		upation (for Individual) Ins Prod Client	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]					
SUBTOTAL of Receipts This Page (optional)			541.00					
TOTAL This Period (last page this line numb	per only)							

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

FOR LINE NUMBER:

(check only one)

PAGE 41 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	×	11a 13		11b 14		11c 15	12	17	
Any information copied from such Reports or for commercial purposes, other than usi				or the		pose (oliciting	contribu	tions
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PAC	2							
Full Name of Individual (Last, First, Mid Gross, Stephen, , ,	organization Name		Date of	Re	ceipt					
Mailing Address 6 Twin Springs Ln				м м 08	/	D 1		/ Y	ү ү 2018	Υ
City Saint Louis	State MO	Zip Code 63124-1139				-			519174-3	3
FEC ID number of contributing federal political committee.	С		A	mount	of	Each	Re	ceipt th	is Period 208.	00
Name of Employer (for Individual) Self-Employed Receipt For:	Ger	upation (for Individual) neral Insurance Agent		Me	emo	ltem				
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2498.00								
Full Name of Individual (Last, First, Mid B. Gross, Stephen, , ,	dle Initial) or Full C	organization Name		Date of	Re	ceipt				
Mailing Address 6 Twin Springs Ln			08 31 2018							
City Saint Louis	Zip Code 63124-1139							119135-3 is Period	3	
FEC ID number of contributing federal political committee.	С					-		-7-	208.	00
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2498.00								
Full Name of Individual (Last, First, Mid C. Guay, Thomas, C, ,	dle Initial) or Full C	Prganization Name		Date of	Re	ceipt				
Mailing Address W73N377 Mulberry Ave)			^M 08	/	D 1	5 5	/ Y	y y 2018	Y
City Cedarburg	State WI	Zip Code 53012-2648	A						619136-5 is Period	37
FEC ID number of contributing federal political committee.	С			_		y .		y	88.	00
Name of Employer (for Individual) NML	upation (for Individual) Risk Selection Strat		Me	emo) Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1408.00								
SUBTOTAL of Receipts This Page (option	nal)					y		y	504.	00
TOTAL This Period (last page this line nu	mber only)					-				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 42 OF

	Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the p		ose of		g contribu	tions
\setminus	NAME OF COMMITTEE (In Full)									
/	The Northwestern Mutual Life Ins	surance	Company Federal PAC	;						
Α.	Full Name of Individual (Last, First, Middle Initia Guay, Thomas, C, ,	ll) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address W73N377 Mulberry Ave				м м 08	/	D D D 31	/ Y	2018	Y
	City	State	Zip Code		Transa	acti	on ID : 2	2018090	619135-5	536
	Cedarburg	WI	53012-2648	_ /	Amount	of	Each Re	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,	- 7	88.	00
	Name of Employer (for Individual) NML		upation (for Individual) Risk Selection Strat		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Primary General Other (specify) ▼		1408.00							
в.	Full Name of Individual (Last, First, Middle Initia Guinan, Stephen, T, ,	ll) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 126 Waverly Cir				м м 08	/	D D D 15	/ Y	2018	Ŷ
	City Phoenixville	State PA	Zip Code 19460-2500						519174-2	
	FEC ID number of contributing				Amount of Each Receipt this Period					
	federal political committee.	C					7	y -	42.	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date 🔻							
	Other (specify) ▼		672.00							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Guinan, Stephen, T, ,	l) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 126 Waverly Cir				08	/	D D D 31	/ Y	2018	Y
	City Phoenixville	State PA	Zip Code 19460-2500						119135- is Period	
	FEC ID number of contributing federal political committee.	С					, .	,	42.	
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		672.00							
s	UBTOTAL of Receipts This Page (optional)								172.	00
	OTAL This Period (last page this line number or		F					7		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 43 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	x 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	not be sold or used by any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance C	Company Federal PA	C
Full Name of Individual (Last, First, Middle Initi A. Hanson, Paul, L, , Mailing Address 261 Moser St City Moscow FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify) ▼	State ID C Occup Gene	Zip Code 83843-9264 Dation (for Individual) ral Insurance Agent fear-to-Date 672.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi B. Hanson, Paul, J, , Mailing Address N38W23333 Broken Hill Cir S City Pewaukee FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General	State WI C Occup Mana	Janization Name Zip Code 53072-2764 Dation (for Individual) Inging Director rear-to-Date ▼	Date of Receipt 08 / 15 / 2018 Transaction ID : 2018081619136-872 Amount of Each Receipt this Period 23.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle Initi C. Hanson, Paul, J, , Mailing Address N38W23333 Broken Hill Cir S City Pewaukee FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	State WI C Occup Manag	368.00 ganization Name Zip Code 53072-2764 Dation (for Individual) ging Director fear-to-Date ▼ 368.00	Date of Receipt 08 / 31 / 2018 Transaction ID : 2018090619135-871 Amount of Each Receipt this Period 23.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			88.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 44 OF

	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	e Insurance	Company Federal PA	C				
Full Name of Individual (Last, First, Middl A. Hanson, Paul, L, ,	le Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 261 Moser St			M M / D D / Y Y Y Y 08 31 2018				
City Moscow	State ID	Zip Code 83843-9264	Transaction ID : 2018083119135-29 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		42.00				
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]				
Full Name of Individual (Last, First, Middl B. Hanus, Kevin, G, ,	le Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 7456 N Crossway Rd			M M / D D / Y				
City Fox Point	State WI	Zip Code 53217-3523	Transaction ID : 2018081619136-538 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С						
Name of Employer (for Individual) NML		upation (for Individual) ior Director Restaurant Ope	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 224.00					
Full Name of Individual (Last, First, Middl C. Hanus, Kevin, G, ,	le Initial) or Full C	rganization Name	Date of Receipt				
Mailing Address 7456 N Crossway Rd			M M / D / Y				
City Fox Point	State WI	Zip Code 53217-3523	Transaction ID : 2018090619135-537 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		14.00				
Name of Employer (for Individual) NML Receipt For:		upation (for Individual) ior Director Restaurant Ope	Memo Item				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.00]				
SUBTOTAL of Receipts This Page (optiona	al)		70.00				
TOTAL This Period (last page this line nun	nber only)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 45 OF

	-	Use separate schedule(s)	(check only one)					
II EIVILED RECEIFIS		for each category of the Detailed Summary Page	Image: 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)		o = 1 15/						
The Northwestern Mutual	Life Insurance	Company Federal PA	AC .					
Full Name of Individual (Last, First, Mi A. Heidenreich, Wayne, F, , md	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4753 N Larkin St			08 15 2018					
City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID : 2018081619136-843 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		20.00					
Name of Employer (for Individual) NML		upation (for Individual) Medical	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00						
Full Name of Individual (Last, First, Mi B. Heidenreich, Wayne, F, , md	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4753 N Larkin St			08 31 2018					
City Whitefish Bay	State WI	Zip Code 53211-1152	Transaction ID : 2018090619135-842					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period					
Name of Employer (for Individual) NML		upation (for Individual) Medical	Memo Item					
Receipt For:	I ·	Year-to-Date 🔻						
Primary General Other (specify) ▼		, 320.00						
Full Name of Individual (Last, First, Mi Hempstead, Gerard, M , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 49 W Walling Dr			08 / D D / Y Y Y Y 2018					
City Creve Coeur	State MO	Zip Code 63141-7371	Transaction ID : 2018081519174-44 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		125.00					
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00						
SUBTOTAL of Receipts This Page (option	bnal)		▶ 165.00					
TOTAL This Period (last page this line r	umber only)		► <u></u>					

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

FOR LINE NUMBER:

(check only one)

PAGE 46 OF

IEIWIIZED RECEIPTS	5	for each category of the	X 11a 11b 11c 12							
		Detailed Summary Page								
or for commercial purposes, of	ther than using the name and	nay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In			-							
The Northwestern	Mutual Life Insurance	e Company Federal PA	C							
Hempstead, Gerard, M,	,	Organization Name	Date of Receipt							
Mailing Address 49 W Walli	ng Dr		08 31 Y Y Y Y 2018							
City	State	Zip Code	Transaction ID : 2018083119135-44							
Creve Coeur	MO	63141-7371	Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ting		125.00							
Name of Employer (for Indi Self-Employed	,	ccupation (for Individual) eneral Insurance Agent	Memo Item							
Receipt For:	Aggregat	e Year-to-Date V								
Primary Gen Other (specify) ▼		2000.00]							
Full Name of Individual (Las 3. Heurung, Mark, J, ,	st, First, Middle Initial) or Full	Organization Name	Date of Receipt							
Mailing Address 3315 Graha	am Hill Rd		08 15 2018							
City	State	Zip Code	Transaction ID : 2018081519174-26							
Orono	MN	55356-5501	Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ting		208.00							
Name of Employer (for Indi Self-Employed	,	ccupation (for Individual) eneral Insurance Agent	Memo Item							
Receipt For: Primary Gen Other (specify) ▼		e Year-to-Date ▼ 3328.00]							
Full Name of Individual (Las . Heurung, Mark, J, ,	st, First, Middle Initial) or Full	Organization Name	Date of Receipt							
Mailing Address 3315 Grah	am Hill Rd		08 31 2018							
City	State	Zip Code	Transaction ID : 2018083119135-26							
Orono	MN	55356-5501	Amount of Each Receipt this Period							
FEC ID number of contribut federal political committee.	ting		208.00							
Name of Employer (for Indi Self-Employed		ccupation (for Individual) eneral Insurance Agent	Memo Item							
Receipt For:		e Year-to-Date 🔻								
Other (specify)	leral	3328.00]							
SUBTOTAL of Receipts This	Page (optional)		541.00							
TOTAL This Period (last page	e this line number only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 47 OF

		Use separate schedule(s)	(check only one)				
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other	than using the name and a		erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Ful The Northwestern Mu	,	Company Federal PA	С				
Full Name of Individual (Last, F A. Hick, Laila, V, ,	. ,	rganization Name	Date of Receipt				
Mailing Address 10315 W Sunse			08 15 / Y Y Y Y 2018				
City Wauwatosa	State WI	Zip Code 53222-2350	Transaction ID : 2018081619136-835 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		20.00				
Name of Employer (for Individua NML	,	upation (for Individual) Transformation	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00]				
Full Name of Individual (Last, F B. Hick, Laila, V, ,	irst, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 10315 W Sunse			08 / D D / Y Y Y Y 2018				
City Wauwatosa	State WI	Zip Code 53222-2350	Transaction ID : 2018090619135-834 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		20.00				
Name of Employer (for Individua NML	,	upation (for Individual) Fransformation	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00]				
Full Name of Individual (Last, F C. Holter, Steve, H, ,	irst, Middle Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 11390 N Creek			08 / D D / Y Y Y Y 2018				
City Mequon	State WI	Zip Code 53092-4377	Transaction ID : 2018081519174-36 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		208.00				
Name of Employer (for Individua Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]				
SUBTOTAL of Receipts This Pag	e (optional)		248.00				
TOTAL This Period (last page this	s line number only)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 48 OF

ידו	TEMIZED RECEIPTS		Use separate schedule(s)	(ch	eck only	y or	ne)	(check only one)							
			for each category of the Detailed Summary Page		4 11a 13		11b 14	11c	12	Г	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	g contril	butio	ns				
$\overline{)}$	NAME OF COMMITTEE (In Full)			_											
/	The Northwestern Mutual Life Ins	surance	Company Federal PA	С											
A.	Full Name of Individual (Last, First, Middle Initia Holter, Steve, H, ,	l) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 11390 N Creekside Ct				M = M / D = D / Y = Y = Y = Y Y 08 31 2018 2										
	City	State WI	Zip Code	Transaction ID : 2018083119135-36											
	Mequon	VVI	53092-4377		Amount	t of	Each R	Receipt th	nis Perio	od					
	FEC ID number of contributing federal political committee.	С			<u> </u>		-y	- 49-	20	08.00					
	Name of Employer (for Individual)	Occu	upation (for Individual)		M	emo	tem								
	Self-Employed	Gen	neral Insurance Agent												
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General Other (specify) ▼	· · · ·	3328.00	11.											
				41.											
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name												
Β.	Iodice, Scott, , ,				Date of	Re	eceipt								
	Mailing Address 1930 Old Court Rd				08	/	15) / Y	2018						
	City Ruxton	State MD	Zip Code	-				2018081		-					
			21204-1849	_	Amoun	tot	Each H	leceipt th	iis Perio	od	_				
	FEC ID number of contributing federal political committee.						-y 1		20	08.00					
	Name of Employer (for Individual) Self-Employed	upation (for Individual) neral Insurance Agent	Memo Item												
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General		2498.00	11.											
	Other (specify)		, 2498.00												
C.	Full Name of Individual (Last, First, Middle Initia $Iodice,\ Scott,\ ,\ ,$	l) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 1930 Old Court Rd				^M 08	/	31		2018		1				
	City	State	Zip Code		Trans	act	ion ID :	2018083	311913	5-9					
	Ruxton	MD	21204-1849		Amount	t of	Each R	Receipt th	nis Perio	od					
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y		20	08.00					
	Name of Employer (for Individual)		upation (for Individual)		М	emo	o Item								
	Self-Employed Receipt For:	I	eral Insurance Agent												
	Primary General	Aggregate	Year-to-Date V	_ _											
	Other (specify)	2498.00													
s	UBTOTAL of Receipts This Page (optional)			•					62	4.00					
т	OTAL This Period (last page this line number or	וy)		•	Γ.			,		-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 49 OF

IТ			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11	-	11b 14	11c 15	12		17		
	y information copied from such Reports and St for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC)								
Α.	Full Name of Individual (Last, First, Middle Initi Jahnke, Nicholas, E, ,	ial) or Full O	Date of Receipt									
	Mailing Address 23702 Champe Ford Rd			(08 / D D / Y Y Y Y 2018							
	City Middleburg	State VA	Zip Code 20117-2940		Transaction ID : 2018081619136-758 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-y=- 1	1.95	3	7.00			
	Name of Employer (for Individual) NML		upation (for Individual) ional Director		Men	no Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 592.00									
в.	Full Name of Individual (Last, First, Middle Init Jahnke, Nicholas, E, , Mailing Address 23702 Champe Ford Rd	ial) or Full O	rganization Name	M	e of F	Receipt		2018	Ý	1		
	City Middleburg	State VA	Zip Code 20117-2940			tion ID :						
	FEC ID number of contributing federal political committee.	Occupation (for Individual) Regional Director			Amount of Each Receipt this Period 37.00 Memo Item							
	Name of Employer (for Individual) NML											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 592.00									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Jansky, Meg, E, ,	ial) or Full O	rganization Name	Date	e of F	Receipt						
	Mailing Address 4611 N Wildwood Ave				08 ^M	/ D 15		2018]		
	City Whitefish Bay	State WI	Zip Code 53211-1123			ction ID : of Each F						
	FEC ID number of contributing federal political committee.	С				y .	, ,	4	5.00			
	Name of Employer (for Individual) NML		upation (for Individual) Field Integration		Mer	no Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 720.00									
⊢	UBTOTAL of Receipts This Page (optional)					y .	· ·	11	9.00			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 50 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 person for the purpose of soliciting contributions te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	-									
Full Name of Individual (Last, First, Midc A. Jansky, Meg, E, ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 4611 N Wildwood Ave			08 31 2018							
City Whitefish Bay	State WI	Zip Code 53211-1123	Transaction ID : 2018090619135-780 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		45.00							
Name of Employer (for Individual) NML		upation (for Individual) Field Integration	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00]							
Full Name of Individual (Last, First, Mido B. Jessup, Mark, T, ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1301 Chickadee Ln			08 15 / Y Y Y Y 08 15							
City Grafton	State WI	Zip Code 53024-9593	Transaction ID : 2018081619136-543 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		17.00							
Name of Employer (for Individual) NML		upation (for Individual) ector Engineering	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 272.00]							
Full Name of Individual (Last, First, Mido C. Jessup, Mark, T, ,	lle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1301 Chickadee Ln	1-		08 / D D / Y Y Y Y 2018							
City Grafton	State WI	Zip Code 53024-9593	Transaction ID : 2018090619135-542 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		17.00							
Name of Employer (for Individual) NML		upation (for Individual) ctor Engineering	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 272.00]							
SUBTOTAL of Receipts This Page (option	al)		79.00							
TOTAL This Period (last page this line nu	mber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 51 OF

IТ	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1										
	y information copied from such Reports and St for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full)													
	The Northwestern Mutual Life In	surance	Company Federal PA	2										
Α.	Full Name of Individual (Last, First, Middle Init Joelson, Ronald, P, ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 1918 E Lafayette PI			08 15 2018										
	City Milwaukee	State WI	Zip Code 53202-1395	Transaction ID : 2018081619136-443 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		200.00										
	Name of Employer (for Individual) NML		upation (for Individual) & Cio	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		3200.00											
	Full Name of Individual (Last, First, Middle Init Joelson, Ronald, P, ,	ial) or Full O	rganization Name	Date of Receipt										
ь.	Mailing Address 1918 E Lafayette Pl			08 / 100 / Y Y Y Y 08 21 2018										
	City	State	Zip Code	Transaction ID : 2018090619135-442										
	Milwaukee	WI	53202-1395	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		200.00										
	Name of Employer (for Individual) NML		upation (for Individual) • & Cio	Memo Item										
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		, 3200.00											
<u> </u>	Full Name of Individual (Last, First, Middle Init Jones, Todd, M, ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address W252N4956 Aberdeen Dr			08 / D D / Y Y Y Y 08 15 2018										
	City Pewaukee	State WI	Zip Code 53072-1351	Transaction ID : 2018081619136-657										
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period										
	Name of Employer (for Individual) NML		upation (for Individual) President-Cntrl	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1888.00											
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		r	518.00										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 52 OF

IT.			Use separate schedule(s)	(ch	neck only	y on	e)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a 13		11b 14	11c 15	12	Г	17		
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any address of any political committe	person ee to s	for the	purp	ose of	soliciting	g contril	butio	ns		
\setminus	NAME OF COMMITTEE (In Full)		_	_									
$ \rangle$	The Northwestern Mutual Life In	surance	Company Federal PA	чС									
<u> </u>	Full Name of Individual (Last, First, Middle Initi Jones, Todd, M, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address W252N4956 Aberdeen Dr				08 31 2018								
	City	State	Zip Code		Trans	acti	on ID : :	2018090	619135	5-656	5		
	Pewaukee	WI	53072-1351		Amount	of	Each R	eceipt th	is Perio	od			
	FEC ID number of contributing federal political committee.	С			118.00								
	Name of Employer (for Individual) NML		upation (for Individual) e President-Cntrl		M	emo	Item						
	Receipt For:	Aggregate	Year-to-Date V										
	Other (specify)		1888.00										
				- 1									
В.	Full Name of Individual (Last, First, Middle Initi Kelley, Shawn, F, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address 7812 Remington Rd				08	/	15	/ Y	2018	Ý Y	1		
	City	State	Zip Code		Trans	actio	on ID : 2	2018081	519174	1-50			
	Montgomery	OH	45242-7130		Amount	of	Each R	eceipt th	is Perio	od			
	FEC ID number of contributing federal political committee.	С					,		12	25.00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		M	emo	Item						
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		2000.00										
— с.	Full Name of Individual (Last, First, Middle Initi Kelley, Shawn, F, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address 7812 Remington Rd				08 M	/	31	/ Y	2018		1		
	City	State	Zip Code		Trans	acti	on ID :	2018083	119135	5-50			
	Montgomery	OH	45242-7130		Amount	of	Each R	eceipt th	is Perio	od			
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y	9	12	25.00			
	Name of Employer (for Individual)	Осси	upation (for Individual)		М	emo	Item						
	Self-Employed	Gen	eral Insurance Agent										
	Receipt For:	Aggregate	Year-to-Date V										
	Other (specify)		2000.00										
	UBTOTAL of Receipts This Page (optional)			▶ _		_	y .	· ·	36	8.00	-		
1	OTAL This Period (last page this line number of	only)					,		-	-			

FOR LINE NUMBER:

PAGE 53 OF

	-	Use separate schedule(s)	(check d	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a	a 🗌	11b 14	11c	12	17						
Any information copied from such Reports or for commercial purposes, other than usi			erson for th		rpose of	soliciting	g contribu	tions						
NAME OF COMMITTEE (In Full)														
The Northwestern Mutual L	ife Insurance	Company Federal PA	С											
Full Name of Individual (Last, First, Mid A. Kemelgor, Troy, B, ,	dle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 7495 Bridlespur Ln			08 / D D / Y Y Y Y 2018											
City Delaware	State OH	Zip Code 43015-8613		Transaction ID : 2018081519174-46 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С				-		42.	00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Mem	o Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]											
Full Name of Individual (Last, First, Mid B. Kemelgor, Troy, B, ,	dle Initial) or Full O	rganization Name	Date	of R	eceipt									
Mailing Address 7495 Bridlespur Ln			0		31) / Y	ү ү 2018	Y						
City Delaware	State OH	Zip Code 43015-8613					119135-4	6						
FEC ID number of contributing federal political committee.	С	43013-0013	Amount of Each Receipt this Period											
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]											
Full Name of Individual (Last, First, Mid C. Kendler, Martha, M, ,	dle Initial) or Full O	rganization Name	Date	of R	eceipt									
Mailing Address 1775 Village Green Ct # C			M 04		15		2018	Y						
City Elm Grove	State WI	Zip Code 53122-1164					1619136-4 nis Period	52						
FEC ID number of contributing federal political committee.	C				, ,	, ,	20.	00						
Name of Employer (for Individual) NML														
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 248.00	1											
SUBTOTAL of Receipts This Page (option	nal)				,	,	104.0	00						
TOTAL This Period (last page this line nu	mber only)													

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 54 OF

	-	Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
or for commercial purposes, other than using			person for the purpose of soliciting contributions te to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	С										
Full Name of Individual (Last, First, Middle Kendler, Martha, M, ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 1775 Village Green Ct # C			M M / D / Y										
City Elm Grove	State WI	Zip Code 53122-1164	Transaction ID : 2018090619135-451 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C												
Name of Employer (for Individual) NML		upation (for Individual) Business & Adv Market	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 248.00]										
Full Name of Individual (Last, First, Middle 3. Kiecker, David, Daniel, ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 11696 Approach Blvd													
City Fishers	State IN	Zip Code 46037-4146	Transaction ID : 2018081519174-59 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		208.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]										
Full Name of Individual (Last, First, Middle C. Kiecker, David, Daniel, ,	Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 11696 Approach Blvd			08 / D D / Y Y Y Y 08 31 2018										
City Fishers	State IN	Zip Code 46037-4146	Transaction ID : 2018083119135-59 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		208.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]										
SUBTOTAL of Receipts This Page (optional)			436.00										
TOTAL This Period (last page this line numb	er only)												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 55 OF

IТ	TEMIZED RECEIPTS		Use separate schedule(s)	(check only one)									
11			for each category of the Detailed Summary Page		1a 3		11b 14	11c 15		Г	17		
	y information copied from such Reports and St for commercial purposes, other than using the												
\setminus	NAME OF COMMITTEE (In Full)												
	The Northwestern Mutual Life In	surance	Company Federal PAC	2									
Α.	Full Name of Individual (Last, First, Middle Initi Koch, William, S, ,	al) or Full O	Date of Receipt										
	Mailing Address 4645 Swilcan Bridge Ln S			N	08 / D D / Y Y Y Y 08 15 2018								
	City Jacksonville	State FL	Zip Code 32224-5621		Transaction ID : 2018081519174-2 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C											
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	10	Me	emo	ltem						
	Receipt For:		Year-to-Date V	_									
	Primary General	Aggregate											
	Other (specify) ▼	L	2000.00										
B	Full Name of Individual (Last, First, Middle Initi Koch, William, S, ,	al) or Full O	rganization Name	Da	ite of	Bec	eint						
2.	Mailing Address 4645 Swilcan Bridge Ln S				08	/	D D D 31	/ Y	2018		1		
	City	State	Zip Code	Т	ransa	actio	n ID :	2018083	311913	5-2			
	Jacksonville	FL	32224-5621	An	nount	of E	ach R	eceipt t	his Per	iod			
	FEC ID number of contributing federal political committee.	C			125.00								
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	ltem						
	Receipt For:	Aggregate Year-to-Date ▼											
	Primary General Other (specify) ▼		2000.00										
— c.	Full Name of Individual (Last, First, Middle Initi Kolawole, Abimbola, O, ,	al) or Full O	rganization Name	Da	ite of	Rec	eipt						
	Mailing Address 4801 N Woodburn St			N	08	/	15	/ Y	2018		1		
	City Whitefish Bay	State WI	Zip Code 53217-6064					201808 eceipt tl		-	D		
	FEC ID number of contributing federal political committee.	С			louint					43.00)		
	Name of Employer (for Individual) NML		upation (for Individual) Policy Benefits		Me	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 520.00										
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c								2	93.00			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 56 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions te to solicit contributions from such committee.								
	fa la aura a a a		0								
The Northwestern Mutual Li	te insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Mide Kolawole, Abimbola, O, ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4801 N Woodburn St			08 31 2018								
City Whitefish Bay	State WI	Zip Code 53217-6064	Transaction ID : 2018090619135-439 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		43.00								
Name of Employer (for Individual) NML		upation (for Individual) Policy Benefits	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00]								
Full Name of Individual (Last, First, Mido B. Konopa, Kevin, J, ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2331 N 90th St			08 15 2018								
City Wauwatosa	State WI	Zip Code 53226-1828	Transaction ID : 2018081619136-807								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
Name of Employer (for Individual) NML		upation (for Individual) Distribution Strategy	Memo Item								
Receipt For:		Year-to-Date ▼									
Primary General Other (specify) ▼		, 240.00]								
Full Name of Individual (Last, First, Mido C. Konopa, Kevin, J, ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2331 N 90th St			08 31 / Y Y Y Y 08 31 2018								
City Wauwatosa	State WI	Zip Code 53226-1828	Transaction ID : 2018090619135-806 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		15.00								
Name of Employer (for Individual) NML		upation (for Individual) Distribution Strategy	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 240.00]								
SUBTOTAL of Receipts This Page (option	al)		73.00								
TOTAL This Period (last page this line nu	mber only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 57 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
			person for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)	<i>.</i> .		2									
The Northwestern Mutual Li	te Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Mido A. Kosnick, Joshua, Steven, ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5051 Augusta Dr			08 15 2018									
City Middleton	State WI	Zip Code 53597-8813	Transaction ID : 2018081519174-70 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]									
Full Name of Individual (Last, First, Mide B. Kosnick, Joshua, Steven, ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 5051 Augusta Dr		7. 0.1	08 / D D / Y Y Y Y 2018									
City Middleton	State WI	Zip Code 53597-8813	Transaction ID : 2018083119135-70 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) Ieral Insurance Agent	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		672.00]									
Full Name of Individual (Last, First, Mide C. Kracht, Carol, L, ,	lle Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1610 N Prospect Ave			08 / D D / Y Y Y Y 08 15 2018									
City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2018081619136-792 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		46.00									
Name of Employer (for Individual) NML		upation (for Individual) Dep Gc/Sec & Board Rel	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 736.00]									
SUBTOTAL of Receipts This Page (option	al)		130.00									
TOTAL This Period (last page this line nu	mber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 58 OF

		Use separate schedule(s)	(check only one)											
111			for each category of the Detailed Summary Page		′ 11a 13		11b 14	11c 15	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PAC	C										
A.	Full Name of Individual (Last, First, Middle Initia Kracht, Carol, L, ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 1610 N Prospect Ave		08 31 2018											
	City Milwaukee	State WI						619135-7 iis Period	91					
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 46.00										
	Name of Employer (for Individual) NML		upation (for Individual) Dep Gc/Sec & Board Rel		Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 736.00											
B.	Full Name of Individual (Last, First, Middle Initia Kramer, Ryan, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 665 S Euclid Ave			08	/	15		ү ү 2018	Y					
	City Elmhurst	State IL	Zip Code 60126-4337						519174-5 iis Period	2				
	FEC ID number of contributing federal political committee.	С							208.	00				
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00											
С.	Full Name of Individual (Last, First, Middle Initia Kramer, Ryan, , ,	l) or Full Or	rganization Name		Date of	Re	eceipt							
	Mailing Address 665 S Euclid Ave				м м 08	/	31) / Y	2018 Y	Y				
	City Elmhurst	State IL	Zip Code 60126-4337				-		119135-5 iis Period	2				
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y 1	,	208.	00				
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emc) Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00											
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	.,	462.	00				
т	OTAL This Period (last page this line number on	ıly)	•	•										

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

FOR LINE NUMBER:

(check only one)

PAGE 59 OF

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports a	and Statements ma	ay not be sold or used by any p	13 14 15 16 17 erson for the purpose of soliciting contributions									
			e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
The Northwestern Mutual Lif	fe Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Midd Laszewski, Todd, L, ,	le Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 2604 N 90th St			08 / D D / Y Y Y Y 08 15 2018									
City	State	Zip Code	Transaction ID : 2018081619136-724									
Wauwatosa	WI	53226-1813	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		14.00									
Name of Employer (for Individual) NML		upation (for Individual) Director & Actuary	Memo Item									
Receipt For:	Aggregate	Year-to-Date V										
Primary General Other (specify) ▼]											
Full Name of Individual (Last, First, Midd B. Laszewski, Todd, L, ,	le Initial) or Full C	Prganization Name	Date of Receipt									
Mailing Address 2604 N 90th St			08 31 2018									
City	State	Zip Code	Transaction ID : 2018090619135-723									
Wauwatosa	WI	53226-1813	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		14.00									
Name of Employer (for Individual) NML	Occ SR	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 224.00]									
Full Name of Individual (Last, First, Midd C. Lawhon, M, Kevin, ,	le Initial) or Full C	Prganization Name	Date of Receipt									
Mailing Address 2430 Vanderbilt Beach R Unit 108-349	Rd		08 / D D / Y Y Y Y 08 15 2018									
City	State	Zip Code	Transaction ID : 2018081519174-40									
Naples	FL	34109-2654	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Self-Employed		eral Insurance Agent	_									
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General			1									
Other (specify)		2498.00										
SUBTOTAL of Receipts This Page (optional	al)		236.00									
TOTAL This Period (last page this line num	nber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 60 OF

		Use separate schedule(s)	(check only one)									
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	C									
/			~									
Full Name of Individual (Last, First, Middle Lawhon, M, Kevin, ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 2430 Vanderbilt Beach Rd Unit 108-349			08 31 / Y Y Y Y 08 31									
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2018083119135-40 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2498.00]									
Full Name of Individual (Last, First, Middle B. Luckow, Erika, K, ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address N102W14232 Gatewood Pl			08 / D D / Y Y Y Y 2018									
City Germantown	State WI	Zip Code 53022-5320	Transaction ID : 2018081619136-574 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		14.00									
Name of Employer (for Individual) NML		upation (for Individual) Strategic Comm	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		, 224.00]									
Full Name of Individual (Last, First, Middle C. Luckow, Erika, K, ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address N102W14232 Gatewood P	l		08 31 / Y Y Y Y Y 08 31									
City Germantown	State WI	Zip Code 53022-5320	Transaction ID : 2018090619135-573 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		14.00									
Name of Employer (for Individual) NML		upation (for Individual) Strategic Comm	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 224.00]									
SUBTOTAL of Receipts This Page (optional).			236.00									
TOTAL This Period (last page this line number	er only)											

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

FOR LINE NUMBER:

(check only one)

PAGE 61 OF

10	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	-			-	1b	_	1c	12	<u> </u>			
	y information copied from such Reports and Stater for commercial purposes, other than using the nar						the			se of :	soli					
	NAME OF COMMITTEE (In Full)			, , , , , , , , , , , , , , , , , , , ,			141									
	The Northwestern Mutual Life Insu	irance	C	ompany Federal PAC	2											
	Full Name of Individual (Last, First, Middle Initial) Lueder, Matthew, James, ,	or Full C	Drga	nization Name	(Date of Receipt										
	Mailing Address 2359 N Wahl Ave			1	M / D D / Y											
	5	State		Zip Code		Tr	ans	acti	ior	n ID : 2	201	80815	519174-	57		
	Milwaukee	WI		53211-4513	/	٩mo	ount	of	Ea	ach Re	ecei	ipt thi	s Perio	b		
	FEC ID number of contributing federal political committee.	C						_	,			-	125	.00		
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent			Me	emo	o It	em						
	Receipt For: A	aareaate	Yea	ar-to-Date 🔻												
	Primary General Other (specify) ▼		-	2000.00												
	Full Name of Individual (Last, First, Middle Initial) Lueder, Matthew, James, ,	or Full C	Drga	nization Name		Date	e of	Re	ece	eipt						
	Mailing Address 2359 N Wahl Ave						м)8	/	ſ	D D D 31	/	Y	y y 2018	Y		
	City	State		Zip Code		Tra	ans	acti	ion	n ID : 2	2018	80831	19135-	57		
	Milwaukee	WI		53211-4513									s Perio	-		
	FEC ID number of contributing federal political committee.	C			_		-			-y	125	.00				
	Name of Employer (for Individual) Self-Employed	Occ Gei	Memo Item													
	Receipt For: A Primary General Other (specify) ▼	ggregate	Yea	ar-to-Date ▼ 2000.00												
	Full Name of Individual (Last, First, Middle Initial)	or Full C	Drga	nization Name		Date	e of	Re	ece	eipt						
	Mailing Address 1213 E Goodrich Ln					М	18	/	ľ	D D 15	/	Y	2018 [°]	Y		
	3	State		Zip Code		Tr	ans	act	ior	n ID : 2	201	80816	619136-	732		
	Fox Point	WI		53217-2946	/	٩md	ount	of	Ea	ach Re	ecei	ipt this	s Perio	b		
	FEC ID number of contributing federal political committee.	C							,			9	168	.00		
	Name of Employer (for Individual) NML		•	tion (for Individual) curities			Me	emc	o It	tem						
	Receipt For:			ar-to-Date 🔻												
	Primary General	ggiogato														
	Other (specify)		-7	2688.00												
S	JBTOTAL of Receipts This Page (optional)			••••••					,			,	418	.00		
т	OTAL This Period (last page this line number only))							-			-				

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

FOR LINE NUMBER:

(check only one)

PAGE 62 OF

ITEMIZED REGEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14		11c	12	17
Any information copied from such Reports and Sta or for commercial purposes, other than using the				or the p		oose		oliciting	contribu	tions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	;							
Full Name of Individual (Last, First, Middle Initia Lueken, Jeffrey, J, , Mailing Address 1213 E Goodrich Ln City Fox Point FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Zip Code 53217-2946		mount	/ acti of	on l	31 ID : 20 ch Rec		2018 619135-7 is Period 168.0	31	
NML Receipt For: Primary General Other (specify) ▼		o Securities e Year-to-Date ▼ 2688.00								
Full Name of Individual (Last, First, Middle Initia Lyons, Stephanie, A, , Mailing Address 809 E Sylvan Ave City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	State WI C Occ Vp	Drganization Name Zip Code 53217-5353 Cupation (for Individual) - Era e Year-to-Date ▼ 932.00		mount	of	on I	15 I D : 20 ch Rec	018081	2018 619136-6 is Period 77.	11
Full Name of Individual (Last, First, Middle Initia Lyons, Stephanie, A, , Mailing Address 809 E Sylvan Ave City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	State WI C Occ Vp	Drganization Name Zip Code 53217-5353 Cupation (for Individual) - Era		mount	/ acti of	ion	31 ID:20	018090	2018 619135-6 is Period 777.	10
SUBTOTAL of Receipts This Page (optional)		r		-		,		,	322.0	00

FOR LINE NUMBER:

PAGE 63 OF

IT.			Use separate schedule(s)	(ch	(check only one)									
11			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15		ſ	17			
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any p ddress of any political committee	erson e to so	for the	pur ntrib	pose of	soliciting	g contr	ributio	ons			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С										
A.	Full Name of Individual (Last, First, Middle Init Mahaffey, Cory, A, ,	ial) or Full O	rganization Name	Date of Receipt										
	Mailing Address 13764 Knaus Rd				м м 08	/	D D 15	/ Y	201	8 8				
	City Lake Oswego	State OR	Zip Code 97034-2175	_				2018081 eceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		-y		1	25.00)			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		M	emc	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00	1										
в.	Full Name of Individual (Last, First, Middle Init Mahaffey, Cory, A, , Mailing Address 13764 Knaus Rd	ial) or Full O	rganization Name		Date of	f Re	eceipt	/ Y	Ý	YY				
	City	State	Zip Code		08	acti	31	2018083	2018	3				
	Lake Oswego	OR	97034-2175					eceipt th						
	FEC ID number of contributing federal political committee.	С								25.00)			
	Name of Employer (for Individual) Self-Employed	Occi Ger		M	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00											
с.	Full Name of Individual (Last, First, Middle Init Manista, Raymond, J, ,	ial) or Full O	rganization Name		Date of	f Re	eceipt							
	Mailing Address 7236 N Crossway Rd				^M 08		D D D 15	JL	2018	В				
	City Fox Point	State WI	Zip Code 53217-3519	_				2018081 eceipt th			6			
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	- y	2	08.00)			
	Name of Employer (for Individual) NML		upation (for Individual) Chief Legal Off & Sec		М	emo	ttem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00											
	UBTOTAL of Receipts This Page (optional)			• -			y		4:	58.00				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 64 OF

	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Middle A. Manista, Raymond, J, ,	e Initial) or Full O	rganization Name	Data of Dessist									
A. Manista, Raymond, J, , Mailing Address 7236 N Crossway Rd			Date of Receipt									
City	State	Zip Code	08 31 2018 Transaction ID : 2018090619135-475									
Fox Point	WI	53217-3519	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) NML		upation (for Individual) Chief Legal Off & Sec	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]									
Full Name of Individual (Last, First, Middle B. Mannebach, Steven, C, ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 101 Colorado St # 260			08 15 2018									
City	State TX	Zip Code	Transaction ID : 2018081619136-564									
		78701-4103	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		118.00									
Name of Employer (for Individual) NML		upation (for Individual) naging Partner	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		1888.00]									
Full Name of Individual (Last, First, Middle C. Mannebach, Steven, C, ,	e Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 101 Colorado St # 260			08 31 Y Y Y Y Y 2018									
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2018090619135-563 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С											
Name of Employer (for Individual) NML		upation (for Individual) aging Partner	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1888.00]									
SUBTOTAL of Receipts This Page (optional)		444.00									
TOTAL This Period (last page this line num	ber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 65 OF

		Use separate schedule(s)	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1										
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	0										
Full Name of Individual (Last, First, Middle I McClure, Brian, W, ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1402 Wyndemere Point Dr			08 / D D / Y Y Y Y 08 15 2018										
City Champaign	State IL	Zip Code 61822-3349	Transaction ID : 2018081519174-55 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00]										
Full Name of Individual (Last, First, Middle I 3. McClure, Brian, W , ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 1402 Wyndemere Point Dr		08 31 2018											
City Champaign	State IL	Zip Code 61822-3349	Transaction ID : 2018083119135-55 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		42.00										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00											
Full Name of Individual (Last, First, Middle I C. McLennon, Mark, J, ,	nitial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2571 N 86th St			08 / D D / Y Y Y Y 08 15 2018										
City Wauwatosa	State WI	Zip Code 53226-1921	Transaction ID : 2018081619136-503 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		42.00										
Name of Employer (for Individual) NML		upation (for Individual) ps Bus Dev	Memo Item										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 672.00]										
SUBTOTAL of Receipts This Page (optional)			126.00										
TOTAL This Period (last page this line number	er only)												

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

FOR LINE NUMBER:

(check only one)

PAGE 66 OF

TEMIZED RECEIPTS		for each category of the Detailed Summary Page		1a	_	11b	11c	12							
Any information copied from such	Reports and Statements ma	av not be sold or used by any ne		3 the p		14	15 soliciting	16 contribut	17 ions						
or for commercial purposes, other	r than using the name and a														
		Company Forderel DAG	~												
		Company Federal PAC	ر 												
Full Name of Individual (Last, McLennon, Mark, J, ,	First, Middle Initial) or Full O	rganization Name	Date of Receipt 08 / 31 / 2018 Transaction ID : 2018090619135-502												
Mailing Address 2571 N 86th S	St														
City	State	Zip Code													
Wauwatosa	WI	53226-1921	Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C		42.00												
Name of Employer (for Individu NML	,	upation (for Individual) ps Bus Dev	Memo Item												
Receipt For:	Aqqreqate	Year-to-Date ▼													
Primary Genera															
Other (specify) ▼		672.00													
Full Name of Individual (Last, 3. McQuade, Corey, D, ,	First, Middle Initial) or Full O	rganization Name	Dat	te of I	Red	ceipt									
Mailing Address 190 S Berkley	Ave			08	/	15	/ Y	2018	Y						
City	State	Zip Code	Tr	ransa	ctic	on ID : 2	018081	519174-6)						
Elmhurst	IL	60126-3228	Transaction ID : 2018081519174-60 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C							208.0	00						
Name of Employer (for Individ Self-Employed	,	upation (for Individual) neral Insurance Agent		Mer	mo	Item									
Receipt For:		Year-to-Date ▼	—												
Primary Genera Other (specify) ▼		2498.00													
Full Name of Individual (Last, C. McQuade, Corey, D, ,	First, Middle Initial) or Full O	rganization Name	Dat	te of I	Red	ceipt									
Mailing Address 190 S Berkley				08 ^M	/	D D D 31	/ Y	2018	Y						
City	State	Zip Code	Т	ransa	cti	on ID : 2	2018083	119135-6	0						
Elmhurst	IL	60126-3228	Am	iount d	of E	Each Re	eceipt th	is Period							
FEC ID number of contributing federal political committee.	C					,	. ,	208.0	00						
Name of Employer (for Individu	ual) Occi	upation (for Individual)	Memo Item												
Self-Employed	Gen	eral Insurance Agent													
Receipt For:		Year-to-Date ▼													
Primary Genera Other (specify)	u	2498.00													
SUBTOTAL of Receipts This Pa	ge (optional)	•••••				,	,	458.0	00						
TOTAL This Period (last page th	is line number only)	••••••				,									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 67 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance Company Federal	PAC
Full Name of Individual (Last, First, Middle Initi McTigue, John, W, , Mailing Address 205 E 4th St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code IL 60521-4603 C Occupation (for Individual) Chief Distribution Adv Aggregate Year-to-Date ▼ 1600.00 1600.00	Date of Receipt 08 15 2018 Transaction ID : 2018081619136-883 Amount of Each Receipt this Period 100.00 Memo Item
Full Name of Individual (Last, First, Middle Initi B. McTigue, John, W, , Mailing Address 205 E 4th St City Hinsdale FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code IL 60521-4603 C Occupation (for Individual) Chief Distribution Adv Aggregate Year-to-Date ▼	Date of Receipt 08 ' 31 ' 2018 Transaction ID : 2018090619135-882 Amount of Each Receipt this Period 100.00 Memo Item
Full Name of Individual (Last, First, Middle Initi Meehan, Daniel, J, , Mailing Address N30W6890 Lincoln Blvd City Cedarburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	al) or Full Organization Name State Zip Code WI 53012-2266 C Occupation (for Individual) Director Aggregate Year-to-Date ▼ 292.00 The second sec	Date of Receipt Mom 15 2018 Transaction ID : 2018081619136-478 Amount of Each Receipt this Period 19.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		

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

FOR LINE NUMBER:

(check only one)

PAGE 68 OF

				for each category of the Detailed Summary Page	×	11a 13		11 14	1b 4	11c	F	12 16	17			
	y information copied from such Reports and Stater for commercial purposes, other than using the nan					or the		pos	se of s	solicitir		ontribut	tions			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance	Co	ompany Federal PAC)											
Α.	Full Name of Individual (Last, First, Middle Initial) Meehan, Daniel, J, , Mailing Address N30W6890 Lincoln Blvd	or Full O	Drga	nization Name	Date of Receipt											
	,	State WI		Zip Code 53012-2266								9135-4 Period	77			
	FEC ID number of contributing federal political committee.				Amount of Each Receipt this Period											
	Name of Employer (for Individual) NML Receipt For: Ag Primary General Other (specify) ▼	Dire	ecto	tion (for Individual) n ar-to-Date ▼ 292.00		М	emo	o It	em							
	Full Name of Individual (Last, First, Middle Initial)	or Full O	Drga	nization Name		Date of	Re	ece	ipt							
	Mailing Address 264 Cloister Green Ln					™M 08	1	l	D D 15	/		018	Y			
	City S Memphis	State TN		Zip Code 38120-2357								9 174-8 Period				
	FEC ID number of contributing federal political committee.	0		_		-				125.0	00					
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent		М	emo	o It	em							
	Receipt For: Ag Primary General Other (specify) ▼	ggregate	e Yea	ar-to-Date ▼ 2000.00												
с.		or Full O	Drga	nization Name		Date of	Re	ece	ipt							
	Mailing Address 264 Cloister Green Ln					м м 08	/	E	D D 31	/		018	Y			
	City Semphis	State TN		Zip Code 38120-2357	A							9135-8 Period				
	FEC ID number of contributing federal political committee.	0			1			,		,	_	125.0	00			
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	nera	tion (for Individual) Insurance Agent		M	emc	o It	em							
	Primary General Other (specify)	ggregate	e Yea	ar-to-Date ▼ 2000.00												
s	UBTOTAL of Receipts This Page (optional)			•••••	[,		, , , , , , , , , , , , , , , , , , ,		269.0	00			
Т	OTAL This Period (last page this line number only))		•				-		- T						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 69 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17								
			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Mic A. Mees, Arthur, J, , JR	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5347 N Hollywood Ave			08 15 2018								
City Whitefish Bay	State WI	Zip Code 53217-5324	Transaction ID : 2018081619136-890 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		36.00								
Name of Employer (for Individual) NML		upation (for Individual) Distribution Performance	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.00]								
Full Name of Individual (Last, First, Mic Mees, Arthur, J, , JR	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5347 N Hollywood Ave	Otata	Zin Oode	08 / D D / Y Y Y Y 2018								
City Whitefish Bay	State WI	Zip Code 53217-5324	Transaction ID : 2018090619135-889 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		36.00								
Name of Employer (for Individual) NML		upation (for Individual) Distribution Performance	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 576.00]								
Full Name of Individual (Last, First, Mic C. Miller, Aaron, , ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 82 Worcester St Apt 1	State	Zin Code	08 15 2018								
City Boston	MA	Zip Code 02118-3903	Transaction ID : 2018081519174-68 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		125.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 838.00]								
SUBTOTAL of Receipts This Page (option	nal)		197.00								
TOTAL This Period (last page this line nu	umber only)										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 70 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page		X 11a		11	-	11c	12	17				
	y information copied from such Reports and State for commercial purposes, other than using the na					for the		pos	se of	soliciting	g contribu	tions				
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance	Co	ompany Federal PAC	2											
Α.	Full Name of Individual (Last, First, Middle Initial) Miller, Aaron, , ,	or Full O	Drga	nization Name	Date of Receipt											
	Mailing Address 82 Worcester St Apt 1				08 / D D / Y Y Y Y 2018											
	City Boston	State MA		Zip Code 02118-3903							119135-0					
	FEC ID number of contributing federal political committee.	C				Amoun	it of	Ea	ch Re	eceipt th	iis Perioc 125	_				
	Name of Employer (for Individual) Self-Employed Receipt For:	Ger	nera	tion (for Individual)		N	lemc	o Ite	əm							
	Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 838.00												
B.	Full Name of Individual (Last, First, Middle Initial) Miller, Joseph, , ,	or Full O	Orga	nization Name		Date o	of Re	ecei	pt							
	Mailing Address N33W29207 Millridge Rd			_		08	/		15	/ Y	2018	Y				
	City Pewaukee	State WI	Zip Code 53072-3264				-			619136-6 iis Perioc						
	FEC ID number of contributing federal political committee.	С		15.00												
	Name of Employer (for Individual) NML	Occ Mar		N	lemc	o Ite	əm									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 300.00												
с.	Full Name of Individual (Last, First, Middle Initial) Miller, Joseph, , ,	or Full O	Orga	nization Name		Date o	of Re	ecei	pt							
	Mailing Address N33W29207 Millridge Rd					08	/	Ľ	31	/ Y	2018	Y				
	City Pewaukee	State WI		Zip Code 53072-3264							619135- his Perioc					
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period											
	Name of Employer (for Individual) NML		tion (for Individual) ng Director	Memo Item												
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00														
s	UBTOTAL of Receipts This Page (optional)			•	I			y		9	155.	00				
Т	OTAL This Period (last page this line number only	y)		••••••		L		-								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 71 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)									
TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
			13 14 15 16 17 version for the purpose of soliciting contributions e to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	С									
Full Name of Individual (Last, First, Mide A. Miller, Kevin, E, ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 214 Schenley Rd			M M / D / Y									
City Pittsburgh	State PA	Zip Code 15217-1171	Transaction ID : 2018081519174-25 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]									
Full Name of Individual (Last, First, Mido B. Miller, Kevin, E , ,	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 214 Schenley Rd			08 / D D / Y Y Y Y 2018									
City Pittsburgh	State PA	Zip Code 15217-1171	Transaction ID : 2018083119135-25 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]									
Full Name of Individual (Last, First, Mido	lle Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 640 E Carlisle Ave			M M / D D / Y									
City Whitefish Bay	State WI	Zip Code 53217-4832	Transaction ID : 2018081619136-522 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		55.00									
Name of Employer (for Individual) NML		upation (for Individual) - Ips	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 880.00	1									
SUBTOTAL of Receipts This Page (option	al)		471.00									
TOTAL This Period (last page this line nu	mber only)											

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

FOR LINE NUMBER:

(check only one)

PAGE 72 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		11b		11c	12	
Any information copied from such Reports an or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life										
✓ Full Name of Individual (Last, First, Middle A. Mitchell, Christian, , , Mailing Address 640 E Carlisle Ave City Whitefish Bay FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	State WI C Occ Svp	Drganization Name Zip Code 53217-4832 upation (for Individual) o - lps Year-to-Date ▼ 880.00		mount	/ acti of	ion ID	1 : 2(Rec		2018 1619135-5 nis Period 55.	21
Full Name of Individual (Last, First, Middle B. Molloy, Karen, A, , Mailing Address 2004 N 85th St City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	e Initial) or Full C		Date of Receipt							
Full Name of Individual (Last, First, Middle Molloy, Karen, A, , Mailing Address 2004 N 85th St City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	State WI C Occ Vp	Drganization Name Zip Code 53226-2846 upation (for Individual) Treasurer Year-to-Date ▼ 656.00		mount	/ acti of	ion ID	1) : 2(Rec	018090	2018 2619135-7 ais Period 41.	18
SUBTOTAL of Receipts This Page (optional)	, 	r		-		9 			137.	00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 73 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 □					
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
ight angle The Northwestern Mutual Life	Insurance	Company Federal PA	С					
Full Name of Individual (Last, First, Middle Morris, Scott, J, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4406 N MADERO DR			M M / D D / Y Y Y Y 08 15 2018					
City MEQUON	State WI	Zip Code 53092	Transaction ID : 2018081619136-874 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		15.00					
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec -Tax/Hr	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	1					
Full Name of Individual (Last, First, Middle B. Morris, Scott, J, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4406 N MADERO DR			08 31 2018					
City MEQUON	State WI	Zip Code 53092	Transaction ID : 2018090619135-873 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		15.00					
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec -Tax/Hr	Memo Item					
Receipt For:	Aggregate	Year-to-Date ▼						
Other (specify) ▼		240.00	1					
Full Name of Individual (Last, First, Middle C. Mulroy, Timothy, Michael, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 20 Indian Pipe			08 15 2018					
City Dove Canyon	State CA	Zip Code 92679-4206	Transaction ID : 2018081519174-66 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		125.00					
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2000.00]					
SUBTOTAL of Receipts This Page (optional)			155.00					
TOTAL This Period (last page this line numb	er only)							

SCHEDULE A (FEC Form 3X) _____ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 74 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
I LIVILED RECEIPIO		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mid A. Mulroy, Timothy, Michael, ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 20 Indian Pipe			M M / D D / Y Y Y Y 08 31 2018						
City Dove Canyon	State CA	Zip Code 92679-4206	Transaction ID : 2018083119135-66 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		125.00						
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]						
Full Name of Individual (Last, First, Mide B. <u>Nelson, Timothy, , ,</u> <u>Mailing Address 3518 17th St</u>	dle Initial) or Full O	rganization Name	Date of Receipt						
City	State WI	Zip Code	08 31 2018 Transaction ID : 2018090619135-706						
Kenosha FEC ID number of contributing federal political committee.	C	53144-3339	Amount of Each Receipt this Period						
Name of Employer (for Individual) NML		upation (for Individual) Distribution Performance	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.00]						
Full Name of Individual (Last, First, Mide C. Newman, Jeremy, D, ,	dle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1140 Lone Tree Rd			08 15 2018						
City Elm Grove	State WI	Zip Code 53122-2019	Transaction ID : 2018081619136-900 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		32.00						
Name of Employer (for Individual) NML		upation (for Individual) Distribution Finance	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 536.00]						
SUBTOTAL of Receipts This Page (option	' nal)		170.00						
TOTAL This Period (last page this line nu	mber only)								

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 75 OF

ידו			Use separate schedule(s)) (c	(check only one)						
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 13	11b	11c	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the	purpose	of soliciting	contribut	ions		
$\overline{)}$	NAME OF COMMITTEE (In Full)										
	The Northwestern Mutual Life Ins	surance	Company Federal F	PAC							
A.	Full Name of Individual (Last, First, Middle Initia Newman, Jeremy, D, ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 1140 Lone Tree Rd				08	/ D 3	D / Y	y y 2018	Y		
	City Elm Grove	State WI	_) : 2018090		99			
			53122-2019		Amount	of Each	Receipt th	is Period			
	FEC ID number of contributing federal political committee.	С			Ľ.			32.0	00		
	Name of Employer (for Individual) NML		upation (for Individual) Distribution Finance		Me	emo Item	I				
	Receipt For:	Aggregate	Year-to-Date V								
	Other (specify) ▼		536.00								
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	Drganization Name								
Β.	Noll, Sherry, L, ,	-	-		Date of	Receipt					
	Mailing Address 8329 Gittings Rd			M M 08	/ D	D / Y	2018	Y			
	City Mount Pleasant	State WI	Zip Code 53406-2113		Transaction ID : 20180				78		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) NML	Occupation (for Individual) Dir Insurable Risk Mgmt Aggregate Year-to-Date ▼			Me	emo Item					
	Receipt For:										
	Primary General Other (specify) ▼		208.00								
— С.	Full Name of Individual (Last, First, Middle Initia O Connell, Kevin, , ,	l) or Full O	Organization Name		Date of	Receipt					
	Mailing Address 4807 W Woodmere Rd			08 15 2018							
	City	State FL	Zip Code) : 2018081		5		
			33609-3632		Amount	of Each	Receipt th	is Period			
	FEC ID number of contributing federal political committee.	С			Ľ.	, <u> </u>		208.0	00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		M	emo Item	1				
	Receipt For: Primary General Other (apparit)	Aggregate	Year-to-Date ▼ 3328.00	-							
_	Other (specify)		7 7 7								
s	UBTOTAL of Receipts This Page (optional)			🕨			9	253.0	0		
т	OTAL This Period (last page this line number or	nly)		🕨							

SCHEDULE A (FEC Form 3X) DEOFIDTO

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 76 OF

		Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports and or for commercial purposes, other than using t	Statements mand a	I ay not be sold or used by any p ddress of any political committe	13 14 15 16 erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
	Incurance	Company Fodoral DA	6							
The Northwestern Mutual Life	Insurance	Company rederal PA	6							
Full Name of Individual (Last, First, Middle A. O Connell, Kevin, , ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4807 W Woodmere Rd			08 31 2018							
City Tampa	State FL	Zip Code 33609-3632	Transaction ID : 2018083119135-65 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]							
Full Name of Individual (Last, First, Middle B. Oberland, Gregory, C, ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4514 N Lake Dr			08 15 2018							
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID : 2018081619136-494 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) NML		upation (for Individual) sident	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]							
Full Name of Individual (Last, First, Middle C. Oberland, Gregory, C, ,	Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 4514 N Lake Dr			08 31 2018							
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID : 2018090619135-493 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) NML		upation (for Individual) sident	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]							
SUBTOTAL of Receipts This Page (optional).			624.00							
TOTAL This Period (last page this line number	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 77 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other than using			person for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Middle Otto, Timothy, A, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 14255 Tulane St			M M / D D / Y Y Y Y 08 15 2018							
City Brookfield	State WI	Zip Code 53005-4170	Transaction ID : 2018081619136-541 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		15.00							
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Ins	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00]							
Full Name of Individual (Last, First, Middle B. Otto, Timothy, A, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 14255 Tulane St			08 31 2018 Transaction ID : 2018090619135-540 Amount of Each Receipt this Period							
City Brookfield	State WI	Zip Code 53005-4170								
FEC ID number of contributing federal political committee.	С		15.00							
Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Ins	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00]							
Full Name of Individual (Last, First, Middle Avenue 1997 , 2007). Pavlick, Randy, M, ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address N38W28908 Middlefield Ro			08 / D D / Y Y Y Y 2018							
City Pewaukee	State WI	Zip Code 53072-3154	Transaction ID : 2018081619136-465 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		20.00							
Name of Employer (for Individual) NML		upation (for Individual) /anaged Investmens Compl	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 320.00]							
SUBTOTAL of Receipts This Page (optional).			50.00							
TOTAL This Period (last page this line numb	er only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 78 OF

ITEMIZED RECEIPTS		Use separate schedule(s)		(check only one)									
			for each category of the Detailed Summary Page	X 11a	a	11b 14	11c 15	12 16	17				
	ny information copied from such Reports and St for commercial purposes, other than using the						soliciting						
$\left[\right]$	NAME OF COMMITTEE (In Full)		_	_									
	The Northwestern Mutual Life In	surance	Company Federal PAC	C									
Α.	Full Name of Individual (Last, First, Middle Initi Pavlick, Randy, M, ,	ial) or Full O	rganization Name	Date	of B	eceipt							
Λ.	Mailing Address N38W28908 Middlefield Rd				М	/ D D 31	/ Y	2018	Y				
	City	State	Zip Code				2018090	619135-4	164				
	Pewaukee	WI	53072-3154	Amo	unt o	f Each R	eceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С						20.	00				
	Name of Employer (for Individual)	Occi	upation (for Individual)		Mem	o Item							
	NML		Vanaged Investmens Compl										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		320.00										
В.	Full Name of Individual (Last, First, Middle Initi Pickering, William, C, ,	ial) or Full O	rganization Name	Date	of R	eceipt							
	Mailing Address 1823 N 81st St			M	М	/ D D D 15	/ Y	2018	Y				
	City	State	Zip Code		08 15 2018 Transaction ID : 2018081619136-850								
	Wauwatosa	WI	53213-2146					nis Period					
	FEC ID number of contributing federal political committee.	С		С		-		15.	00				
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Intl Pro		Mem	o Item							
	Receipt For:	Aggregate Year-to-Date ▼											
	Primary General Other (specify) ▼		, 240.00										
— С.	Full Name of Individual (Last, First, Middle Initi Pickering, William, C, ,	ial) or Full O	rganization Name	Date	of R	eceipt							
	Mailing Address 1823 N 81st St			0	М	, 	/ Y	2018	Y				
	City Wauwatosa	State WI	Zip Code 53213-2146		Transaction ID : 2018090619135-849								
			33213-2140	Amo	unt o	f Each R	eceipt th	nis Period					
	FEC ID number of contributing federal political committee.	С			_		y	15.	00				
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Intl Pro		Mem	io Item							
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Other (specify)		240.00										
F	UBTOTAL of Receipts This Page (optional)		· ·	F	- 1	5	5	50.	00				
1'	OTAL This Period (last page this line number of	лпу)	••••••					1 1 4					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 79 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	g the name and a	ddress of any political committe	person for the purpose of soliciting contributions te to solicit contributions from such committee.							
Full Name of Individual (Last, First, Midd Pierz, Michele, E, , Mailing Address 9719 N Lamplighter Ln	le Initial) or Full O	rganization Name	Date of Receipt							
City Mequon	State WI	Zip Code 53092-5322	08 15 2018 Transaction ID : 2018081619136-453 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	SR	upation (for Individual) Dir Fld Mrktg Eng&Intg Year-to-Date ▼ 320.00	Memo Item							
Full Name of Individual (Last, First, Midd Pierz, Michele, E, , Mailing Address 9719 N Lamplighter Ln	le Initial) or Full O	rganization Name	Date of Receipt							
City Mequon	State WI	Zip Code 53092-5322	Transaction ID : 2018090619135-452 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		20.00							
Name of Employer (for Individual) NML		upation (for Individual) Dir Fld Mrktg Eng&Intg	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00]							
Full Name of Individual (Last, First, Midd C. Pizzuti, Dante, P, ,	le Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 74 Fairway Rdg	State	Zip Code	08 / 15 / 2018 Transaction ID : 2018081519174-39							
Avon	CT	06001-2263	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		42.00							
Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify)	Gen	upation (for Individual) eral Insurance Agent Year-to-Date ▼ 252.00	Memo Item							
SUBTOTAL of Receipts This Page (optional			82.00							
TOTAL This Period (last page this line num	nber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 80 OF

171			Use separate schedule(s)			(check only one)						
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		r	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	g contr	ributic	ons	
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	С								
A.	Full Name of Individual (Last, First, Middle Initia Pizzuti, Dante, P, ,	ll) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 74 Fairway Rdg				08	/	31) / Y	y 201	Y Y 8	1	
	City Avon	State CT	Zip Code 06001-2263					2018083 Receipt th				
	FEC ID number of contributing federal political committee.	С								42.00)	
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00									
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Plocher, Matthew, J,,				Date of	Re	ceipt					
	Mailing Address 4324 Chevy Chase Dr					08 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City La Canada	State CA	Zip Code 91011-3203	Transaction ID : 2018081519174-35 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			Amount	U				08.00)	
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00									
с.	Full Name of Individual (Last, First, Middle Initia Plocher, Matthew, J, ,	ll) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 4324 Chevy Chase Dr				08 ^M	/	31		2018			
	City La Canada	State CA	Zip Code 91011-3203		Transaction ID : 2018083119135-35 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	. ,	2	08.00)	
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent			M	emc	tem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00									
s	UBTOTAL of Receipts This Page (optional)		•••••				, .	. ,	4	58.00		
т	OTAL This Period (last page this line number or	וy)		-			-	1.41		-		

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3X) Use separate schedu for each category of	
	Detailed Summary P	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance Company Feder	ral PAC
Full Name of Individual (Last, First, Mid Porter, Rebecca, L, ,	dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 4800 Stratford Dr	State Zip Code	08 / 15 / 2018 Transaction ID : 2018081619136-467
Greendale	WI 53129-2017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.00
Name of Employer (for Individual) NML	Occupation (for Individual) Vp Corp Strat	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 121	6.00
Full Name of Individual (Last, First, Mid Porter, Rebecca, L, ,	Idle Initial) or Full Organization Name	Date of Receipt
Mailing Address 4800 Stratford Dr		08 31 2018
City Greendale	State Zip Code WI 53129-2017	Transaction ID : 2018090619135-466 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.00
Name of Employer (for Individual) NML	Occupation (for Individual) Vp Corp Strat	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	121	6.00
Full Name of Individual (Last, First, Mic Pruett, Charles, R, ,	(dle Initial) or Full Organization Name	Date of Receipt
Mailing Address 1019 Stonewall Dr		08 15 2018
City Nashville	StateZip CodeTN37220-1022	Transaction ID : 2018081519174-37 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 332	8.00
SUBTOTAL of Receipts This Page (option	nal)	
TOTAL This Period (last page this line n	umber only)	······

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 82 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
The Northwestern Mutual Life	Insurance	Company Federal PA	C						
Full Name of Individual (Last, First, Middle A. Pruett, Charles, R, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1019 Stonewall Dr									
		Ι	08 31 2018						
City Nashville	State TN	Zip Code 37220-1022	Transaction ID : 2018083119135-37						
	_	37220 1022	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		208.00						
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item						
Self-Employed Receipt For:		eral Insurance Agent							
Primary General	Aggregate	Year-to-Date V							
Other (specify) V		3328.00							
			-						
Full Name of Individual (Last, First, Middle B. Rabenn, Thomas, O, ,	Date of Receipt								
Mailing Address 1511 W Aster Woods Ct			08 31 2018						
City	State	Zip Code	Transaction ID : 2018090619135-843						
Mequon	WI	53092-2992	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		13.00						
Name of Employer (for Individual) NML		upation (for Individual) ector	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		, 208.00]						
Full Name of Individual (Last, First, Middle C. Radke, Steven, M, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 111 W Ravine Ct			08 15 2018						
City Thiensville	State WI	Zip Code 53092-5861	Transaction ID : 2018081619136-669						
		53092-5661	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		108.00						
Name of Employer (for Individual) NML		upation (for Individual) Govt Relations	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼							
Other (specify)		1123.00]						
SUBTOTAL of Receipts This Page (optional)			329.00						
TOTAL This Period (last page this line numb									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 83 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may not be sold or used by any p name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance Company Federal PA	С
Full Name of Individual (Last, First, Middle Initia A. Radke, Steven, M, , Mailing Address 111 W Ravine Ct City Thiensville FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code WI 53092-5861 C Occupation (for Individual) Vp Govt Relations Vp Govt Relations Aggregate Year-to-Date ▼ 1123.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initia B. Ralph, Randal, W, , Mailing Address 9945 N Valley Hill Dr City Mequon FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	al) or Full Organization Name State Zip Code WI 53092-5350 C Occupation (for Individual) Managing Director Aggregate Year-to-Date ▼	Date of Receipt 08 15 2018 Transaction ID : 2018081619136-868 Amount of Each Receipt this Period 15.00 15.00 Memo Item
Full Name of Individual (Last, First, Middle Initia C. Ralph, Randal, W, , Mailing Address 9945 N Valley Hill Dr City Mequon FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	al) or Full Organization Name State Zip Code WI 53092-5350 C Occupation (for Individual) Managing Director Aggregate Year-to-Date ▼ 228.00 228.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		138.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 84 OF

171			Use separate schedule(s)		(check only one)							
111			for each category of the Detailed Summary Page		′ 11a 13		11b	11c 15	12	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the	purp	ose of :	soliciting	contribut	tions		
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С								
A.	Full Name of Individual (Last, First, Middle Initi Reeter, Jeff, D, ,	al) or Full O	rganization Name		Date of	Rec	ceipt					
	Mailing Address 7 Williamsburg Ln				м м 08	/	D D D 15	/ Y	2018	Y		
	City Houston	State TX	Zip Code 77024-5144						519174-5 is Period	1		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		130.0	00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00]								
в.	Full Name of Individual (Last, First, Middle Initi Reeter, Jeff, D, ,	al) or Full O	rganization Name		Date of	Rec	ceipt					
	Mailing Address 7 Williamsburg Ln				08 / D D / Y Y Y Y Y 2018							
	City Houston	State TX	Zip Code 77024-5144	Transaction ID : 2018083119135-51 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C				130.00						
	Name of Employer (for Individual) Self-Employed		upation (for Individual) leral Insurance Agent		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2080.00]								
C.	Full Name of Individual (Last, First, Middle Initi Remstad, David, R, ,	al) or Full O	rganization Name		Date of	Rec	ceipt					
	Mailing Address 2634 N Lake Dr				м м 08	/	D D D 15	/ Y	2018	Y		
	City Milwaukee	StateZip CodeaukeeWI53211-3837							619136-6 is Period	20		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	, <u>,</u>	117.0	00		
	Name of Employer (for Individual) NML	Occupation (for Individual) Svp & Chief Actuary				emo	Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1872.00]								
s	UBTOTAL of Receipts This Page (optional)			•			,	, ,	377.0	00		
т	OTAL This Period (last page this line number o	nly)		•			y~	- 48-				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 85 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
	the name and a	ddress of any political committe	e to solicit contributions from such committee.						
Full Name of Individual (Last, First, Middle Remstad, David, R, , Mailing Address 2634 N Lake Dr	Initial) or Full O	rganization Name	Date of Receipt						
Maining Address 2634 N Lake Dr			08 31 2018						
City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID : 2018090619135-619 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		117.00						
Name of Employer (for Individual) NML		upation (for Individual) & Chief Actuary	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1872.00	1						
Full Name of Individual (Last, First, Middle Reynolds, Courtney, K , , Mailing Address 2221 E Newberry Blvd	Initial) or Full O	rganization Name	Date of Receipt						
City Milwaukee	State WI	Zip Code 53211-3746	Transaction ID : 2018081619136-459 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С								
Name of Employer (for Individual) NML		upation (for Individual) Comm & Corp Affairs	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00]						
Full Name of Individual (Last, First, Middle C. Reynolds, Courtney, K, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2221 E Newberry Blvd			08 / D D / Y Y Y Y Y 08 31 2018						
City Milwaukee	State WI	Zip Code 53211-3746	Transaction ID : 2018090619135-458 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		20.00						
Name of Employer (for Individual) NML		upation (for Individual) Comm & Corp Affairs	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 320.00]						
SUBTOTAL of Receipts This Page (optional))		157.00						
TOTAL This Period (last page this line numb	per 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 86 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page		11a		11b	11c	12			
Any information copied from such Rep	orts and Statements ma	av not be sold or used by any ne		13 r the r		14	15 soliciting	16 a contribu	17 tions	
or for commercial purposes, other than										
			`							
The Northwestern Mutua	ai Life Insurance	Company Federal PAC	ز 							
Full Name of Individual (Last, First, Rhoades, Adam, T, ,	Middle Initial) or Full C	rganization Name	D;	Date of Receipt						
Mailing Address 2038 Rosemont PI				м м 08	/	D D 15	/ Y	2018	Y	
City	State	Zip Code	Transaction ID : 2018081519174-41							
Vestavia	AL	35243-1767	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C							208.	00	
Name of Employer (for Individual)		upation (for Individual)	10	Me	emo	Item				
Self-Employed Receipt For:		eral Insurance Agent	_							
Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼										
Full Name of Individual (Last, First, B. Rhoades, Adam, T, ,										
Mailing Address 2038 Rosemont PI				08 31 2018						
City	State	Zip Code		Transa	acti	on ID : 2	2018083	119135-4	1	
Vestavia	AL	35243-1767						nis Period		
FEC ID number of contributing federal political committee.	s a l							208.	00	
Name of Employer (for Individual) Self-Employed										
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify)		3328.00								
Full Name of Individual (Last, First, Richardson, Peter, K, ,	Middle Initial) or Full C	rganization Name	Di	ate of	Re	ceipt				
Mailing Address 720 E Green Tree				м м 08	/	D D D 15	/ Y	2018	Y	
City	State	Zip Code		Trans	acti	ion ID : 2	201808	1619136-4	37	
Fox Point	WI	53217-3615	Ar	mount	of	Each Re	eceipt th	nis Period		
FEC ID number of contributing federal political committee.	C					,	y	20.	00	
Name of Employer (for Individual) NML						tem				
Receipt For:	I		_							
Primary General	Aggregate	Aggregate Year-to-Date ▼								
Other (specify)	330.00									
SUBTOTAL of Receipts This Page (c	ptional)					, .		436.	00	
TOTAL This Period (last page this lin	e number only)	••••••	Ē				-			

FOR LINE NUMBER:

PAGE 87 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(cneck only one) X 11a 11b 11c 12 13 14 15 16 17				
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements ma	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	С				
Α.	Full Name of Individual (Last, First, Middle In Richardson, Peter, K, , Mailing Address 720 E Green Tree Rd	itial) or Full C	Organization Name	Date of Receipt				
	City	State	Zip Code	08 31 2018				
	Fox Point	WI	53217-3615	Transaction ID : 2018090619135-436 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		30.00				
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Ipas	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00]				
B	Full Name of Individual (Last, First, Middle In Richardson, Wesley, H, ,	itial) or Full C	Organization Name	Date of Receipt				
υ.	Mailing Address 1 Open Gate Whitaker Hil	08 15 2018						
	City	State	Zip Code	Transaction ID : 2018081519174-69				
	Huntington	WV	25701	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		125.00				
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]				
С.	Full Name of Individual (Last, First, Middle In Richardson, Wesley, H, ,	itial) or Full C	Organization Name	Date of Receipt				
	Mailing Address 1 Open Gate Whitaker Hil			M M / D D / Y Y Y Y Y 08 31 2018				
	City Huntington	State WV	Zip Code 25701	Transaction ID : 2018083119135-69 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item				
	Receipt For: Primary General Other (specify)	rimary General Aggregate real-to-Date V						
s	SUBTOTAL of Receipts This Page (optional)			280.00				
т	OTAL This Period (last page this line number	only)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 88 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a 11b 11c 12					
or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	he name and a	ddress of any political committe						
The Northwestern Mutual Life	Insurance	Company Federal PA	C					
Full Name of Individual (Last, First, Middle A. Rivers, J, Daniel, ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3601 River Ridge Cv			08 / Y Y Y Y 08 15 2018					
City Prospect	State KY	Zip Code 40059-8038	Transaction ID : 2018081519174-11 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů – L							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]					
Full Name of Individual (Last, First, Middle B. Rivers, J, Daniel, ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3601 River Ridge Cv			08 / D D / Y Y Y Y 2018					
City Prospect	State KY	Zip Code 40059-8038	Transaction ID : 2018083119135-11 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	FEC ID number of contributing							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]					
Full Name of Individual (Last, First, Middle Rodenhuis, Bethany, M, ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 3900 N Lake Dr	0	Zin Onde	08 / D D / Y Y Y Y Y 15 / 2018					
City Shorewood	State WI	Zip Code 53211-2448	Transaction ID : 2018081619136-524 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		150.00					
Name of Employer (for Individual) NML		upation (for Individual) & Chief Transformation Off	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2400.00]					
SUBTOTAL of Receipts This Page (optional).			566.00					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 89 OF

	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
			person for the purpose of soliciting contributions be to solicit contributions from such committee.						
The Northwestern Mutual Life	Insurance	Company Federal PA	C						
Full Name of Individual (Last, First, Middle A . Rodenhuis, Bethany, M, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 3900 N Lake Dr			08 31 2018						
City Shorewood	State WI	Zip Code 53211-2448	Transaction ID : 2018090619135-523 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		150.00						
Name of Employer (for Individual) NML		upation (for Individual) & Chief Transformation Off	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2400.00]						
Full Name of Individual (Last, First, Middle Roou, Tammy, M, , Mailing Address N99W14710 Amber Dr	Initial) or Full O	rganization Name	Date of Receipt						
City Germantown	State WI	Zip Code 53022-6611	08 15 2018 Transaction ID : 2018081619136-664 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С	75.00							
Name of Employer (for Individual) NML		upation (for Individual) & Chief Risk Officer	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1020.00]						
Full Name of Individual (Last, First, Middle C. Roou, Tammy, M, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address N99W14710 Amber Dr			08 / D D / Y Y Y Y 2018						
City Germantown	State WI	Zip Code 53022-6611	Transaction ID : 2018090619135-663 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
Name of Employer (for Individual) NML		upation (for Individual) Chief Risk Officer	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1020.00	1						
SUBTOTAL of Receipts This Page (optional).			300.00						
TOTAL This Period (last page this line numb	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 90 OF

171			Use separate schedule(s)	(check only one)								
			for each category of the Detailed Summary Page		1 1a		11b	11c	12	47		
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	Itements ma	y not be sold or used by any p ddress of any political committee	erson e to so	for the plicit cor	purp ntrib	14 bose of utions	15 f soliciting from sucl	16 g contribut h committ	17 ions ee.		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
Α.	Full Name of Individual (Last, First, Middle Initia Ruhl, John, H, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt					
	Mailing Address 10 Skyfield Dr				м м 08	/	D 15		2018	Y		
	City Princeton	State NJ	Zip Code 08540-7403	_			-		519174-5 nis Period	8		
	FEC ID number of contributing federal political committee.	С							42.0	00		
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00									
B.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ruhl, John, H, , Mailing Address 10 Skyfield Dr					Re /	ceipt	D / Y	YY	Y		
	City	State Zip Code NJ 08540-7403					08 31 2018 Transaction ID : 2018083119135-58 Amount of Each Receipt this Period					
	Princeton FEC ID number of contributing federal political committee.	NJ 08540-7403				of	Each F	Receipt th	is Period 42.0	00		
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	1								
с.	Full Name of Individual (Last, First, Middle Initia Russo, Matt, , ,	al) or Full O	rganization Name		Date of	Re	ceipt					
	Mailing Address 139 Deep Valley Rd				м м 08	/	D 15		2018 ^Y	Y		
	City New Canaan	State CT	Zip Code 06840-2804						519174-4 his Period	3		
	FEC ID number of contributing federal political committee.	С			Ľ.		,	7	208.0	00		
	Name of Employer (for Individual) Self-Employed Receipt For:	Occupation (for Individual) General Insurance Agent				emo	ltem					
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00	1								
	UBTOTAL of Receipts This Page (optional)			• •			,	. ,	292.0	00		
Т	OTAL This Period (last page this line number or	nly)	••••••	•			_		1 1 40			

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 91 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
I LIVILLU RECEILIO		for each category of the Detailed Summary Page	X 11		11b 14	11c	12	17	
Any information copied from such Reports or for commercial purposes, other than us			erson for t	he pu	irpose o	of soliciting	g contribut	tions	
NAME OF COMMITTEE (In Full)									
angle The Northwestern Mutual L	life Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Mic A. Russo, Matt, , ,	ldle Initial) or Full O	rganization Name	Date	e of F	Receipt				
Mailing Address 139 Deep Valley Rd				M 8	/ D 31		2018	Y	
City New Canaan	State CT					: 2018083 Receipt th		3	
FEC ID number of contributing federal political committee.	С				4		208.0	00	
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]						
Full Name of Individual (Last, First, Mic B. Salchert, Julie, L, ,	Idle Initial) or Full O	rganization Name	Date	e of F	Receipt				
Mailing Address 367 Tanager Dr				8	/ 15		2018	Y	
City Grafton	State WI	Zip Code 53024-1764				: 2018081 Receipt th		60	
FEC ID number of contributing federal political committee.	С			-		17.(00		
Name of Employer (for Individual) NML		Occupation (for Individual) Dir Sales Promo & Integration			no Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 272.00]						
Full Name of Individual (Last, First, Mic C. Salchert, Julie, L, ,	Idle Initial) or Full O	rganization Name	Date	e of F	Receipt				
Mailing Address 367 Tanager Dr				™ 8	/ D 3/		2018	Y	
City Grafton	State WI	Zip Code 53024-1764	Transaction ID : 2018090619135-559 Amount of Each Receipt this Period					59	
FEC ID number of contributing federal political committee.	С				,		17.0	00	
Name of Employer (for Individual) NML	Occu Dir S		Mem	no Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 272.00]						
SUBTOTAL of Receipts This Page (optio	' nal)				, ,		242.0	00	
TOTAL This Period (last page this line no	umber only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 92 OF

171			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	× 11a 13		1c	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			rson for the pu	irpose of soli	citing c	ontributi	ons		
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
	The Northwestern Mutual Life Ins	surance	Company Federal PAC							
A.	Full Name of Individual (Last, First, Middle Initia Sarnecki, R, Philip, ,	l) or Full O	Drganization Name	Date of F	Receipt					
	Mailing Address 18240 Melrose Dr			М М 08	/ D D / 15		2018	Y		
	City	State KS	Zip Code 66013-9081		tion ID : 201			_		
	Bucyrus		00013-9081	Amount o	f Each Rece	ipt this	Period			
	FEC ID number of contributing federal political committee.	С					100.0	0		
	Name of Employer (for Individual)	Осси	cupation (for Individual)	Merr	no Item					
	Self-Employed	Gen	neral Insurance Agent	_						
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify) ▼		1600.00							
в.	Full Name of Individual (Last, First, Middle Initia Sarnecki, R, Philip, ,	l) or Full O	Drganization Name	Date of F	Receipt					
	Mailing Address 18240 Melrose Dr			08	/ D D / 31		018	Y		
	City	State	Zip Code	Transaction ID : 2018083119135-21						
	Bucyrus	KS	66013-9081	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		100.00						
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent	Mem	no Item					
	Receipt For:	Aggregate	Year-to-Date V	_						
	Primary General Other (specify) ▼		, , 1600.00							
С.	Full Name of Individual (Last, First, Middle Initia Schaefer, Timothy, G, ,	l) or Full O	Drganization Name	Date of F	Receipt					
	Mailing Address 1013 E Lexington Blvd			08	/ D D / 15		2018	Y		
	City Whitefish Bay	State WI	Zip Code 53217-5381		ction ID : 201 f Each Rece			98		
	FEC ID number of contributing federal political committee.			,	,	208.0	0			
	Name of Employer (for Individual) NML		cupation (for Individual) Olient And Dig Exp	Men	no Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00							
s	UBTOTAL of Receipts This Page (optional)				,	, .	408.0	0		
т	OTAL This Period (last page this line number or	ıly)	••••••							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 93 OF

17			Use separate schedule(s)			(check only one)						
11	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c 15	12	ſ	17	
	y information copied from such Reports and St for commercial purposes, other than using the				for the		oose of	soliciting	g contr	ributio	ons	
	NAME OF COMMITTEE (In Full)			_								
$ \rangle$	The Northwestern Mutual Life In	surance	Company Federal PA	С								
<u>к</u>	Full Name of Individual (Last, First, Middle Initi Schaefer, Timothy, G, ,	ial) or Full O	Organization Name		Date of	Re	ceipt					
	Mailing Address 1013 E Lexington Blvd				08 31 2018							
	City	State	Zip Code		Trans	acti	on ID :	2018090	61913	85-69	7	
	Whitefish Bay	WI	53217-5381	_	Amount	of	Each R	eceipt th	is Per	riod		
	FEC ID number of contributing federal political committee.	С							2	208.00)	
	Name of Employer (for Individual) NML		upation (for Individual) O Client And Dig Exp		M	emo	Item					
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify) ▼		3328.00	11								
				11								
	Full Name of Individual (Last, First, Middle Initi Schattschneider, Cal, D, ,	ial) or Full O	Organization Name		Data of		agint					
в.	Mailing Address 5940 Stefanie Way				Date of	Re			V	Y Y	_	
	Walling Address 5940 Stelanie Way				08	<i>'</i>	15	/ 1	2018			
	City	State	Zip Code		Trans	acti	on ID :	2018081	61913	6-852	2	
	Caledonia	WI	_	Amount	of	Each R	eceipt th	is Per	riod			
	FEC ID number of contributing federal political committee.	С					35.00					
	Name of Employer (for Individual) NML		upation (for Individual) Campus Planning&Ops		M	emo	Item					
	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		, 548.00	1								
_	Full Name of Individual (Last, First, Middle Initi Schattschneider, Cal, D, ,	ial) or Full O	Organization Name		Date of	Bo	coint					
0.	Mailing Address 5940 Stefanie Way					110		/ Y	Y	Y		
					08		31	L	2018	-		
	City Caledonia	State WI	Zip Code 53108-9563				-	2018090			1	
		_		_	Amount	: of	Each R	eceipt th	iis Per	riod	_	
	FEC ID number of contributing federal political committee.	С			<u>L</u> .	_	y	y		35.00)	
	Name of Employer (for Individual) NML		upation (for Individual) Campus Planning&Ops									
	Receipt For: Aggregate Year-to-Date ▼											
	Other (specify)											
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	2	78.00		
Т	OTAL This Period (last page this line number of	only)		•						-		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 94 OF

171			Use separate schedule(s)	(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full)									
\rangle	The Northwestern Mutual Life Ins	urance	Company Federal PAC	2						
Α.	Full Name of Individual (Last, First, Middle Initia Schenkel, Christopher, J, ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 27085 Saddlerock PI			08 15 / Y Y Y Y Y 2018						
	City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018081519174-62 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.00						
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00							
			-ga							
	Full Name of Individual (Last, First, Middle Initia Schenkel, Christopher, J, ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address 27085 Saddlerock PI	1	08 31 / Y Y Y Y 2018							
	City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018083119135-62 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		42.00						
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent	Memo Item						
	Receipt For:	Aggregate	Year-to-Date V							
	Other (specify) ▼		672,00							
C.	Full Name of Individual (Last, First, Middle Initia Schickert, Sherri, L, ,	l) or Full O	Organization Name	Date of Receipt						
	Mailing Address W147N9815 Emerald Ln			08 / D D / Y Y Y Y Y 08 15 2018						
	City Germantown	State WI	Zip Code 53022-6620	Transaction ID : 2018081619136-688						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) NML		upation (for Individual) Proj/Bus Imp Serv	Memo Item						
Receipt For: Aggregate Primary General Other (specify)			Year-to-Date ▼ 352.00							
s	UBTOTAL of Receipts This Page (optional)			106.00						
-	OTAL This Period (last page this line number or		•							

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 95 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PAC	2
Full Name of Individual (Last, First, Middle In Schickert, Sherri, L, , Mailing Address W147N9815 Emerald Ln City Germantown FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	State WI C Occ Dir Aggregate	Zip Code 53022-6620 upation (for Individual) Proj/Bus Imp Serv Year-to-Date ▼ 352.00	Date of Receipt 08 31 2018 Transaction ID : 2018090619135-687 Amount of Each Receipt this Period 22.00 Memo Item
Full Name of Individual (Last, First, Middle In Schlifske, John, E, , Mailing Address 1500 Greenway Ter City Elm Grove FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	State WI C Occ Cha	Zip Code 53122-1611 Supation (for Individual) airman & Ceo Year-to-Date ▼ 3328.00	Date of Receipt
Full Name of Individual (Last, First, Middle In C. Schlifske, John, E, , Mailing Address 1500 Greenway Ter City Elm Grove FEC ID number of contributing federal political committee. Name of Employer (for Individual) NML Receipt For: Primary General Other (specify)	State WI C Occ Cha	Drganization Name Zip Code 53122-1611 upation (for Individual) iirman & Ceo Year-to-Date ▼ 3328.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		· ·	438.00

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 96 OF

			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1						
or	y information copied from such Reports and Stater for commercial purposes, other than using the name	ments may ne and ad	not be sold or used by any podress of any political committee	erson for the purpose of soliciting contributions						
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance (Company Federal PA	2						
۹.	Schmidt, Calvin, R, ,									
	Mailing Address W205 Allen Rd	State	Zip Code	08 15 2018						
	-	WI	53066-9048	Transaction ID : 2018081619136-647						
	FEQ ID number of contribution	C		Amount of Each Receipt this Period						
	Name of Employer (for Individual) NML		pation (for Individual) Product Services	Memo Item						
	Receipt For: Ag Primary General Other (specify) ▼									
	Full Name of Individual (Last, First, Middle Initial) Schmidt, Calvin, R, ,	or Full Org	ganization Name	Date of Receipt						
	Mailing Address W205 Allen Rd			M / D D / Y						
	,	State	Zip Code	Transaction ID : 2018090619135-646						
	Oconomowoc	WI	53066-9048	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		105.00						
	Name of Employer (for Individual) NML		pation (for Individual) Product Services	Memo Item						
	Receipt For: Age Primary General Other (specify) ▼	ggregate Y	/ear-to-Date ▼ 1680.00							
	Full Name of Individual (Last, First, Middle Initial) Schneider, Rodd, , ,	or Full Org	ganization Name	Date of Receipt						
	Mailing Address 1415 E Fairy Chasm Rd # R			08 / D D / Y Y Y Y 2018						
	City Bayside	State WI	Zip Code 53217-1433	Transaction ID : 2018081619136-445 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		50.00						
	Name of Employer (for Individual) MML		pation (for Individual) tig & Dist Counsel	Memo Item						
	Receipt For: Ag Primary General Other (specify)	ggregate Y	/ear-to-Date ▼ 752.00							
SI	UBTOTAL of Receipts This Page (optional)		······	260.00						
т	OTAL This Period (last page this line number only))								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 97 OF

	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than u			13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Mi A. Schneider, Rodd, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 1415 E Fairy Chasm F # R	Rd		08 31 2018
City Bayside	State WI	Zip Code 53217-1433	Transaction ID : 2018090619135-444 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) NML		upation (for Individual) .itig & Dist Counsel	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 752.00]
Full Name of Individual (Last, First, Mi B. Schneider, Sarah, R, ,	ddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4380 N Wildwood Ave			08 / D D / Y Y Y Y 2018
City Shorewood	State WI	Zip Code 53211-1436	Transaction ID : 2018081619136-632 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		97.00
Name of Employer (for Individual) NML		upation (for Individual) New Business	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1552.00]
Full Name of Individual (Last, First, Mi C. Schneider, Sarah, R, ,	iddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 4380 N Wildwood Ave			08 / D D / Y Y Y Y 2018
City Shorewood	State WI	Zip Code 53211-1436	Transaction ID : 2018090619135-631 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		97.00
Name of Employer (for Individual) NML		upation (for Individual) New Business	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1552.00]
SUBTOTAL of Receipts This Page (optic	onal)		244.00
TOTAL This Period (last page this line r	number only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 98 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check on	y one)	L		
I EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	× 11a 13	11b	11c 15	12 16	17
Any information copied from such or for commercial purposes, othe			erson for the	purpose of	soliciting	contributi	ions
		Company Federal PA	^				
The Northwestern M		Company rederar PA	0				
Full Name of Individual (Last, Schott, Sarah, E, ,	First, Middle Initial) or Full O	rganization Name	Date o	f Receipt			
Mailing Address 5712 N Kent	Ave		08	/ D D 15	/ Y	2018	Y
City Whitefish Bay	State WI	Zip Code 53217-4724		saction ID : t of Each R)6
FEC ID number of contributing federal political committee.	C					50.0	0
Name of Employer (for Individ NML	,	ipation (for Individual) Compliance/Bp	M	emo Item			
Receipt For: Primary Genera Other (specify) ▼		Year-to-Date ▼ 800.00]				
Full Name of Individual (Last, B. Schott, Sarah, E, ,	First, Middle Initial) or Full O	rganization Name	Date o	f Receipt			
Mailing Address 5712 N Kent			08	/ D D 31	/ Y	y y 2018	Y
City Whitefish Bay	State	Zip Code 53217-4724		action ID : 2 t of Each R)5
FEC ID number of contributing federal political committee.						50.0)0
Name of Employer (for Individ NML	,	upation (for Individual) Compliance/Bp	M	emo Item			
Receipt For:		Year-to-Date 🔻					
Primary Genera Other (specify) ▼		, 800.00]				
Full Name of Individual (Last, Schultz, Deborah, A, ,		rganization Name	Date o	f Receipt			
Mailing Address 1219 S WAT	ERVILLE LA		08	/ D D 15	/ Y	2018	Y
City OCONOMOWOC	State WI	Zip Code 53066		saction ID : t of Each R			38
FEC ID number of contributing federal political committee.	C			. , .	. ,	50.0	0
Name of Employer (for Individ NML	,	ipation (for Individual) inancial Management		lemo Item			
Receipt For: Primary Genera Other (specify)		Year-to-Date ▼ 816.00]				
SUBTOTAL of Receipts This Pa	ge (optional)				,	150.0	0
TOTAL This Period (last page the	nis 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 99 OF

TEMIZED RECEIPTS		Detailed Summary Page	×	11a		11b	11c	12					
Any information copied from such Reports a	nd Statomanta m	av not be cold or used by cry		13		14	15	16	17				
or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)	_		_										
angle The Northwestern Mutual Life	e Insurance	Company Federal PA	C										
Full Name of Individual (Last, First, Middle Schultz, Deborah, A, ,	e Initial) or Full C	Organization Name		Date of	Re	ceipt							
Mailing Address 1219 S WATERVILLE LA				м м 08	/	D D D 31	/ Y	ү ү 2018	Y				
City	State	Zip Code		Trans	acti	ion ID :	2018090	619135-7	′ 3 7				
OCONOMOWOC	WI	53066	A	mount	of	Each R	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	С							50.	00				
Name of Employer (for Individual) NML		upation (for Individual) Financial Management		Me	emo	Item							
Receipt For:		Year-to-Date V											
Primary General	Aggregate		- 1										
Other (specify) V		816.00											
Full Name of Individual (Last, First, Middle 3. Seiden, Adam, D, ,	e Initial) or Full C	Organization Name		Date of	Re	ceipt							
Mailing Address 44 Sunset Rd				м м 08	/	D D 15	/ Y	у у 2018	Y				
City	State	Zip Code		Transaction ID : 2018081519174-56									
Darien	СТ	06820-3527						nis Period	-				
FEC ID number of contributing federal political committee.	С					-		208.	00				
Name of Employer (for Individual) Self-Employed		supation (for Individual) neral Insurance Agent		Me	emo	Item							
Receipt For:	Aggregate	Year-to-Date V											
Primary General Other (specify) ▼		, 3328.00]										
Full Name of Individual (Last, First, Middle S. Seiden, Adam, D, ,	e Initial) or Full C	Organization Name		Date of	Re	ceipt							
Mailing Address 44 Sunset Rd				M M 08	/	31	/ Y	2018	Y				
City	State	Zip Code		Trans	acti	ion ID :	2018083	3119135-5	56				
Darien	СТ	06820-3527	A	mount	of	Each R	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	C					, . ,	. ,	208.	00				
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		M	emo	tem							
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General													
Other (specify)		3328.00											
SUBTOTAL of Receipts This Page (optiona	l)					, .		466.	00				
TOTAL This Period (last page this line num	ber only)					-	1 45						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 100 OF

				r each category of the etailed Summary Page	×	-	1a		-	1b		_	1c		12	<u> </u>
	y information copied from such Reports and Statement for commercial purposes, other than using the name a						the p		ро				citing	cont		
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurar															
Α.	Full Name of Individual (Last, First, Middle Initial) or F Seitzinger, Brad, P, , Mailing Address 920 Pine Needle Trl	ull Org	gani	zation Name			te of	Re	ece							
	City State	e		Zip Code	41		08	acti	in	1	15 1 • 2	2015	80815	201		
	Oakland Twp MI			48306-1034	A				-				pt this			·
	FEC ID number of contributing federal political committee.								,				-		208.0	0
	Name of Employer (for Individual) Self-Employed Receipt For:			on (for Individual) Insurance Agent			Me	emo	b l	tem	1					
	Primary General Other (specify) ▼	gate Ye	'ear	-to-Date ▼ 3328.00												
В.	Full Name of Individual (Last, First, Middle Initial) or F Seitzinger, Brad, P, ,	ull Org	gani	zation Name		Dat	te of	Re	ece	əipt						
	Mailing Address 920 Pine Needle Trl						м 08	/	l		^р 31	/	Y	y 201		Y
	City State Oakland Twp MI	e		Zip Code 48306-1034									30831 pt thi			
	FEC ID number of contributing federal political committee.								,				- j -	2	208.0	0
	Name of Employer (for Individual) Self-Employed	· ·		on (for Individual) Insurance Agent			Me	emo	o l'	terr	1					
	Receipt For: Aggre Primary General Other (specify) ▼	egate Ye	′ear	-to-Date ▼ 3328.00												
с.	Full Name of Individual (Last, First, Middle Initial) or F Simbro, David, W, ,	ull Org	gani	zation Name		Dat	te of	Re	ece	eipt						
	Mailing Address 311 E Erie St Unit 4						08	/	l		15	/	L	ү 201	8	
	City State Milwaukee WI	е		Zip Code 53202-6040					-			-	80816 pt thi			7
	FEC ID number of contributing federal political committee.						ount		L.	acri			р с сп.		85.0	0
	Name of Employer (for Individual) NML	· ·		on (for Individual) Annuity & Prod Sol			Me	emo	o I	lterr	I					
	Receipt For: Aggre Primary General Other (specify)	gate Ye	′ear	-to-Date 1360.00												
s	UBTOTAL of Receipts This Page (optional)			•					,				,	Ę	501.0	0
т	OTAL This Period (last page this line number only)			••••••					-				-		-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 101 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
IILIVIILED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 11
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lit	fe Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Midd Simbro, David, W, ,	le Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 311 E Erie St Unit 4			08 31 2018
City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID : 2018090619135-876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer (for Individual) NML		upation (for Individual) Life, Annuity & Prod Sol	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1360.00]
Full Name of Individual (Last, First, Midd B. Smith, Walter, N, ,	le Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 860 W Blackhawk St			08 / D D / Y Y Y Y Y 2018
City Chicago	State	Zip Code 60642-2510	Transaction ID : 2018081619136-898 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer (for Individual) NML		upation (for Individual) jional Director	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.00]
Full Name of Individual (Last, First, Midd C. Smith, Walter, N, ,	le Initial) or Full C	rganization Name	Date of Receipt
Mailing Address 860 W Blackhawk St			08 / D D / Y Y Y Y Y 08 31 2018
City Chicago	State IL	Zip Code 60642-2510	Transaction ID : 2018090619135-897 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		17.00
Name of Employer (for Individual) NML		upation (for Individual) ional Director	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 416.00	1
SUBTOTAL of Receipts This Page (optional	al)		119.00
TOTAL This Period (last page this line nur	nber 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 102 OF

			Detailed Summary Page		×	11a		11b		11c	12	
	y information copied from such Reports and Stat											
	for commercial purposes, other than using the na											
\backslash	NAME OF COMMITTEE (In Full)		• - ·	-								
$\overline{)}$	The Northwestern Mutual Life Ins			PAC								
Α.	Full Name of Individual (Last, First, Middle Initial Sperka, Steve, P, ,) or Full O	rganization Name			ate of	Re	ceip	ot			
	Mailing Address S67W17735 Copper Oaks Ct					м м 08	1	D	15	/ Y	ү ү 2018	Y
	City	State	Zip Code			Trans	acti	on l	D : 2	018081	619136-6	51
	Muskego	WI	53150-7503		_ A	mount	of	Eac	h Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С						7		-	94.	00
	Name of Employer (for Individual) NML		upation (for Individual) Field Rewards		1	Me	emo	Iter	m			
		Aggregate	Year-to-Date ▼		1							
	Primary General Other (specify) ▼		1504.00									
	Full Name of Individual (Last, First, Middle Initial Sperka, Steve, P, ,) or Full O	rganization Name			ate of	Re	ceip	ot			
	Mailing Address S67W17735 Copper Oaks Ct] [м м 08	1		31	/ Y	y y 2018	Y
	City	State	Zip Code			Transa	acti	on I	D:2	018090	619135-6	50
	Muskego	WI	53150-7503		A	mount	of	Eac	h Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С				_		7		-	94.	00
	Name of Employer (for Individual) NML		upation (for Individual) Field Rewards			Me	emo	Iter	m			
	Receipt For:	Aggregate	Year-to-Date ▼		1							
	Primary General Other (specify) ▼		, 1504.00									
	Full Name of Individual (Last, First, Middle Initial Stanley, Tony, , ,) or Full O	rganization Name			ate of	Re	ceip	ot			
	Mailing Address 3914 White Stone Rd					м м 08	1	D	15	/ Y	ү 2018	Y
	City	State	Zip Code			Trans	acti	ion I	ID : 2	018081	519174-6	4
	Newtown Sq	PA	19073-1095		A	mount	of	Eac	h Re	ceipt th	is Period	
	FEC ID number of contributing federal political committee.	С				_		9		y	42.	00
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent			Me	emo	lter	m			
	Receipt For:	Aggregate	Year-to-Date ▼		7							
	Primary General		070.00									
	Other (specify)	L	672.00									
S	UBTOTAL of Receipts This Page (optional)			►	[7		9	230.	00
т	OTAL This Period (last page this line number on	ly)		►				,		-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 103 OF

IT.			(cheo	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17	
	y information copied from such Reports and St for commercial purposes, other than using the				r the		pose of	soliciting	g cont	tributi	ons	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С								
Α.	Full Name of Individual (Last, First, Middle Initi Stanley, Tony, , ,	al) or Full O	rganization Name	D	ate o	f Re	eceipt					
	Mailing Address 3914 White Stone Rd				08 ^M	/	D 31	D / Y	۲ 20	18 18	Y	
	City Newtown Sq	State PA	Zip Code 19073-1095					2018083 Receipt th				
	FEC ID number of contributing federal political committee.	С								42.0	0	
	Name of Employer (for Individual) Self-Employed		upation (for Individual) Ieral Insurance Agent		М	emo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 672.00	1								
в.	Full Name of Individual (Last, First, Middle Initi Steigman, Jason, , , Mailing Address 2301 E Newton Ave	al) or Full O	rganization Name	_	ate o M M M	f Re	eceipt		201	Ŷ	Y	
	City Shorewood	State WI	Zip Code 53211-2617		Trans		ion ID :	2018081	6191	36-50	7	
	FEC ID number of contributing federal political committee.	C	33211-2017		noun			Receipt th	nis Pe	23.0	0	
	Name of Employer (for Individual) NML		upation (for Individual) naging Dire Pub Bond	1	М	emo	ttem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 332.00]								
С.	Full Name of Individual (Last, First, Middle Initi Steigman, Jason, , ,	al) or Full O	rganization Name	D	ate o	f Re	eceipt					
	Mailing Address 2301 E Newton Ave				08		D 31		201	8		
	City Shorewood	State WI	Zip Code 53211-2617					: 2018090 Receipt th			96	
	FEC ID number of contributing federal political committee.	С		ļļ	-		y .			23.0	0	
	Name of Employer (for Individual) NML Receipt For:	Man	upation (for Individual) aging Dire Pub Bond		M	emo	o Item					
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 332.00]								
⊢	UBTOTAL of Receipts This Page (optional)						, .	· · ·		88.00	0	

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 104 OF

ITEMIZED RECEIPTS		Use separate schedule(s)				/ or	ıe)			
11			for each category of the Detailed Summary Page		11a 13		11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		oose of	soliciting	g contribu	utions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С						
A.	Full Name of Individual (Last, First, Middle Initi Stone, Stephen, R, ,	al) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 2511 N 95th St				м м 08	/	15	О / Ү	2018	Y
	City Wauwatosa	State WI	Zip Code 53226-1749					2018081 Receipt th		
	FEC ID number of contributing federal political committee.	С							28	.00
	Name of Employer (for Individual) NML		ipation (for Individual) Interprise Risk Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 448.00]						
B.	Full Name of Individual (Last, First, Middle Initi Stone, Stephen, R, , Mailing Address 2511 N 95th St	al) or Full O	rganization Name		Date of	Re	ceipt) / Y	YYY	Y
	City Wauwatosa	State WI	Zip Code 53226-1749		08 Trans		31 on ID :	2018090 Receipt th	2018 619135-	560
	FEC ID number of contributing federal political committee.	С				U				.00
	Name of Employer (for Individual) NML		upation (for Individual) Enterprise Risk Mgmt		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 448.00]						
с.	Full Name of Individual (Last, First, Middle Initi Striano, Peter, F, , III	al) or Full O	rganization Name		Date of	Re	ceipt			
	Mailing Address 11050 NW 78th PI				08	1	15		2018	Y
	City Parkland	State FL	Zip Code 33076-4723					201808 1 Receipt th		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1		208	.00
	Name of Employer (for Individual) Self-Employed		pation (for Individual) eral Insurance Agent		M	emc	ltem			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]						
	UBTOTAL of Receipts This Page (optional)		•	• -			y	. ,	264	.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 105 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)
ILEIVIIZED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Mid A. Striano, Peter, F, , III	ddle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 11050 NW 78th Pl			08 31 Y Y Y Y Y
City Parkland	State FL	Zip Code 33076-4723	Transaction ID : 2018083119135-38 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		208.00
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]
Full Name of Individual (Last, First, Mid B. Stribling, Steven, J, ,		rganization Name	Date of Receipt
Mailing Address 11830 W Whitaker Ave			08 / D D / Y Y Y Y Y 2018
City Greenfield	State WI	Zip Code 53228-2455	Transaction ID : 2018081619136-887 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Name of Employer (for Individual) NML		upation (for Individual) Product Development	Memo Item
Receipt For: Primary General	Aggregate	Year-to-Date V	-
Other (specify) ▼		620.00	
Full Name of Individual (Last, First, Mid C. Stribling, Steven, J, ,		rganization Name	Date of Receipt
Mailing Address 11830 W Whitaker Ave			08 / D D / Y Y Y Y 2018
City Greenfield	State WI	Zip Code 53228-2455	Transaction ID : 2018090619135-886 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Name of Employer (for Individual) NML		upation (for Individual) Product Development	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 620.00]
SUBTOTAL of Receipts This Page (optic	nal)		278.00
TOTAL This Period (last page this line n	umber only)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 106 OF

	-	Use separate schedule(s)	(check only one)
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
			person for the purpose of soliciting contributions see to solicit contributions from such committee.
The Northwestern Mutual Life	Insurance	Company Federal PA	νC
Full Name of Individual (Last, First, Middle Stugelmeyer, Brenda, J, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 6970 W Fox Haven Ct			08 15 / Y Y Y Y
City Franklin	State WI	Zip Code 53132-7402	Transaction ID : 2018081619136-718 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		43.00
Name of Employer (for Individual) NML		upation (for Individual) & Real Estate Counsel	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 724.00	
Full Name of Individual (Last, First, Middle Stugelmeyer, Brenda, J, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 6970 W Fox Haven Ct	State	Zip Code	08 / D D / Y Y Y Y 2018
Franklin	WI	53132-7402	Transaction ID : 2018090619135-717 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		43.00
Name of Employer (for Individual) NML		upation (for Individual) & Real Estate Counsel	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 724.00]
Full Name of Individual (Last, First, Middle C. Swain, Christopher, P, ,	Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 10927 N Wyngate Trce			08 / D D / Y Y Y Y 2018
City Mequon	State WI	Zip Code 53092-5862	Transaction ID : 2018081619136-675 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.00
Name of Employer (for Individual) NML		upation (for Individual) Public Investments	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 608.00]
SUBTOTAL of Receipts This Page (optional).			124.00
TOTAL This Period (last page this line numb	er only)		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 107 OF

11	EMIZED RECEIPTS			ach category of the iled Summary Page		11a 13		11b 14	11c	12	17
	y information copied from such Reports and SI for commercial purposes, other than using the								solicitin	g contrib	utions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Com	oany Federal PAC	2						
Α.	Full Name of Individual (Last, First, Middle Init Swain, Christopher, P, ,	ial) or Full C	Organizat	ion Name		Date c	of Re	eceipt			
	Mailing Address 10927 N Wyngate Trce					08	/	D 31	D / Y	2018	Y
	City Mequon	State WI	· · ·	Code 3092-5862	_					0619135- his Period	
	FEC ID number of contributing federal political committee.	С						-		38	.00
	Name of Employer (for Individual) NML		•	(for Individual) vestments		N	lemo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-	Date ▼ 608.00							
В.	Full Name of Individual (Last, First, Middle Init Swoboda, Benjamin, E, ,	ial) or Full C	Organizat	ion Name		Date c	of Re	eceipt			
	Mailing Address 5227 N Hollywood Ave					M N 08	/	D 15		2018	Y
	City Whitefish Bay	State WI	· · ·	Code 3217-5322	_					1 619136- his Period	
	FEC ID number of contributing federal political committee.	С				<u> </u>			-	19	.00
	Name of Employer (for Individual) NML		•	(for Individual) st Sec/Secℜ		N	lemo	tem			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-	Date ▼ 304.00							
с.	Full Name of Individual (Last, First, Middle Init Swoboda, Benjamin, E, ,	ial) or Full C	Organizat	ion Name		Date c	of Re	eceipt			
	Mailing Address 5227 N Hollywood Ave					^M 08	/	D 31		2018	Y
	City Whitefish Bay	State WI	· · ·	Code 3217-5322	_					0619135- his Period	
	FEC ID number of contributing federal political committee.	С				<u> </u>		y .	, ,	19	.00
	Name of Employer (for Individual) NML		•	(for Individual) st Sec/Secℜ		N	lemc	o Item			
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-	Date ▼ 304.00							
s	UBTOTAL of Receipts This Page (optional)			•	_			, . 	5	76	.00
Т	OTAL This Period (last page this line number of	only)		····· •		L		-	-		

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 108 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)									
			for each category of the Detailed Summary Page		× 11a 13		11b 14	11c 15	12	r	17		
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose of	soliciting	g contr	ibutic	ons		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С									
A.	Talajkowski, Thomas, , ,					Date of Receipt							
	Mailing Address 4119 N Prospect Ave					M M / D D / Y							
	City Shorewood	State WI	Zip Code 53211-1741					2018081 eceipt th			5		
	FEC ID number of contributing federal political committee.	C					-			48.00)		
	Name of Employer (for Individual)	Оссі Аvр		М	emo	o Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 648.00	648.00									
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Talajkowski, Thomas, , ,					f Re	eceipt						
	Mailing Address 4119 N Prospect Ave					1	31	/ Y	2018	ү ү 3			
	City Shorewood	State WI	Zip Code 53211-1741		Transaction ID : 2018090619135-704 Amount of Each Receipt this Period					1			
	FEC ID number of contributing federal political committee.	С				48.00							
	Name of Employer (for Individual) NML	Employer (for Individual) Occupation (for Individual) Avp Tax And Tax Policy					Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 648.00											
C.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tews, Michael, F, ,					f Re	eceipt						
	Mailing Address 609 S 249th Cir					/	D D 15	/ Y	2018		1		
	City Waterloo	State NE	Zip Code 68069-4432					2018081 eceipt th			_		
	FEC ID number of contributing federal political committee.	С			125.00)			
	Name of Employer (for Individual) Self-Employed Receipt For:	yed General Insurance Agent					o Item						
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 2000.00											
F	UBTOTAL of Receipts This Page (optional)			▶ _	Ľ.	-	y :	9	22	21.00			
11	OTAL This Period (last page this line number of	July)	••••••	•	la de la companya de	1.	-	-		- 10	- Contra 1		

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 109 OF

		for each category of the Detailed Summary Page	×	11a] 11k	b	11c	12						
			, ,		13		14		15	16	17				
	y information copied from such Reports and State for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance	Company Federal PAC	;											
۹.	Full Name of Individual (Last, First, Middle Initial) Tews, Michael, F, ,	or Full O	Organization Name	Date of Receipt											
	Mailing Address 609 S 249th Cir			08 / D D / Y Y Y Y 08 31 2018											
	City Waterloo	State NE	Zip Code 68069-4432	Transaction ID : 2018083119135-7 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.			mount	OT	Eac	ch Re	ceipt tr	125.	00					
	Name of Employer (for Individual) Self-Employed		Me	emo) Ite	em									
	Receipt For: A Primary General Other (specify) ▼	Year-to-Date ▼ 2000.00													
В.	Full Name of Individual (Last, First, Middle Initial) Theodore, Scott, P, ,	or Full O	Organization Name	D	ate of	Re	eceip	pt							
	Mailing Address 12505 Ventana Mesa Cir		м м 08	/	D	15	/ Y	y y 2018	Y						
	City Castle Pines				-			519174-1 nis Period	8						
	FEC ID number of contributing federal political committee.	С					-		-gr.	208.	00				
	Name of Employer (for Individual) Self-Employed		cupation (for Individual) neral Insurance Agent	Memo Item											
	Receipt For: A Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 3328.00												
<u> </u>	Full Name of Individual (Last, First, Middle Initial) Theodore, Scott, P, ,	or Full O	Organization Name	D	ate of	Re	eceip	pt							
	Mailing Address 12505 Ventana Mesa Cir				08 ^M	/	D	31	/ Y	2018	Y				
	City Castle Pines	State CO	Zip Code 80108-9148	A						3119135- 1 nis Period	8				
	FEC ID number of contributing federal political committee.	С		ļ		_	y		y	208.	00				
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	o Ite	em							
	Receipt For: A Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00												
s	JBTOTAL of Receipts This Page (optional)						7		,	541.	00				
Т	OTAL This Period (last page this line number only	/)	•••••				-								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 110 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
11	TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b	11c 15		2 6	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson f e to so	for the	purj ntrib	pose of	soliciting	g conti	ributio	ons
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	С							
Α.	Full Name of Individual (Last, First, Middle Initi Timmer, Douglas, D, ,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 13525 N Laurel Ln				08	1	D D D 15	/ Y	y 201	8 8	
	City Mequon	State WI	Zip Code 53097-2427					2018081 eceipt th			3
	FEC ID number of contributing federal political committee.								15.00)	
	Name of Employer (for Individual)	upation (for Individual) Gn Cnl & Ast Sec/Secr		M	emc	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00								
в.	Full Name of Individual (Last, First, Middle Init Timmer, Douglas, D, , Mailing Address 13525 N Laurel Ln	ial) or Full O	rganization Name		Date of	F Re	eceipt	/ Y	Ý	Y Y	
	City	State	Zip Code		08 Trans	acti	31 on ID :	2018090	2018 61913		2
	Mequon	WI	53097-2427		Amount	t of	Each R	eceipt th	is Pei	riod	
	FEC ID number of contributing federal political committee.	С						1 - AP		15.00)
	Name of Employer (for Individual) NML		upation (for Individual) Gn CnI & Ast Sec/Secr		M	emc	ltem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00								
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Tronco, Alex, J, ,	ial) or Full O	rganization Name		Date of	Re	eceipt				
	Mailing Address 11 Stoneridge Dr				08	1	D D 15	/ Y	201		
	City Loudonville	State NY	Zip Code 12211-2625					2018081 leceipt th			
	FEC ID number of contributing federal political committee.	С			_:		, .	, y	2	208.00)
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent		М	emo	ttem				
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2498.00								
⊢	UBTOTAL of Receipts This Page (optional)		, , , , , , , , , , , , , , , , , , ,	·			y	, , , , , , , , , , , , , , , , , , ,	2	38.00	

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

FOR LINE NUMBER:

(check only one)

PAGE 111 OF

ITEMIZED RECEIPTS				for each category of the Detailed Summary Page			a		-	1b 4		11c	F	12 16	1	
or for co	ormation copied from such Reports and State						the		ро	se		oliciti		contrib	utions	
\ \	e OF COMMITTEE (In Full) Northwestern Mutual Life Insu	irance	Сс	ompany Federal PAC	2											
A. Tro	Name of Individual (Last, First, Middle Initial) nco, Alex, J, , ng Address 11 Stoneridge Dr	rgar	nization Name		Date of Receipt											
City		State		Zip Code	-)8 ans	acti	io	_	31) : 2	0180	-	2018 I 9135 -	48	
Loud	donville	NY		12211-2625	A	٩mc	ount	of	Ea	ach	Re	ceipt	this	Perio	d	
	ID number of contributing al political committee.						,			-1		208	3.00			
Self-I	e of Employer (for Individual) Employed ipt For:	ion (for Individual) Insurance Agent			Me	emo	o l'	tem	I							
	Primary General Other (specify) ▼															
	Name of Individual (Last, First, Middle Initial) st, Chris, G, ,	or Full O	rgar	nization Name		Date	e of	Re	ece	eipt						
Mailir	08 / D D / Y Y Y Y 2018															
City Shor	ewood	Zip Code 53211-1825										9136- Perio				
	ID number of contributing al political committee.			40.00							.00					
Nam NML	e of Employer (for Individual)	Occu Vp A		tion (for Individual) ary			Me	emo	o l'	tem	I					
Rece	ipt For: Primary General Other (specify) ▼	aggregate	Yea	r-to-Date ▼ 652.00												
	Name of Individual (Last, First, Middle Initial) Dist, Chris, G, ,	or Full O	rgar	nization Name		Date	e of	Re	ece	eipt						
Mailir	ng Address 1218 E Olive St)8	/	l	D 3	в В1	1		y y 2018	Y	
City Sho	rewood	State WI		Zip Code 53211-1825					-					19135- Perio		
	ID number of contributing al political committee.	С							,			,	_		0.00	
NML		Осси Vp А	•	ion (for Individual) ary			Me	emc	o I	tem	1					
	ipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 652.00												
SUBTO	DTAL of Receipts This Page (optional)			•					,			_,		288	.00	
TOTAL	. This Period (last page this line number only	/)		••••••								.,				

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

FOR LINE NUMBER:

(check only one)

PAGE 112 OF

			Detailed Summary Page	×	_		11b	11c	12	<u> </u>			
۸n	y information copied from such Reports and Sta	atomonte m	A not be sold or used by any n	arson	13 for the		14	15 soliciting	16 a contribu	17 17			
	for commercial purposes, other than using the												
$\overline{)}$	NAME OF COMMITTEE (In Full)												
$\Big\rangle$	The Northwestern Mutual Life In	surance	Company Federal PA	С									
Α.	Full Name of Individual (Last, First, Middle Initi Tucker, Leo, C, ,	al) or Full C	organization Name		Date o	f Re	eceipt						
	Mailing Address 605 Potomac River Rd				08 15 2018								
	City	State	Zip Code		Trans	sact	ion ID :	2018081	1519174-3	34			
	Mc Lean	22102-1402		Amoun	t of	Each R	leceipt th	nis Period					
	FEC ID number of contributing federal political committee.	ů (208.	00			
	Name of Employer (for Individual) Self-Employed		M	lemo	o Item								
	Receipt For:												
	Primary General Other (specify) ▼	1											
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Date of Receipt												
	Mailing Address 605 Potomac River Rd		08 / D D / Y Y Y Y Y 2018										
	City	State	Zip Code		Trans	act	ion ID :	2018083	3119135-3	4			
	Mc Lean	VA	22102-1402		Amoun	t of	Each R	leceipt th	nis Period				
	FEC ID number of contributing federal political committee.	ů – – – – – – – – – – – – – – – – – – –						-	208.	00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Memo Item								
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		, 2498.00	1									
с.	Full Name of Individual (Last, First, Middle Initi Van Der Hyde, John, , ,	al) or Full C	Prganization Name		Date o	f Re	eceipt						
	Mailing Address 849 Sabot Hill Rd				08	/	D 15) / Y	2018	Y			
	City	State	Zip Code		Trans	sact	ion ID :	2018081	1519174-1	0			
	Manakin Sabot	VA	23103-3009		Amoun	t of	Each R	leceipt th	nis Period				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	9	208.	00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		M	lemo	o Item						
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify)		3328.00	1									
s	UBTOTAL of Receipts This Page (optional)			▶			, ,	, ,	624.	00			
T	OTAL This Period (last page this line number o	nly)		•									

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 113 OF 12 (check only one)							
		for each category of the Detailed Summary Page	$\overrightarrow{\mathbf{x}}$ 11a 11b 11c 12 13 14 15 16 17							
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life										
Full Name of Individual (Last, First, Middle A. Van Der Hyde, John, , ,	e Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 849 Sabot Hill Rd			M = M / D = D / Y = Y = Y = Y Y 08 31 2018 2018							
City Manakin Sabot	State VA	Zip Code 23103-3009	Transaction ID : 2018083119135-10 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]							
Full Name of Individual (Last, First, Middle B. Vandommelen, Deborah, , , md	e Initial) or Full C	Organization Name	Date of Receipt							
Mailing Address W66N679 Madison Ave			08 15 2018							
City Cedarburg	State WI	Zip Code 53012-1819	Transaction ID : 2018081619136-760 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.00							
Name of Employer (for Individual) NML		upation (for Individual) & Chief Medical Officer	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 532.00]							
Full Name of Individual (Last, First, Middle C. Vandommelen, Deborah, , , mo		Organization Name	Date of Receipt							
Mailing Address W66N679 Madison Ave			08 31 2018							
City Cedarburg	State WI	Zip Code 53012-1819	Transaction ID : 2018090619135-759 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		34.00							
Name of Employer (for Individual) NML		upation (for Individual) Chief Medical Officer	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 532.00]							
SUBTOTAL of Receipts This Page (optional)		276.00							
TOTAL This Period (last page this line num	ber only)									

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

FOR LINE NUMBER:

(check only one)

PAGE 114 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17											
or for commercial purposes, oth	er than using the name and a		erson for the purpose of soliciting contributions to solicit contributions from such committee.											
NAME OF COMMITTEE (In F The Northwestern M		Company Federal PA	2											
Full Name of Individual (Last A. Vedder, Andrew, T, , Mailing Address 4856 N Barti	, First, Middle Initial) or Full O	rganization Name	Date of Receipt											
City	State	Zip Code	08 15 2018 Transaction ID : 2018081619136-889											
Whitefish Bay	WI	53217-6016	_ Amount of Each Receipt this Period											
FEC ID number of contributin federal political committee.	C		32.00											
Name of Employer (for Individ NML	,	upation (for Individual) Solvency & Risk Mgmt	Memo Item											
Receipt For: Primary Gener Other (specify) ▼	ral Aggregate													
Full Name of Individual (Last B. Vedder, Andrew, T, ,	, First, Middle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 4856 N Bartl	ett Ave	08 / D D / Y Y Y Y 2018												
City Whitefish Bay	State WI	Zip Code 53217-6016	Transaction ID : 2018090619135-888 Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		32.00											
Name of Employer (for Indivi NML		upation (for Individual) Solvency & Risk Mgmt	Memo Item											
Receipt For: Primary Gener Other (specify) ▼		Year-to-Date ▼ 428.00												
Full Name of Individual (Last C. Warren, John, W, ,	, First, Middle Initial) or Full O	rganization Name	Date of Receipt											
Mailing Address 4201 N Murr	-		M M / D D / Y											
City Shorewood	State WI	Zip Code 53211-2013	Transaction ID : 2018081619136-797 Amount of Each Receipt this Period											
FEC ID number of contributin federal political committee.	C		18.00											
Name of Employer (for Individ NML	,	upation (for Individual) Gn Cnl & Ast Sec/Ins	Memo Item											
Receipt For: Primary Gener Other (specify)		Year-to-Date ▼ 288.00												
SUBTOTAL of Receipts This P	age (optional)		82.00											
TOTAL This Period (last page	this line number only)	••••••												

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 115 OF

ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)									
II EIVIIZED REGEIPIS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual	Life Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, M A. Warren, John, W, ,	/liddle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 4201 N Murray Ave			08 31 2018								
City Shorewood	State WI	Zip Code 53211-2013	Transaction ID : 2018090619135-796 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	s a l										
Name of Employer (for Individual)		upation (for Individual) Gn Cnl & Ast Sec/Ins	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.00]								
Full Name of Individual (Last, First, M B. Wassweiler, Andrew, T, ,	liddle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 6746 W River Terrac # D	e Dr	Zip Code	08 / D D / Y Y Y Y Y 2018								
City Franklin	WI	53132-8363	Transaction ID : 2018081619136-655 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		19.00								
Name of Employer (for Individual) NML		upation (for Individual) ng Dir High Yield	Memo Item								
Receipt For:	Aggregate	Year-to-Date V									
Other (specify) ▼		, 292.00									
Full Name of Individual (Last, First, M Wassweiler, Andrew, T, ,		organization Name	Date of Receipt								
Mailing Address 6746 W River Terrac # D			08 / D D / Y Y Y Y 08 31 2018								
City Franklin	State WI	Zip Code 53132-8363	Transaction ID : 2018090619135-654 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		19.00								
Name of Employer (for Individual) NML		upation (for Individual) ng Dir High Yield	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 292.00]								
SUBTOTAL of Receipts This Page (op	ional)		56.00								
TOTAL This Period (last page this line	number only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 116 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(cł	(check only one)									
			for each category of the Detailed Summary Page		X 11a 13	\vdash	11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the	purp	ose of	soliciting	contribu	tions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	٩C									
A.	Full Name of Individual (Last, First, Middle Initia Williams, Jeffrey, B, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address 2004 N 72nd St				08 15 2018								
	City Wauwatosa	State WI	Zip Code 53213-1828						619136-4 is Period	83			
	FEC ID number of contributing federal political committee.			<u> </u>		y	і - тр.	39.	00				
	Name of Employer (for Individual)	upation (for Individual) Nmis-Nmwmc Chief Compl Off		Me	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 660.00										
в.	Full Name of Individual (Last, First, Middle Initia Williams, Jeffrey, B, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address 2004 N 72nd St		08	/	D D 31	/ Y	y y 2018	Y					
	City Wauwatosa	State WI	Zip Code 53213-1828	-					619135-4 is Period	82			
	FEC ID number of contributing federal political committee.							39. ¹	00				
	Name of Employer (for Individual) NML		upation (for Individual) Nmis-Nmwmc Chief Compl Off		Me	emo	Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 660.00										
C.	Full Name of Individual (Last, First, Middle Initia Williams-Kemp, Kamilah, D, ,	al) or Full O	Organization Name		Date of	Red	ceipt						
	Mailing Address 8645 N Dean Cir				08 ^M	/	D D 15	/ Y	y y 2018	Y			
	City River Hills	State WI	Zip Code 53217-2038						619136-6 is Period	62			
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	y	. ,	80.	00			
	Name of Employer (for Individual)		upation (for Individual) Di & Ltc		M	emo	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1280.00										
s	UBTOTAL of Receipts This Page (optional)			•			,	.,	158.	00			
т	OTAL This Period (last page this line number o	nly)		•			,	-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 117 OF

		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Middle Williams-Kemp, Kamilah, D, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 8645 N Dean Cir			M M / D D / Y								
City River Hills	State WI	Zip Code 53217-2038	Transaction ID : 2018090619135-661 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		80.00								
Name of Employer (for Individual) NML		upation (for Individual) Di & Ltc	Memo Item								
Receipt For: Primary General Other (specify) ▼]										
Full Name of Individual (Last, First, Middle Worrell, Richard, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2423 Beretania Cir	Otata	Zin Oodo	08 / D D / Y Y Y Y 2018								
City Charlotte	State NC	Zip Code 28211-3631	Transaction ID : 2018081519174-47 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	FEC ID number of contributing										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3328.00]								
Full Name of Individual (Last, First, Middle C. Worrell, Richard, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2423 Beretania Cir			08 / D D / Y Y Y Y 2018								
City Charlotte	State NC	Zip Code 28211-3631	Transaction ID : 2018083119135-47 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 3328.00]								
SUBTOTAL of Receipts This Page (optional))		496.00								
TOTAL This Period (last page this line numb	per only)										

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

FOR LINE NUMBER:

(check only one)

PAGE 118 OF

TEWIZED RECEIF 13		Detailed Summary Page	×	11a		11b		11c	12	
				13		14		15	16	17
Any information copied from such Reports or for commercial purposes, other than usin										
NAME OF COMMITTEE (In Full)	· ·		~							
The Northwestern Mutual L	te Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Mide Wright, John, William, , II	dle Initial) or Full C	rganization Name		Date of	Re	eceipt				
Mailing Address 510 King Rd NW				м м 08	/	D 1	D 5	/ Y	2018	Y
City	State	Zip Code		Trans	acti	ion ID):2	018081	519174-2	23
Atlanta	GA	30342-4011	/	Amount	of	Each	Re	ceipt th	nis Period	
FEC ID number of contributing federal political committee.	C					- j -		-9	41.	67
Name of Employer (for Individual) Self-Employed	upation (for Individual) neral Insurance Agent		Me	emo	ltem	ı				
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	, iggi egate		11.							
Other (specify) ▼		666.72	4							
Full Name of Individual (Last, First, Mide B. Wright, John, William, , II	dle Initial) or Full C	rganization Name		Date of	Re	eceipt				
Mailing Address 510 King Rd NW		м м 08	1		D 31	/ Y	y y 2018	Y		
City	State	Zip Code		Trans	acti	ion ID):20	018083	119135-2	3
Atlanta	GA	30342-4011	/	Amount	of	Each	Re	ceipt th	nis Period	
FEC ID number of contributing federal political committee.					- y		-	41.	67	
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	ltem	1			
Receipt For:	Aggregate	Year-to-Date V								
Primary General Other (specify) ▼		666.72]							
Full Name of Individual (Last, First, Mide C. Yeazel, Brian, K, ,	dle Initial) or Full C	rganization Name		Date of	Re	eceipt				
Mailing Address N110W5390 W Highlan	d Dr			08	/		D 15	/ Y	2018	Y
City	State	Zip Code		Trans	acti	ion ID):2	018081	619136-5	583
Cedarburg	WI	53012-3604	/	Amount	of	Each	Re	ceipt th	nis Period	
FEC ID number of contributing federal political committee.	С					y		y	18.	00
Name of Employer (for Individual)		upation (for Individual)		M	emo	b Item	ı			
NML Receipt For:	I	aging Director								
Primary General	Aggregate	Year-to-Date ▼	_							
Other (specify)		288.00								
SUBTOTAL of Receipts This Page (option	al)		,						101.	34
TOTAL This Period (last page this line nu	mber only)	······	-			-		-		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

PAGE 119 OF

11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17									
	y information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	nsurance	Company Federal PAC										
A.	Full Name of Individual (Last, First, Middle Ini Yeazel, Brian, K, ,	tial) or Full C	Drganization Name	Date of Receipt									
	Mailing Address N110W5390 W Highland Dr			08 / D D / Y Y Y Y 08 31 2018									
	City Cedarburg	State WI	Zip Code 53012-3604	Transaction ID : 2018090619135-582 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		18.00									
	Name of Employer (for Individual) NML		supation (for Individual) naging Director	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.00										
в.	Full Name of Individual (Last, First, Middle Ini Young, Catherine, M, ,	tial) or Full C	Organization Name	Date of Receipt									
	Mailing Address 929 N ASTOR ST UNIT	State	Zip Code	08 / D D / Y Y Y Y 08 15 2018									
	MILWAUKEE	WI	53202	Transaction ID : 2018081619136-903 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		60.00									
	Name of Employer (for Individual) NML		cupation (for Individual) : Gn Cn & Ast Sec/Re	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 840.00										
с.	Full Name of Individual (Last, First, Middle Ini Young, Catherine, M, ,	tial) or Full C	Drganization Name	Date of Receipt									
		Mailing Address 929 N ASTOR ST UNIT											
	City MILWAUKEE	State WI	Zip Code 53202	Transaction ID : 2018090619135-902 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		60.00									
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cn & Ast Sec/Re	Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 840.00										
	UBTOTAL of Receipts This Page (optional)			138.00									
Т	OTAL This Period (last page this line number	only)	•••••••••••••••••••••••••••••••••••••••										

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

FOR LINE NUMBER:

(check only one)

PAGE 120 OF

		for each category of the Detailed Summary Page	X 11a 11b 11c 12										
or for commercial purposes, other than usin			13 14 15 16 17 erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PAC	>										
Full Name of Individual (Last, First, Mide A. Zach, T Scott, , , Mailing Address 6630 Country Creek Ln	dle Initial) or Full C	rganization Name	Date of Receipt										
City	State	Zip Code	08 15 2018 Transaction ID : 2018081519174-42										
Cedar Rapids FEC ID number of contributing	C	52403-7023	Amount of Each Receipt this Period										
federal political committee.		upation (for Individual)	Memo Item										
Self-Employed Receipt For: Primary General Other (specify) ▼		eral Insurance Agent Year-to-Date ▼ 2000.00											
Full Name of Individual (Last, First, Mide B. Zach, T Scott, , ,	dle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 6630 Country Creek Ln 	State	Zip Code	M M / D D / Y										
Cedar Rapids FEC ID number of contributing federal political committee.	C	52403-7023	Amount of Each Receipt this Period										
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00											
Full Name of Individual (Last, First, Mide C. Zale, Thomas, D, ,	dle Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 2818 E Menlo Blvd	State	Zip Code	08 / 15 / 2018										
Shorewood	WI	53211-2652	Transaction ID : 2018081619136-652 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		174.00										
Name of Employer (for Individual) NML Receipt For:	Vp F	upation (for Individual) Real Estate	Memo Item										
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2784.00											
SUBTOTAL of Receipts This Page (option	al)	•	424.00										
TOTAL This Period (last page this line nu	mber only)	••••••											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 121 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using			13 14 15 16 17 erson for the purpose of soliciting contributions from such committee									
NAME OF COMMITTEE (In Full)												
The Northwestern Mutual Life	Insurance	Company Federal PA	С									
Full Name of Individual (Last, First, Middle Zale, Thomas, D, ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 2818 E Menlo Blvd			08 / D D / Y Y Y Y 2018									
City Shorewood	State WI	Zip Code 53211-2652	Transaction ID : 2018090619135-651 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		174.00									
Name of Employer (for Individual) NML		upation (for Individual) Real Estate	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2784.00]									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
B. Zehner, Rick, T, ,			Date of Receipt									
Mailing Address 203 W Ravine Baye Rd 	iling Address 203 W Ravine Baye Rd											
Bayside	State WI	Zip Code 53217-1334	Transaction ID : 2018081619136-794 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		43.00									
Name of Employer (for Individual) NML		upation (for Individual) Research & Special Projects	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		700.00]									
Full Name of Individual (Last, First, Middle Zehner, Rick, T , ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 203 W Ravine Baye Rd			08 / D D / Y Y Y Y Y 08 31 2018									
City Bayside	State WI	Zip Code 53217-1334	Transaction ID : 2018090619135-793									
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 43.00									
Name of Employer (for Individual) NML		upation (for Individual) Research & Special Projects	Memo Item									
Receipt For: Primary General Other (specify)	1											
SUBTOTAL of Receipts This Page (optional).			260.00									
TOTAL This Period (last page this line numb	er only)		32101.34									

SC	CHEDULE B (FEC Form 3X)			FC	OR I		NUMBER: PAGE	122 OF 127										
IT	EMIZED DISBURSEMENTS	Use sepa for each		heck														
		Detailed \$	Detailed Summary Page				28b 28c 29	30b										
An or	y information copied from such Reports and State for commercial purposes, other than using the nat	ments may r me and addr	not be sold or use ress of any politica	ed by al com	any p nmitte	erson e to	n for the purpose of soliciting co solicit contributions from such co	ntributions ommittee.										
\backslash	NAME OF COMMITTEE (In Full)					<u> </u>												
V	The Northwestern Mutual Life Insu	arance Co	ompany Fed	eral	PA	C												
Α.	Full Name (Last, First, Middle Initial) US Bank		Date of Disbursement															
	Mailing Address 777 E.Wisconsin Ave.					_	FEC Identification Number											
	City Milwaukee	State WI	Zip Code 53202															
	Purpose of Disbursement Service Charge			0	001	1												
	Candidate Name				egory. ype		Transaction ID : 8B2B7C6 Amount of Each Disbursement	this Period										
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General					235.13										
	State: District:		<i>.,</i> .				Memo Item											
B.	Full Name (Last, First, Middle Initial)						Date of Disbursement											
	Mailing Address																	
		State	Zip Code				FEC Identification Number											
	Purpose of Disbursement			—		1	C Amount of Each Disbursement this Period											
	Candidate Name				egory. ype													
	Senate	ment For: Primary	General															
	State: District:	Other (spec	cify)				Memo Item											
C.	Full Name (Last, First, Middle Initial)						Date of Disbursement											
	Mailing Address							Y Y										
		State	Zip Code				FEC Identification Number	_										
	Purpose of Disbursement		С															
	Candidate Name		Amount of Each Disbursement this Peri															
	Office Sought: House Disbursement For: Senate Primary General																	
	State: District:	Other (spec	July) ▼				Memo Item											
s	UBTOTAL of Disbursements This Page (optional).					<u> </u>		235.13										
т	OTAL This Period (last page this line number only	/)				•	, , .	235.13										

	JLE B (FEC Form 3X) D DISBURSEMENTS	for each	arate schedule(s) category of the	FOR LINE (check only	-		
			Summary Page	210 28a	22 X 23 26 27 28b 28c 29 30b		
					on for the purpose of soliciting contributions solicit contributions from such committee.		
	F COMMITTEE (In Full)						
/	lorthwestern Mutual Life Insu	urance Co	ompany Fede	eral PAC			
	e (Last, First, Middle Initial) Century Majority Fund				Date of Disbursement		
	Address Post Office Box 20475				08 / D D / Y Y Y Y 2018		
City Atlanta		State GA	Zip Code 30325-0475		FEC Identification Number		
	of Disbursement		1	011	C C00361956		
Candidat			L	Category/	Transaction ID : EDEE6B61B7 Amount of Each Disbursement this Period		
21St C	Century Majority Fund	ment For: 2	2018	Туре	1000.00		
2	Senate	Primary	General				
State:	District:	Other (spec	cify) ▼ Contribution		Memo Item		
	e (Last, First, Middle Initial)				Date of Disbursement		
B. Ben C	Cardin For Senate, Inc.						
Mailing A	ddress P.O. Box 21093	08 15 2018					
City Catonsvi	lle	State MD	Zip Code 21228		FEC Identification Number		
Purpose 2018 Ge	of Disbursement eneral	011	C C00411587 Transaction ID : E6F434E4521				
Candidat			h	Category/	Amount of Each Disbursement this Period		
	n, Benjamin, L., ,	ement For: 2	2018	Туре	1000.00		
	X Senate	_	General				
State:	MD District:	Other (spec	cify)		Memo Item		
	e (Last, First, Middle Initial)				Date of Disbursement		
S. DIG SI	ky Opportunity PAC						
Mailing A	ddress PO Box 1618	08 02 2018					
City		State	Zip Code		FEC Identification Number		
Helena Purpose	of Disbursement	MT	59624		C C00542027		
2018 Co Candidat	ontribution e Name	Transaction ID : 5F5F8FA02E Amount of Each Disbursement this Period					
Big S	ky Opportunity PAC	Amount of Lach Disbursement this Period					
Office Sc			500.00				
	President	Primary Other (spec	General cify) ▼				
State:	District:		Contribution		Memo Item		
SUBTOTA	L of Disbursements This Page (optional).			······ •	2500.00		
TOTAL TH	is Period (last page this line number only	()					

	HEDULE B (FEC Form 3X)	Use sepa			E NUMBER: PAGE 124 OF 127								
	EMIZED DISBURSEMENTS	for each	for each category of the Detailed Summary Page			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
	v information copied from such Reports and State for commercial purposes, other than using the na												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	urance C	ompany Fec	deral	PAC								
A.	Full Name (Last, First, Middle Initial) George Holding For Congress Inc Mailing Address PO Box 97187	Date of Disbursement											
I	City Raleigh	State NC	Zip Code 27624			FEC Identification Number							
	Purpose of Disbursement 2018 General Candidate Name			01 Cato		C C00499236 Transaction ID : 584C3F693A8 Amount of Each Disburgement this Period							
į	Holding, George, E., , Office Sought: X House Disburse Senate President State: NC District: 02	ment For: 2 Primary Other (spec	X General	Cate Ty		Amount of Each Disbursement this Period							
B.	Full Name (Last, First, Middle Initial) Hudson For Congress Mailing Address PO Box 5053	ull Name (Last, First, Middle Initial) Hudson For Congress											
1 T	City Concord Purpose of Disbursement 2018 General Candidate Name Hudson, Richard, Lane, , Jr.	Zip Code 28027	0 ⁻ Cate Ty		FEC Identification Number C C00504522 Transaction ID : D17CF346284 Amount of Each Disbursement this Period								
	Office Sought: Senate President State: NC District: 08	ment For: Primary Other (spec	X General			Memo Item							
C.	Full Name (Last, First, Middle Initial) Jason Smith For Congress					Date of Disbursement							
		State MO		01 Cate Ty	gory/	08 20 2018 FEC Identification Number C C00541862 Transaction ID : 13332E13205 Amount of Each Disbursement this Period 1000.00							
;	State: MO District: 08	Primary Other (spec	ify) ▼			Memo Item							
รเ	JBTOTAL of Disbursements This Page (optional).				····· Þ	3000.00							
тс	TAL This Period (last page this line number only	/)			▶								

SCH	IEDULE B (FEC Form 3X)			FO	RLINE	NUMBER: PAGE 125 OF 127						
ITEN	MIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		eck only 21b 28a							
	nformation copied from such Reports and State commercial purposes, other than using the na											
	AME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	urance C	ompany Fede	eral	PAC							
A. K	III Name (Last, First, Middle Initial) Sustoff For Congress					Date of Disbursement						
Ma	ailing Address 1661 Aaron Brenner Dr Ste 300					08 30 2018						
Cit Me	ty emphis	State TN	Zip Code 38120-1466			FEC Identification Number						
2	urpose of Disbursement 018 General		[01	11	C C00614826 Transaction ID : 22E68E91B67						
	andidate Name ustoff, David, F., ,			Cate Ty		Amount of Each Disbursement this Period						
Of	ifice Sought: 🗶 House Disburse Senate President	ment For: 2 Primary Other (spec	x General			500.00						
	ate: TN District: 08					Memo Item						
	II Name (Last, First, Middle Initial) Iark Pocan For Congress					Date of Disbursement						
Ma	ailing Address PO Box 327	08 16 2018										
	adison		FEC Identification Number									
2 Ca	urpose of Disbursement 2018 General andidate Name	C C00502179 Transaction ID : E063BE0027E Amount of Each Disbursement this Period										
	Pocan, Mark, , , fice Sought: X House Disburse	pe	1000.00									
Sta	ate: WI District: 02	Primary Other (spec	x General cify)			Memo Item						
	III Name (Last, First, Middle Initial)					Date of Disbursement						
Ma	ailing Address 5429 Madison Avenue	08 / D D / Y Y Y Y 16 2018										
Cit	ty acramento	State CA	Zip Code 95841			FEC Identification Number						
2	urpose of Disbursement 018 General andidate Name	l 1 gory/	C C00326363 Transaction ID : E1FBDCA0F Amount of Each Disbursement this Period 1500.00									
	Fhompson, Michael, C., , fice Sought: x House Disburse	pe										
St	ate: CA District: 05	Primary Other (spec	cify) ▼			Memo Item						
SUR	STOTAL of Disbursements This Page (optional).				k	3000.00						
	AL This Period (last page this line number only											

SC	CHEDULE B (FEC Form 3X)			FC)R I		IUMBER:		PA	GE	126 OF	= 127		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the				only								
			Summary Page			21b	22		26	26 27				
			,			28a	28b	28c	29		30b			
	y information copied from such Reports and Stater for commercial purposes, other than using the nan													
\square	NAME OF COMMITTEE (In Full)													
	The Northwestern Mutual Life Insu	rance Co	ompany Fed	eral	P/	٩C								
•	Full Name (Last, First, Middle Initial)													
А.	Moore For Congress						Date of D					_		
	Mailing Address PO Box 16646				08 / D D / Y Y Y Y 2018									
	City Milwaukee	State WI	Zip Code 53216				FEC Iden	ificatior	Numbe	r				
	Purpose of Disbursement		00210	_	_		C co	039750)5					
	2018 Primary			0	11			1.00	/D : 6C7(EED	0071			
	Candidate Name			Cate	aor	v/	Amount o					eriod		
	Moore, Gwendolynne, Sophia, ,				/pe	, 								
		ment For: 2	018				L			1	500.00			
	Senate x	Primary	General				_							
	President	Other (spec	cify) 🔻				Memo	Item						
	State: WI District: 04						_							
B	Full Name (Last, First, Middle Initial)						Data of D	ichurco	mont					
ь.	Roskam For Congress Committee							Date of Disbursement						
	Mailing Address P. O. Box 713							08 29 2018						
	City													
	City State Zip Code Wheaton IL 60187							FEC Identification Number						
	Purpose of Disbursement				-		C C00410969							
	2018 General								ID : 9914	EF3	B2BI			
	Candidate Name			Cate	gor	y/	Amount o					eriod		
	Roskam, Peter, James, ,			Ту	/pe					1	500.00			
		ment For: 2						-			500.00			
	Senate President	Primary Other (spec	General				-							
	State: IL District: 06	Other (spec	, ii y)				Memo	Item						
	Full Name (Last, First, Middle Initial)													
C.							Date of D							
	Mailing Address P.O. Box 4945		08 / D D / Y Y Y Y 2018											
	City	State	Zip Code				FEC Iden	ification	Number	r				
	East Lansing	MI	48826				i EC luen	mcatior						
	Purpose of Disbursement 2018 General		U U	034447	73 ID : CCD)2FA	DΔ1							
	Candidate Name			Cate	gor	y/	Amount o					eriod		
	Stabenow, Deborah, , ,				/pe	-								
	Office Sought: House Disburser					-		1	000.00					
	X Senate													
	State: MI District:	Other (spec	(iry) 🔻				Memo	Item						
s	UBTOTAL of Disbursements This Page (optional)										3000.00)		
т	OTAL This Period (last page this line number only)													

SCHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 127 OF 127						
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance C	ompany Fede	eral PAC							
Full Name (Last, First, Middle Initial) A. Terri Sewell For Congress Mailing Address PO Box 1964	Date of Disbursement									
City Birmingham	State AL	Zip Code 35201		FEC Identification Number						
Purpose of Disbursement 2018 General			011	C C00458976 Transaction ID : B98A81125A:						
Candidate Name Sewell, Terri, Andrea, , Office Sought: x House Disburse	ement For:	2018	Category/ Type	Amount of Each Disbursement this Period 500.00						
Senate President State: AL District: 07	Primary Other (spe	General (cify) ▼		Memo Item						
Full Name (Last, First, Middle Initial) B. Vicente Gonzalez For Congress				Date of Disbursement						
Mailing Address 121 North 10Th Street		08 27 2018								
City McAllen Purpose of Disbursement 2018 General	Purpose of Disbursement									
Candidate Name Gonzalez, Vicente, , , Office Sought:	ement For:		Category/ Type	Transaction ID : 56EF6756D83 Amount of Each Disbursement this Period						
Senate President	Primary Other (spe	x General		1000.00						
State: TX District: 15 Full Name (Last, First, Middle Initial) C.				Date of Disbursement						
Mailing Address										
City	State	Zip Code		FEC Identification Number						
Purpose of Disbursement	Category/ Type	C Amount of Each Disbursement this Period								
Senate President	ement For: Primary Other (spe	General cify) ▼		Memo Item						
State: District:										
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only				1500.00						