Image# 201808139119601432					PAGE 1 / 121
	EPORT OF F ND DISBURS Other Than An Author	SEMENT	s	Office Us	e Oply
	PE OR PRINT ▼	Example: If typi	ng, type	FE4M5	
COMMITTEE (in full)		over the lines.	12	FE4MD	
The Northwestern Mutual	Life Insurance Con	npany Federa			
ADDRESS (number and street)	20 E Wisconsin Ave				
Check if different					
then providually	∕iilwaukee		WI	53202	
2. FEC IDENTIFICATION NUMB	ER V CITY	<b>A</b>	STAT	E 🔺	ZIP CODE
C C00197095	3. IS RE	- v	NEW (N) OR	AMENDED (A)	
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> </ul>	Report Due On:	0 (M3)	Jun 20 (M6) Jul 20 (M7)	<ul> <li>Aug 20 (M8)</li> <li>Sep 20 (M9)</li> <li>Oct 20 (M10)</li> <li>General (12G)</li> </ul>	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31	PRE-Election Report for the:	Convention	(12C)	Special (12S)	in the
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	on General (300	G)	Runoff (30R)	State of Special (30S)
Termination Report (TER)	Election	on /	D = D / Y = Y	Y Y Y	in the State of
5. Covering Period	01 / Y Y Y Y Y 01 2018	through		31 / Y Y 201	8
I certify that I have examined this R Type or Print Name of Treasurer	eport and to the best of m linze, Michelle, A., ,	ny knowledge and	belief it is true, co	prrect and complet	е.
Signature of Treasurer	chelle, A., ,	[Electronical]	y Filed] Date	08 / D 13	D / Y Y Y Y 2018
NOTE: Submission of false, erroneous	, or incomplete information	may subject the per	son signing this Re	port to the penaltie	es of 52 U.S.C. § 3010
Office Use Only					FORM 3X ev. 05/2016

08/13/2018 09 : 58

X

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name

FEC Form 3X (Rev. 05/2016)

#### The Northwestern Mutual Life Insurance Company Federal PAC

R	eport Covering the Period: From: 07	M / D D / Y Y Y Y Y 01 2018 To	b: 07 / 0 0 / 0 0 0 / 0 0 0 0 0 0 0 0 0 0
		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	304334.69	
	(c) Total Receipts (from Line 19)	36064.66	252618.42
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	340399.35	611192.00
7.	Total Disbursements (from Line 31)	29739.55	300532.20
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	310659.80	310659.80
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

R	eport Covering the Period: From: 07	/ D D / Y Y Y Y 01 2018 T	o: 07 / D D / Y Y Y Y Y 2018
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.			1
	(a) Individuals/Persons Other		
	Than Political Committees	04000.04	
	(i) Itemized (use Schedule A)	31803.34	196729.20
	(ii) Unitemized	4261.32	50889.22
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	36064.66	247618.42
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		
	(such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	36064.66	247618.42
12.	Transfers From Affiliated/Other		
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
14.	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures		1 1 47× 1 1 47× 1 1 47× 1
	(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	
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶	36064.66	252618.42
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	36064.66	252618.42

-7

Page 3

- 7

#### DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share ..... (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 1732.20 Expenditures ..... 239.55 (c) Total Operating Expenditures 1732.20 (add 21(a)(i), (a)(ii), and (b)) 239.55 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 286500.00 and Other Political Committees... 29500.00 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees ..... 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 12300.00 0.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share ..... 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds ..... 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) ..... 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 29739.55 300532.20 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 29739.55 300532.20

#### 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) .....

						36064.66
	÷	7			7	
1.						0.00
	÷	-			-	
1.			-			36064.66
	÷	-	÷	+		
1.			-			239.55
	÷	-7	÷	÷	-7	
1.						0.00
	÷	-7			-7	
1.1	-		-			239.55
		-7-			-7-	

247618.42				
247018.42	-7		-7	<u> </u>
0.00				
0.00	-7	 	-7	 <u></u>
247649.42				
247618.42	7	 	7	 
1732.20				
1732.20	- 7	 	-7	 
0.00				
0.00	-7-	 	7	 
1732.20				
1732.20				L

COLUMN B

Calendar Year-to-Date



## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(che	(check only one)							
			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	contrib	outions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С							
Α.	Full Name of Individual (Last, First, Middle Initia Abbass, Steven, Fay, ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9 Woodhull Ct				м м 07	/	D D D 15	/ Y	y y 2018	Y	
	City Northport	State NY	Zip Code 11768-2844					2018071 eceipt th			
	FEC ID number of contributing federal political committee.	C							12	5.00	
	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 ▼ 1750.00								
в.	Full Name of Individual (Last, First, Middle Initia Abbass, Steven, Fay, ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 9 Woodhull Ct				<sup>M</sup> 07	/	D D D 31	/ Y	ү ү 2018	Y	
	City Northport	State NY	Zip Code 11768-2844					<b>2018073</b>			
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00								
с.	Full Name of Individual (Last, First, Middle Initia Abell, Rick, A, ,	al) or Full O	rganization Name		Date of	Re	ceipt				
	Mailing Address 6025 Princeton Reach Way				07 <sup>M</sup>	1	D D D 15	/ Y	2018	Y	
	City Granite Bay	State CA	Zip Code 95746-6217					2018071 eceipt th			
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed		C				_	y .	, y	12	5.00	
		Gene	upation (for Individual) eral Insurance Agent		Me	emo	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00								
s	UBTOTAL of Receipts This Page (optional)		•	.			,	,	37!	5.00	
т	OTAL This Period (last page this line number or	nly)	••••••					1.45			

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

(check only one)

PAGE 7 OF

			Detailed Summary Page	×	11a		11b		11c		12	_
					13		14		15		16	17
or for c	ormation copied from such Reports and s ommercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any pe address of any political committee	to sc	for the plicit cor	purp ntrib	pose o outions	of s ; frc	oliciting om sucl	) cor 1 co	ntribut mmitte	ions e.
	IE OF COMMITTEE (In Full)		o =									
/	e Northwestern Mutual Life I			<u> </u>								
A. Ab	Name of Individual (Last, First, Middle In ell, Rick, A, ,	itial) or Full O	organization Name		Date of	Re	eceipt					
Maili	ng Address 6025 Princeton Reach Way				м м 07	/	D 3		/ Y	ү 20	)18	Y
City		State	Zip Code		Trans	acti	ion ID	: 2	018073	119	136-4	7
Gra	nite Bay	CA	95746-6217	_	Amount	of	Each	Re	ceipt th	is P	eriod	
	ID number of contributing ral political committee.	С							-9-	_	125.0	0
	e of Employer (for Individual) Employed		upation (for Individual) neral Insurance Agent		Me	emo	ltem					
Rece	eipt For:	Aggregate	Year-to-Date ▼									
	Primary General	50 0 1										
	Other (specify)		1750.00									
	Name of Individual (Last, First, Middle In akson, Eric, D, ,	itial) or Full O	rganization Name		Date of	Re	eceipt					
	ng Address 15323 SE 82nd St				м м 07	/	D 1	р 5	/ Y	20	18	Y
City		State	Zip Code		Trans	acti	ion ID	: 2	018071	519'	136-5	5
New	castle	WA	98059-9223		Amount							
	ID number of contributing ral political committee.	С		62.50								
Nam Self-	e of Employer (for Individual) Employed		upation (for Individual) neral Insurance Agent		Me	emo	ltem					
Rece	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 875.00									
	Name of Individual (Last, First, Middle In Iakson, Eric, D, ,	itial) or Full O	organization Name		Date of	Re	ceint					
	ng Address 15323 SE 82nd St				07	/	D	D 1	/ Y		18	Ŷ
City		State	Zip Code		Trans	act	ion ID	: 2	018073	119	136-5	5
Nev	vcastle	WA	98059-9223		Amount	of	Each	Re	ceipt th	is P	eriod	
	ID number of contributing ral political committee.	С			<u> </u>	_	,		y	_	62.5	50
Self	e of Employer (for Individual) Employed		upation (for Individual) eral Insurance Agent		M	emc	b Item					
Rece	eipt For:	Aggregate	Year-to-Date 🔻									
	Primary General		875.00									
	Other (specify)		675.00									
SUBT	OTAL of Receipts This Page (optional)		•				,		y		250.0	0
TOTAL	This Period (last page this line number	only)	L	-								

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)							
			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 p		oose of	soliciting	g contribut	ions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
A.	Full Name of Individual (Last, First, Middle Initia Backe, Mark, J, ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1918 E Lafayette Pl				м м 07	/	D 15	) / Y	2018	Y		
	City Milwaukee	State WI	Zip Code 53202-1395						<b>319136-5</b> nis Period	59		
	FEC ID number of contributing federal political committee.	С					,		22.0	00		
	Name of Employer (for Individual)		upation (for Individual) ns & Ops Counsel		Me	mo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00									
в.	Full Name of Individual (Last, First, Middle Initia Backe, Mark, J, ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 1918 E Lafayette Pl				м м 07	/	31	) / Y	2018	Y		
	City Milwaukee	State WI	Zip Code 53202-1395						<b>119173-5</b> nis Period	56		
	FEC ID number of contributing federal political committee.	C		22.00								
	Name of Employer (for Individual) NML		upation (for Individual) ns & Ops Counsel		Me	mo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00									
с.	Full Name of Individual (Last, First, Middle Initia Bailey, Brian, D, ,	al) or Full Or	rganization Name		Date of	Re	ceipt					
	Mailing Address 2741 N Anacortes Ln				м м 07	/	D 15	) / Y	2018	Y		
	City Eagle	State ID	Zip Code 83616-3669				-		<b>519136-3</b> his Period	2		
	FEC ID number of contributing federal political committee.	s a la l							17.5	50		
	Name of Employer (for Individual) Self-Employed Receipt For:	Occu Gene		Me	emo	Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 245.00									
s	UBTOTAL of Receipts This Page (optional)		•	•			,	. ,	61.5	50		
т	OTAL This Period (last page this line number or	nly)	••••••	•			,					

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

ITEMIZED RECEIPTS	Use separate schedule(s)	(check only one)						
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12					
			13     14     15     16     1       berson for the purpose of soliciting contributions       e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) The Northwestern Mutual	-							
Full Name of Individual (Last, First, Mi A. Bailey, Brian, D, ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 2741 N Anacortes Ln			07 31 2018					
City Eagle	State ID	Zip Code 83616-3669	Transaction ID : 2018073119136-32 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		17.50					
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 ▼ 245.00	]					
Full Name of Individual (Last, First, Mi B. Barbi, Leslie, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6620 N Lake Dr			07 / D D / Y Y Y Y 2018					
City Fox Point	State WI	Zip Code 53217-4245	Transaction ID : 2018071319136-456 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) - Public Investments	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	1					
Full Name of Individual (Last, First, Mi C. Barbi, Leslie, , ,	ddle Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 6620 N Lake Dr			07 31 2018					
City Fox Point	State WI	Zip Code 53217-4245	Transaction ID : 2018073119173-454           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) - Public Investments	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00	]					
SUBTOTAL of Receipts This Page (option	, onal)		433.50					
TOTAL This Period (last page this line r	number only)							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 10 OF

			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>×</b> 11a	11b	11c		12	<b>_</b>			
	y information copied from such Reports and Sta for commercial purposes, other than using the n						g con					
	NAME OF COMMITTEE (In Full)								0.			
$\left \right\rangle$	The Northwestern Mutual Life Ins	surance	Company Federal PAC	;								
Α.	Full Name of Individual (Last, First, Middle Initia Barras, David, A, ,	l) or Full O	rganization Name	Date o	of Receipt							
	Mailing Address 8700 W Bennington Ct		07 15 2018									
	City Mequon	State WI	Zip Code 53097-3440		saction ID				1			
	FEC ID number of contributing federal political committee.	С						22.0	0			
	Name of Employer (for Individual) NML		upation (for Individual) aging Director		lemo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 308.00									
	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Name									
В.	Barras, David, A, ,			Date o	of Receipt							
	Mailing Address 8700 W Bennington Ct			07 / D D / Y Y Y Y 2018								
	City Mequon	State WI	Zip Code 53097-3440		saction ID nt of Each				8			
	FEC ID number of contributing federal political committee.	С					115 F 6	22.0	0			
	Name of Employer (for Individual)		upation (for Individual) haging Director		lemo Item							
	Receipt For:		Year-to-Date ▼									
	Primary General Other (specify) ▼		308.00									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Barsch, Rebekah, B, ,	l) or Full O	rganization Name	Date o	of Receipt							
	Mailing Address N46W5455 Spring Ct			M N 07	/ D		20 <sup>2</sup>	18 18	Y			
	City Cedarburg	State WI	Zip Code 53012-2547		saction ID				1			
	FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         NML       Vp Planning & Sales         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       1274.00						_	91.0	0			
					lemo Item							
F	UBTOTAL of Receipts This Page (optional)					· · ·	-	135.00				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 11 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	:					
Α.	Full Name of Individual (Last, First, Middle Initia Barsch, Rebekah, B, ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address N46W5455 Spring Ct			07 31 Y Y Y Y Y 2018					
	City Cedarburg	State WI	Zip Code 53012-2547	Transaction ID : 2018073119173-677           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		91.00					
	Name of Employer (for Individual) NML		cupation (for Individual) Planning & Sales	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1274.00						
в.	Full Name of Individual (Last, First, Middle Initia Bay, Michael, , ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 6361 N Berkeley Blvd	1		07 15 / Y Y Y Y 2018					
	City Whitefish Bay	State WI	Zip Code 53217-4334	Transaction ID : 2018071319136-441 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		20.00					
	Name of Employer (for Individual) NML		cupation (for Individual) Ing Dir Priv Plcmts	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00						
C.	Full Name of Individual (Last, First, Middle Initia Bay, Michael, , ,	al) or Full C	Drganization Name	Date of Receipt					
	Mailing Address 6361 N Berkeley Blvd			07 / D D / Y Y Y Y 2018					
	City Whitefish Bay	State WI	Zip Code 53217-4334	Transaction ID : 2018073119173-439           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		20.00					
	Name of Employer (for Individual) NML		supation (for Individual) ng Dir Priv Plcmts	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00						
	UBTOTAL of Receipts This Page (optional)			131.00					

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 12 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	atements may name and add	not be sold or used by any per ress of any political committee	erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance C	ompany Federal PA	2	
Full Name of Individual (Last, First, Middle Initi         A.       Beer, Mitchell, C, ,         Mailing Address 3387 Hampton Ct         City         Thousand Oaks         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	State CA Occupa	Zip Code 91362-1130 ation (for Individual) al Insurance Agent	Date of Receipt	
Full Name of Individual (Last, First, Middle Initi         B. Beer, Mitchell, C, ,         Mailing Address 3387 Hampton Ct         City         Thousand Oaks         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	ing Address 3387 Hampton Ct         busand Oaks       State       Zip Code         C ID number of contributing beral political committee.       C       91362-1130         C ID number of contributing beral political committee.       C       0         D occupation (for Individual) General Insurance Agent       Occupation (for Individual) General Insurance Agent         Primary       General       Aggregate Year-to-Date ▼			
Full Name of Individual (Last, First, Middle Initi         C.       Belli-Fuchs, Lisa, M, ,         Mailing Address       1465 Rolling Meadow Dr         City       Brookfield         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify)	State WI Occupa	Zip Code 53045-5413 ation (for Individual) g & Sys Admin	Date of Receipt	
SUBTOTAL of Receipts This Page (optional)			140.00	

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 13 OF

ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\checkmark$ 11a       11b       11c       12         13       14       15       16       17			
An or	y information copied from such Reports and Stat for commercial purposes, other than using the n	ements mag ame and ac	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PAC	2			
Α.	Full Name of Individual (Last, First, Middle Initial Bender, J, Philip, , Mailing Address 70 Forest St	) or Full Or	rganization Name	Date of Receipt			
	Apt 17E	State	Zip Code	07 15 2018 Transaction ID : 2018071519136-23			
	Stamford	CT	06901-1881	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		208.00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 2912.00				
в.	Full Name of Individual (Last, First, Middle Initial Bender, J, Philip, ,	) or Full Or	rganization Name	Date of Receipt			
	Mailing Address 70 Forest St 	07 / 07 / Y Y Y Y 07					
	Stamford	State CT	Zip Code 06901-1881	Transaction ID : 2018073119136-23 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) Ieral Insurance Agent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00				
с.	Full Name of Individual (Last, First, Middle Initial Bentley, John, E, ,	) or Full Or	rganization Name	Date of Receipt			
	Mailing Address 2012 E Glendale Ave	1 -		07 / D D / Y Y Y Y 2018			
	City Whitefish Bay	State WI	Zip Code 53211-1239	Transaction ID : 2018071319136-444			
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 48.00				
	Name of Employer (for Individual) NML		upation (for Individual) nvestment Strat	Memo Item			
Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       336.00							
s	UBTOTAL of Receipts This Page (optional)			464.00			
т	OTAL This Period (last page this line number on	ly)	••••••				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 14 OF

	EMIZED RECEIPTS			or each category of the Detailed Summary Page	×	11a 13		11 14		11c 15	12 16	17	
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins												
<u> </u>	Full Name of Individual (Last, First, Middle Initia Bentley, John, E, ,	nization Name	Date of Receipt										
	Mailing Address 2012 E Glendale Ave					07 31 2018							
	City Whitefish Bay	State WI		Zip Code 53211-1239	Transaction ID : 2018073119173-442 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						-7-			48	3.00	
	Name of Employer (for Individual)		•	tion (for Individual) stment Strat		N	/lemo	o Ite	эm				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ar-to-Date ▼ 336.00									
В.	Full Name of Individual (Last, First, Middle Initia Black, Dwaan, C, ,	al) or Full C	Orgai	nization Name		Date of	of Re	ecei	pt				
	Mailing Address 3520 Dumbarton Rd NW					07 15 2018							
	City Atlanta	State GA		Zip Code 30327-2614							1 <b>519136-</b> his Perio	-	
	FEC ID number of contributing federal political committee.	С						-	_		42	2.00	
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent		N	/lemo	o Ite	эm				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Yea	ur-to-Date ▼ 588.00									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Black, Dwaan, C, ,	al) or Full C	Orgai	nization Name		Date of	of Re	ecei	pt				
	Mailing Address 3520 Dumbarton Rd NW					<sup>™</sup> 07	И /	/	31	/ Y	2018	Ý	
	City Atlanta	State GA		Zip Code 30327-2614							<b>3119136</b> his Perio	-	
	FEC ID number of contributing federal political committee.												
	Name of Employer (for Individual)     Occupation (for Individual)       Self-Employed     General Insurance Agent					N	/lem	io Ite	əm				
	Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       588.00												
s	UBTOTAL of Receipts This Page (optional)			•				,		,	132	2.00	
Т	OTAL This Period (last page this line number or	nly)						-					

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

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 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         Blevons, Debra, , ,         Mailing Address 165 Pine Ct         City         Appleton         FEC ID number of contributing         federal political committee.         Name of Employer (for Individual)         Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	State WI C Occ Ger	Zip Code 54914-8222 upation (for Individual) neral Insurance Agent Year-to-Date ▼ 1750.00	Date of Receipt
Full Name of Individual (Last, First, Mid         B. Blevons, Debra, , ,         Mailing Address 165 Pine Ct         City         Appleton         FEC ID number of contributing         federal political committee.         Name of Employer (for Individual)         Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	State WI C Occ Gen	Drganization Name         Zip Code         54914-8222         supation (for Individual)         neral Insurance Agent         Year-to-Date ▼         1750.00	Date of Receipt
Full Name of Individual (Last, First, Mid         Botcher, Sandra, L, ,         Mailing Address 10260 N RANGE LINE         City         MEQUON         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify)	C State WI C Occ Vp t	Zip Code         53092         upation (for Individual)         Distribution Development         Year-to-Date ▼         1498.00	Date of Receipt
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu	,		357.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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17	Use separate schedule(s)			(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 13		11b 14	11c 15		12 16	17	
	y information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	name and a	ddress of any political committee	to solicit co							
Α.	Full Name of Individual (Last, First, Middle Init Botcher, Sandra, L, , Mailing Address 10260 N RANGE LINE C	ial) or Full O	rganization Name	Date o		ceipt	) / Y	Ý 20 <sup>7</sup>	Υ Υ Υ 1 Ω	7	
	City MEQUON	State WI	Zip Code 53092	Tran		on ID :	<b>2018073</b> Receipt th	31191	73-68	B	
	FEC ID number of contributing federal political committee.	С						_	107.00	)	
	Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify) ▼	Vp [	upation (for Individual) Distribution Development Year-to-Date ▼ 1498.00		1emo	Item					
в.	Full Name of Individual (Last, First, Middle Init Brase, Jennifer, L, , Mailing Address 12877 N Cobblestone Ct	ial) or Full O	rganization Name	Date c		ceipt	/ Y		Y 1	7	
	City Mequon	State WI	Zip Code 53097-1812	Trans		on ID :	<b>2018071</b> leceipt th		36-71	)	
	FEC ID number of contributing federal political committee.	С						_	40.00	)	
	Name of Employer (for Individual)         NML         Receipt For:         Primary         Other (specify) ▼	Vpl	upation (for Individual) D&I And McMs Year-to-Date ▼ 560.00		iemo	Item					
C.	Full Name of Individual (Last, First, Middle Init Brase, Jennifer, L, , Mailing Address 12877 N Cobblestone Ct	ial) or Full O	rganization Name	Date c	of Re	ceipt	) / Y	Y 201	8	7	
	City Mequon	State WI	Zip Code 53097-1812	Tran			<b>201807</b> 3 Receipt th	31191	73-71	5	
FEC ID number of contributing federal political committee.						y .	, <u>,</u>	_	40.00	)	
	Name of Employer (for Individual) NML Receipt For:	Vp E	upation (for Individual) D&I And McMs		/lemo	ltem					
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 560.00								
s	UBTOTAL of Receipts This Page (optional)					,	. ,		187.00		
Т	OTAL This Period (last page this line number of	only)							-		

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

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17			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         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	2							
A.		ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 2314 E Edgewood Ave			07 15 2018							
	City Shorewood	State WI	Zip Code 53211-2939	Transaction ID : 2018071319136-463           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		24.00							
	Name of Employer (for Individual)		upation (for Individual) Gn Cnl & Ast Sec/Secur	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00								
	Full Name of Individual (Last, First, Middle Init Brower, Anne, T, ,	ial) or Full O	rganization Name	Date of Receipt							
Ъ.	Mailing Address 2314 E Edgewood Ave	07 31 2018									
	City	State WI	Zip Code	Transaction ID : 2018073119173-461							
	Shorewood FEC ID number of contributing federal political committee.	C	53211-2939	Amount of Each Receipt this Period							
	Name of Employer (for Individual) NML		upation (for Individual) Gn Cnl & Ast Sec/Secur	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00								
с.	Full Name of Individual (Last, First, Middle Init Byhardt, Pency, P, ,	ial) or Full O	rganization Name	Date of Receipt							
	Mailing Address W148N10042 Windsong Cir E	State	Zip Code	07 / 15 / 2018 Transaction ID - 2000274240420 200							
	Germantown	WI	53022-5274	Transaction ID : 2018071319136-869         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) ourney Transformation	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00								
⊢	UBTOTAL of Receipts This Page (optional)			68.00							

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

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	2							
Α.	Full Name of Individual (Last, First, Middle Initi Byhardt, Pency, P, ,	al) or Full C	Organization Name	Date of Receipt							
	Mailing Address W148N10042 Windsong Cir E			07 31 2018							
	City Germantown	State WI	Zip Code 53022-5274	Transaction ID : 2018073119173-865 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) Journey Transformation	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00								
в.	Full Name of Individual (Last, First, Middle Initi Byrne, Michael, T, ,	Date of Receipt									
	Mailing Address 395 La Casa Via	07 / D D / Y Y Y Y Y 2018									
	City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID : 2018071519136-14 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00								
С.	Full Name of Individual (Last, First, Middle Initi Byrne, Michael, T, ,	al) or Full C	Organization Name	Date of Receipt							
	Mailing Address 395 La Casa Via			07 / D D / Y Y Y Y Y 2018							
	City Walnut Creek	State CA	Zip Code 94598-4842	Transaction ID : 2018073119136-14           Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		208.00							
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item							
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00								
s	UBTOTAL of Receipts This Page (optional)		•	436.00							
Т	OTAL This Period (last page this line number o	nly)									

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

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	, те		Use separate schedule(s)	(cheo	(check only one)								
ITEMIZED RECEIP	13		for each category of the Detailed Summary Page	×	11a 13	11b	11c	12	17				
			y not be sold or used by any a dress of any political committe		or the p	ourpose	of solicitir	ng contribu	tions				
NAME OF COMMITTEE		surance	Company Federal PA	C									
Full Name of Individual (I A. Cadotte, Lisa, A, ,	ast, First, Middle Initia	al) or Full Or	ganization Name	D	Date of Receipt								
Mailing Address 7009 W	Rawson Ave				07 15 2018								
City Franklin		State WI	Zip Code 53132-8113					<b>71319136-8</b> this Period					
FEC ID number of contril federal political committee	0	С				-95-		30.	00				
Name of Employer (for Ir NML	idividual)		pation (for Individual) westment Risk & Ops		Me	mo Iter	m						
Receipt For: Primary G Other (specify) ▼	eneral	Aggregate	Year-to-Date ▼ 420.00	]									
B. Cadotte, Lisa, A, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cadotte, Lisa, A, , Mailing Address 7009 W Rawson Ave						t /	Y Y Y	Y				
City		State	Zip Code	- L	07 Transa		31	2018 <b>3119173-8</b>					
Franklin		WI	53132-8113	A	mount	of Eac	h Receipt	this Period					
FEC ID number of contril federal political committee	0	C			30.00								
Name of Employer (for Ir NML	ndividual)	Occupation (for Individual) Vp Investment Risk & Ops			Memo Item								
Receipt For: Primary G Other (specify) ▼	eneral	Aggregate	Year-to-Date ▼ 420.00	]									
Full Name of Individual ( <b>c.</b> Carter, Michael, G		al) or Full Or	ganization Name	D	ate of	Receip	t						
Mailing Address 7322 N	Mohawk Rd				<sup>M</sup> 07	/ D	15 <sup>/</sup>	2018	Y				
City Fox Point		State WI	Zip Code 53217-3454					71319136-8 this Period					
FEC ID number of contril federal political committee	0	С		ļļ	_	y	,	208.	00				
NML	Name of Employer (for Individual)     C       NML     F       Receipt For:     Aggreg       Primary     General       Other (specify)     C				Me	mo Itei	m						
Primary G				]									
SUBTOTAL of Receipts Th	is Page (optional)				-	,	,	268.	00				
TOTAL This Period (last pa	age this line number or	וy)		► L	_								

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

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			Use separate schedule(s)		(check only one)						
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b 14	11c		12 16	17	
	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	name and a	ddress of any political committee	to solicit o							
Α.	Full Name of Individual (Last, First, Middle Init Carter, Michael, G, , Mailing Address 7322 N Mohawk Rd	ial) or Full O	organization Name	M	M	eceipt	) / Y		Y 18	7	
	City Fox Point	State WI	Tra	07     31     2018       Transaction ID : 2018073119173-797       Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-yr-		2	208.00	)	
	Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	Evp	upation (for Individual) & Cfo Year-to-Date ▼ 2912.00		Mem	o Item					
в.	Full Name of Individual (Last, First, Middle Init Castronovo, Greg, , , Mailing Address 317 Evening Star Ln	ial) or Full O	organization Name	_	M	eceipt		201	8	7	
	City Bozeman	State MT	Zip Code 59715-7738	Tra	nsact	ion ID :	<b>2018071</b> Receipt th	151913	36-31		
	FEC ID number of contributing federal political committee.	C Occupation (for Individual)			42.00						
	Self-Employed         Receipt For:         Primary       General         Other (specify) ▼		Year-to-Date ▼ 588.00								
c.	Full Name of Individual (Last, First, Middle Init Castronovo, Greg, , , Mailing Address 317 Evening Star Ln	ial) or Full O	organization Name	M	M	eceipt	) / Y		Y 1	7	
	City Bozeman	State MT	Zip Code 59715-7738	Tra	07         31         2018           Transaction ID : 2018073119136-31           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				<b>y</b>	. ,	_	42.00	)	
	Name of Employer (for Individual) Self-Employed Receipt For: Primary General	Gen	upation (for Individual) eral Insurance Agent Year-to-Date ▼		Mem	o Item					
_	Other (specify)	588.00									
s	UBTOTAL of Receipts This Page (optional)		•	Ę	_	,		2	292.00		
т	OTAL This Period (last page this line number of	only)	••••••	. L.	_	-	-		-		

## Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
or for commercial purposes, other 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	e Insurance	Company Federal PA	C						
Full Name of Individual (Last, First, Middle A. Christensen, Scott, G, ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 45 Middle Rd			07 15 / Y Y Y Y 2018						
City Portsmouth	State NH	Zip Code 03801-4802	Transaction ID : 2018071519136-29 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		75.00						
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 ▼ 1050.00	]						
Full Name of Individual (Last, First, Middle B. Christensen, Scott, G, ,	Data of Respire								
Mailing Address 45 Middle Rd	Date of Receipt								
City	State NH	Zip Code	Transaction ID : 2018073119136-29						
Portsmouth FEC ID number of contributing federal political committee.	С	03801-4802	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 ▼ 1050.00	]						
Full Name of Individual (Last, First, Middle C. Christophersen, Eric, P, ,	Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address N25W27286 Fairmount C			07 / D D / Y Y Y Y 2018						
City Pewaukee	State WI	Zip Code 53072-4962	Transaction ID : 2018071319136-592           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		95.00						
Name of Employer (for Individual) NML		upation (for Individual) Strat Phil & Comm Rel	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1330.00	]						
SUBTOTAL of Receipts This Page (optional	)		245.00						
TOTAL This Period (last page this line num	per only)								

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

#### Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page		<b>X</b> 11a 13	11k		11c 15	12 16	17		
	y information copied from such Reports and State for commercial purposes, other than using the na								oliciting	contribu	tions		
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance	С	ompany Federal PAC	)								
Α.	Full Name of Individual (Last, First, Middle Initial) Christophersen, Eric, P, , Mailing Address N25W27286 Fairmount Ct	) or Full C	)rga	nization Name	Date of Receipt								
	City Pewaukee	State WI		Zip Code 53072-4962	Transaction ID : 2018073119173-589           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С					-		-	95	00		
	Name of Employer (for Individual)         NML         Receipt For:         Primary         General         Other (specify) ▼	Vp \$	Stra	tion (for Individual) t Phil & Comm Rel ar-to-Date ▼ 1330.00		Me	mo Ite	m					
B.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         Condrey, R, Michael, ,         Mailing Address 907 Williamson Dr         City       State       Zip Code						Date of Receipt						
	City Raleigh FEC ID number of contributing federal political committee.	State NC		Transaction ID : 2018071519136-1           Amount of Each Receipt this Period           208.00									
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2912.00									
C.	Full Name of Individual (Last, First, Middle Initial) Condrey, R, Michael, ,	) or Full C	rga	nization Name		Date of	Receip	ot					
	Mailing Address 907 Williamson Dr					07 31 Y Y Y Y 2018							
	City Raleigh	State NC		Zip Code 27608-2307		Amount				119136- s Perioc			
	FEC ID number of contributing federal political committee.	С					y		J	208	00		
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				Memo Item							
	Receipt For:     //       Primary     General       Other (specify)	Aggregate	ar-to-Date ▼ 2912.00										
s	UBTOTAL of Receipts This Page (optional)			•			y		9	511	00		
т	OTAL This Period (last page this line number onl	y)		····· •			-		- 40-				

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ITEMIZED R	ECEIDTE	-	Use separate schedule(s)	(che	(check only one)							
			for each category of the Detailed Summary Page	×	11a	11b			12	4 <del>_</del> _		
			y not be sold or used by any p ddress of any political committe					ting co				
	MMITTEE (In Full) western Mutual Life	e Insurance	Company Federal PA	С								
Full Name of In A. Cruse, Tait,	ndividual (Last, First, Middle	e Initial) or Full O	rganization Name		Date of	Receip	ot					
Mailing Addres	s 2961 Belclaire Dr				07 15 2018							
City Frisco		State TX	Zip Code 75034-5969				I <b>D : 20180</b> h Receipt			)		
FEC ID numbe federal political	er of contributing committee.	С				-95			208.0	0		
Self-Employed	oyer (for Individual)		upation (for Individual) eral Insurance Agent		Me	emo Iter	m					
Primary	Receipt For: Aggregate Year-to-Date V											
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cruse, Tait, , ,					Date of	Receip	ot					
Mailing Address 2961 Belclaire Dr						/ D	D / 31		018	Y		
City Frisco		State TX	Zip Code 75034-5969		Transaction ID : 2018073119136- Amount of Each Receipt this Period					)		
FEC ID numbe federal political	er of contributing committee.	С		208.00								
Name of Employed	oyer (for Individual)		Occupation (for Individual) General Insurance Agent			emo Iter	m					
Receipt For: Primary Other (sp	General Decify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]								
Full Name of In C. Cuffie, She	ndividual (Last, First, Middle eldon, I, ,	e Initial) or Full O	rganization Name		Date of	Receip	ot					
	s 9412 N Carlotta Ln				<sup>M</sup> 07	/ D	D / 15		2018	Ŷ		
City Brown Deer		State WI	Zip Code 53223-1367	/			ID : 20180 h Receipt			<u>41</u>		
FEC ID numbe federal political	er of contributing committee.	С				9	,		20.0	0		
NML	oyer (for Individual)		ipation (for Individual) nfo Risk Mgmt Privacy		Me	emo Iter	m					
Receipt For: Primary Other (sp	General Gecify)	Aggregate	Year-to-Date ▼ 280.00	]								
SUBTOTAL of R	eceipts This Page (optional	)							436.0	0		
TOTAL This Peri	od (last page this line num	ber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 24 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							
	ng the name and a	ddress of any political committe	erson for the purpose of soliciting contributions e to solicit contributions from such committee.							
Full Name of Individual (Last, First, Mid Cuffie, Sheldon, I, , Mailing Address 9412 N Carlotta Ln	dle Initial) or Full O	rganization Name	Date of Receipt							
City	State	Zip Code	07 31 2018 Transaction ID : 2018073119173-837							
Brown Deer	WI	53223-1367	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) nfo Risk Mgmt Privacy	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	]							
Full Name of Individual (Last, First, Mid Cunningham, Brian, R, , Mailing Address 6251 S Billings Way	Date of Receipt									
City	State	Zip Code	07 15 2018 Transaction ID : 2018071519136-13							
Centennial	CO	80111-6009	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 ▼ 2082.00	]							
Full Name of Individual (Last, First, Mid Cunningham, Brian, R, ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6251 S Billings Way		7.01	07 / D D / Y Y Y Y 2018							
City Centennial	State CO	Zip Code 80111-6009	Transaction ID : 2018073119136-13           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2082.00	]							
SUBTOTAL of Receipts This Page (option	al)		436.00							
TOTAL This Period (last page this line nu	mber only)									

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

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17			Use separate schedule(s)	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12				
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the		pose o						
	NAME OF COMMITTEE (In Full)											
$\rangle$	The Northwestern Mutual Life Ins	surance	Company Federal PAC	2								
Α.	Full Name of Individual (Last, First, Middle Initia Dodd, Paul, , ,	al) or Full O	Organization Name	Date	of Re	eceipt						
	Mailing Address 7078 E Genesee St			M 07	M M / D D / Y Y Y Y							
	City Fayetteville	State NY	Zip Code 13066-1123				: 2018071 Receipt th		7			
	FEC ID number of contributing federal political committee.	С						208.0	00			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	י 🗖 📙	Vemo	o Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00									
в.	Full Name of Individual (Last, First, Middle Initia Dodd, Paul, , ,	Date	of Re	eceipt								
	Mailing Address 7078 E Genesee St	07		31		2018	Y					
	City Fayetteville	State NY	Zip Code 13066-1123	Transaction ID : 2018073119136-1 Amount of Each Receipt this Period					7			
	FEC ID number of contributing federal political committee.	C	208.00									
	Name of Employer (for Individual) Self-Employed	Occi Ger	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00									
С.	Full Name of Individual (Last, First, Middle Initia Dugal, Steven, , ,	al) or Full O	Organization Name	Date	of Re	eceipt						
	Mailing Address 9 Falcon Dr			07		D 15		2018	Y			
	City Mandeville	State LA	Zip Code 70471-2952				: 2018071 Receipt th		8			
	FEC ID number of contributing federal political committee.	С				y 1		208.0	00			
Self-Employed			upation (for Individual) neral Insurance Agent	_ U'	Memo Item							
			Year-to-Date ▼ 2912.00									
s	UBTOTAL of Receipts This Page (optional)			. [].		,		624.0	00			
т	OTAL This Period (last page this line number or	וy)	••••••			-						

## Use separate schedule(s)

FOR LINE NUMBER:

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171			Use separate schedule(s)	(ch	(check only one)									
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>′</b> 11a 13		11b	11c	12	<b>17</b>				
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of		contribu					
$\rangle$	The Northwestern Mutual Life Ins	surance	Company Federal PA	С										
Α.	Full Name of Individual (Last, First, Middle Initia Dugal, Steven, , ,	al) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 9 Falcon Dr				07 31 2018									
	City Mandeville	State LA	Zip Code 70471-2952		Transaction ID : 2018073119136-18           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		M	emo	Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]										
в.	Full Name of Individual (Last, First, Middle Initia Dunn, John, E, ,		Date of	Re	ceipt									
	Mailing Address 4656 N Wilshire Rd		07	/	D D 15	/ Y	2018	Y						
	City Whitefish Bay	State WI	Zip Code 53211-1260						<b>319136-5</b> is Perioc					
	FEC ID number of contributing federal political committee.	С		55.00										
	Name of Employer (for Individual) NML	Occı Vp 8		M	emo	tem								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 770.00	]										
с.	Full Name of Individual (Last, First, Middle Initia Dunn, John, E, ,	al) or Full Oi	rganization Name		Date of	Re	ceipt							
	Mailing Address 4656 N Wilshire Rd				<sup>M</sup> 07	/	D D D 31	/ Y	2018	Y				
	City Whitefish Bay	State WI	Zip Code 53211-1260						is Perioc					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	y	55	.00				
	Name of Employer (for Individual) NML		upation (for Individual) 4 Ipas Cnsl		Memo Item									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 770.00	]										
s	UBTOTAL of Receipts This Page (optional)		•••••		[.		,	,	318.	.00				
т	OTAL This Period (last page this line number or	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	<b>X</b> 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and a	ddress of any political committe	berson for the purpose of soliciting contributions to solicit contributions from such committee.								
The Northwestern Mutual Life	Insurance	Company Federal PA	C								
Full Name of Individual (Last, First, Middle <b>A.</b> Ekeroth, Eric, J, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 19672 Stanford Hall Pl			07 15 2018								
City Ashburn	State VA	Zip Code 20147-5223	Transaction ID : 2018071319136-507 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		20.00								
Name of Employer (for Individual) NML		upation (for Individual) ional Director	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	]								
Full Name of Individual (Last, First, Middle B. Ekeroth, Eric, J, ,	Date of Receipt										
Mailing Address 19672 Stanford Hall Pl			07 31 2018								
City Ashburn	State VA	Zip Code 20147-5223	Transaction ID : 2018073119173-505								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
Name of Employer (for Individual) NML		upation (for Individual) ional Director	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	]								
Full Name of Individual (Last, First, Middle C. Ekstrand, Diane, L, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address S77W26988 River Ridge C	Sir		07 / D D / Y Y Y Y 07 31 2018								
City Mukwonago	State WI	Zip Code 53149-8767	Transaction ID : 2018073119173-852           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) Ir Bus Partners	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 210.00	]								
SUBTOTAL of Receipts This Page (optional)			55.00								
TOTAL This Period (last page this line numb	er only)										

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

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171			Use separate schedule(s)	(check only one)									
			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions									
$\overline{)}$	NAME OF COMMITTEE (In Full)												
	The Northwestern Mutual Life Ins	surance	Company Federal PA	C									
A.	Full Name of Individual (Last, First, Middle Initia Erhard, Keith, A, ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 4807 Timberwood Ct			07 15 2018									
	City	State	Zip Code	Transaction ID : 2018071519136-7									
	W Des Moines	IA	50265-5447	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		42.00									
	Name of Employer (for Individual)	Осси	upation (for Individual)	Memo Item									
	Self-Employed	Gen	eral Insurance Agent										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_									
	Other (specify) ▼		588.00										
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	rganization Name										
В.	Erhard, Keith, A, ,	Date of Receipt											
	Mailing Address 4807 Timberwood Ct	Zip Code	07 / D D / Y Y Y Y 2018										
	W Des Moines	State IA	50265-5447	Transaction ID : 2018073119136-7           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:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		588.00	]									
С.	Full Name of Individual (Last, First, Middle Initia Ertz, John, C, ,	al) or Full O	rganization Name	Date of Receipt									
	Mailing Address 18235 Shaker Blvd			07 / D D / Y Y Y Y 2018									
	City Shaker Hts	State OH	Zip Code 44120-1754	Transaction ID : 2018071519136-6									
			44120-1754	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		208.00									
	Name of Employer (for Individual)		upation (for Individual)	Memo Item									
	Self-Employed Receipt For:		eral Insurance Agent										
	Primary General	Aggregate	Year-to-Date <b>V</b>										
	Other (specify)		2912.00	1									
s	UBTOTAL of Receipts This Page (optional)			292.00									
т	OTAL This Period (last page this line number or	nly)	· · · · · · · · · · · · · · · · · · ·										

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

## Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 29 OF

	EMIZED RECEIPTS			r each category of the etailed Summary Page		_	11a 13		] 11   14	-	_	1c 5	12 16	17
	y information copied from such Reports and State for commercial purposes, other than using the na					for	the		pos	se of	solio	citing	contrib	utions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance	Со	mpany Federal PAC	2									
Α.	Full Name of Individual (Last, First, Middle Initial) Ertz, John, C, , Mailing Address 18235 Shaker Blvd								ecei	D ■ D	/	Y	Y Y	Ý
	City Shaker Hts	State OH		Zip Code 44120-1754	_	07     31     2018       Transaction ID : 2018073119136-6       Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			208.00									
	Name of Employer (for Individual) Self-Employed Receipt For:	Ger	neral	on (for Individual) Insurance Agent -to-Date ▼		Memo Item								
	Primary General Other (specify) ▼		-	2912.00										
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Eull, Bradley, L, , Mailing Address 2363 N 81st St								cei	ipt □ □ □ 15	/	Y	у у 2018	Y
	City Wauwatosa	State WI	_				-	ID : 2			1 <b>9136-</b> s Period			
	FEC ID number of contributing federal political committee.	C												
	NML	Ast	t Gn C	on (for Individual) onl & Ast Sec / Ipas -to-Date ▼ 308.00										
c.	Full Name of Individual (Last, First, Middle Initial) Eull, Bradley, L, , Mailing Address 2363 N 81st St	or Full C	Drgani	zation Name	_		ate of	Re	_					
	City Wauwatosa FEC ID number of contributing federal political committee.	State WI		Zip Code 53213-1001		5			ion		201	80731	2018 1 <b>19173-</b> s Period 22	660
	Name of Employer (for Individual) NML Receipt For:	Ast	Gn C	on (for Individual) nl & Ast Sec / Ipas		C	M	emo	o Ite	em				
	Primary General Other (specify)	Aggregate	Year	-to-Date ▼ 308.00										
s	UBTOTAL of Receipts This Page (optional)								,			9	252	.00
Т	OTAL This Period (last page this line number only	y)		<b></b>		Γ			-			-		

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
or for commercial purposes, other than usin			person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	.C								
Full Name of Individual (Last, First, Mide A. Fradin, Gerald, E, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 120 Belle Ave			07 / D D / Y Y Y Y 2018								
City Highland Park	State IL	Zip Code 60035-2504	Transaction ID : 2018071319136-504 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) Wmc Inv Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	]								
Full Name of Individual (Last, First, Mide B. Fradin, Gerald, E, ,	Date of Receipt										
Mailing Address 120 Belle Ave			07 31 / Y Y Y Y 2018								
City Highland Park	State	Zip Code 60035-2504	Transaction ID : 2018073119173-502 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) Wmc Inv Mgmt	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 420.00	]								
Full Name of Individual (Last, First, Mide C. Franczyk, Lance, P, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2224 E 24th St			07 / D D / Y Y Y Y 2018								
City Tulsa	State OK	Zip Code 74114-2912	Transaction ID : 2018071519136-33 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С	42.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00	]								
SUBTOTAL of Receipts This Page (option	al)		102.00								
TOTAL This Period (last page this line nu	mber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
			person for the purpose of soliciting contributions to solicit contributions from such committee.									
NAME OF COMMITTEE (In Full)												
The Northwestern Mutual Life	Insurance	Company Federal PA	.C									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
A. Franczyk, Lance, P, ,			Date of Receipt									
Mailing Address 2224 E 24th St			07 31 2018									
City	State	Zip Code	Transaction ID : 2018073119136-33									
Tulsa	OK	74114-2912	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		42.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
Self-Employed	Ger	eral Insurance Agent										
Receipt For:	Aggregate	Year-to-Date 🔻										
Other (specify) ▼		588.00										
			-									
Full Name of Individual (Last, First, Middle	Initial) or Full O	rganization Name										
<b>B.</b> Frankl, Stephen, J, ,			Date of Receipt									
Mailing Address 3225 Somers Ln			07 15 2018									
City	State	Zip Code	Transaction ID : 2018071319136-890									
Port Washington	WI	53074-9503	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		21.00									
Name of Employer (for Individual) NML		upation (for Individual) ector Planning & Sales	Memo Item									
Receipt For:		Year-to-Date ▼	—									
Primary General	33 - 3											
Other (specify) <b>v</b>		, 282.00	1									
Full Name of Individual (Last, First, Middle C. Frankl, Stephen, J, ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 3225 Somers Ln			M = M / D = D / Y = Y = Y = Y									
City	State	Zip Code	07 31 2018 Transaction ID : 2018073119173-886									
Port Washington	WI	53074-9503	Amount of Each Receipt this Period									
FEC ID number of contributing	0											
federal political committee.	С		21.00									
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item									
NML	Dire	ctor Planning & Sales										
Receipt For:	Aggregate	Year-to-Date <b>V</b>										
Other (specify)		282.00										
SUBTOTAL of Possints This Page (antises)			84.00									
SUBTOTAL of Receipts This Page (optional)												
TOTAL This Period (last page this line numb	er only)											

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 32 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 e to solicit contributions from such committee.								
The Northwestern Mutual Life	e Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Middle <b>A.</b> Frieling, Robert, T, ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4 Windy Hill Ln			07 15 / Y Y Y Y 2018								
City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2018071519136-5 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 ▼ 2912.00	]								
Full Name of Individual (Last, First, Middle B. Frieling, Robert, T, ,	Date of Receipt										
Mailing Address 4 Windy Hill Ln			07 31 2018								
City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2018073119136-5 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 ▼ 2912.00	]								
Full Name of Individual (Last, First, Middle C. Gahan, Christopher, T, ,	e Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 425 M St NW			07 / D D / Y Y Y Y 2018								
City Washington	State DC	Zip Code 20001-4672	Transaction ID : 2018071319136-438 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 ▼ 322.00	]								
SUBTOTAL of Receipts This Page (optional	)		439.00								
TOTAL This Period (last page this line num	ber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12							
			13     14     15     16     17       berson 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. Gahan, Christopher, T, ,	ddle Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 425 M St NW			07 31 2018							
City Washington	State DC	Zip Code 20001-4672	Transaction ID : 2018073119173-436 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		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 ▼ 322.00	1							
Full Name of Individual (Last, First, Mid B. Gavin, Sheila, M, ,	Date of Receipt									
Mailing Address 5735 N Crestwood Blv	Mailing Address 5735 N Crestwood Blvd									
City Glendale	State WI	Zip Code 53209-4309	Transaction ID : 2018071319136-874 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/Ins	Memo Item							
Receipt For:	Aggregate	Year-to-Date <b>V</b>	_							
Other (specify) ▼		308.00	]							
Full Name of Individual (Last, First, Mic Gavin, Sheila, M, ,		rganization Name	Date of Receipt							
Mailing Address 5735 N Crestwood Blv			07 D D / Y Y Y Y 2018							
City Glendale	State WI	Zip Code 53209-4309	Transaction ID : 2018073119173-870           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		22.00							
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 ▼ 308.00	]							
SUBTOTAL of Receipts This Page (option	nal)		67.00							
TOTAL This Period (last page this line n	umber only)									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page	>	_	1a 3		] 11   14	lb 1		11c 15		2 6	17
	y information copied from such Reports and Sta for commercial purposes, other than using the										f so	liciting	conti	ribut	ions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	surance	C	ompany Federal PAC	;										
<u>А.</u>	Full Name of Individual (Last, First, Middle Initia Gawart, Chris, K, ,	al) or Full C	)rga	anization Name		Date of Receipt									
	Mailing Address 1610 N Prospect Ave					07 / D D / Y Y Y Y 2018									
	City Milwaukee	State WI		Zip Code 53202-6702		Transaction ID : 2018071319136-541           Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С	_						-			-7-	Ξ	51.0	00
	Name of Employer (for Individual) NML			ation (for Individual) neral Counsel			Μ	emc	b It	em					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 342.00											
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gawart, Chris, K, ,								ece	ipt					
	Mailing Address 1610 N Prospect Ave		07 / D D / Y Y Y Y Y 2018												
	City Milwaukee	State WI		Zip Code 53202-6702	_	Transaction ID : 2018073119173-538 Amount of Each Receipt this Period								38	
	FEC ID number of contributing federal political committee.	C						51.00							
	Name of Employer (for Individual) NML	Occ Vp		Memo Item											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ , 342.00											
с.	Full Name of Individual (Last, First, Middle Initia Gerend, Timothy, J, ,	al) or Full C	)rga	anization Name		Da	te o	f Re	ece	ipt					
	Mailing Address 5421 N Idlewild Ave					M	07 <sup>M</sup>	/	Γ	15		/ Y	201	8 8	Y
	City Whitefish Bay	State WI		Zip Code 53217-5331	-							<b>18071</b> eipt th			26
	FEC ID number of contributing federal political committee.	С		Ľ			y					36.0	00		
	Name of Employer (for Individual) NML	Occ Svp	•			М	emo	o It	em						
	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 1904.00											
s	UBTOTAL of Receipts This Page (optional)			▶					9			9	2	38.0	00
т	OTAL This Period (last page this line number o	nly)		<b>&gt;</b>					-			-			

## 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	<b>X</b> 11a 11b 11c 12 13 14 15 16 11							
			13     14     15     16     1       erson for the purpose of soliciting contributions       e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Midd A. Gerend, Timothy, J, ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 5421 N Idlewild Ave			07 31 2018							
City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID : 2018073119173-524 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		136.00							
Name of Employer (for Individual) NML		upation (for Individual) Career Distribution	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1904.00	1							
Full Name of Individual (Last, First, Midd B. Glover, Mitchell, B, ,	Date of Receipt									
Mailing Address 6700 Old Darby Trl NE			07 / D D / Y Y Y Y 2018							
City Ada	State MI	Zip Code 49301-8360	Transaction ID : 2018071519136-4 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]							
Full Name of Individual (Last, First, Midd C. Glover, Mitchell, B, ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 6700 Old Darby Trl NE			07 / D D / Y Y Y Y 07 31 2018							
City Ada	State MI	Zip Code 49301-8360	Transaction ID : 2018073119136-4           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) Self-Employed Receipt For:		upation (for Individual) eral Insurance Agent	Memo Item							
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00	1							
SUBTOTAL of Receipts This Page (optional	al)		552.00							
TOTAL This Period (last page this line nur	nber only)									

## Use separate schedule(s)

FOR LINE NUMBER:

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177			Use separate schedule(s)	(che	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a		1b	11c	12				
or	y information copied from such Reports and Sta for commercial purposes, other than using the r					purpo							
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С									
Α.	Full Name of Individual (Last, First, Middle Initia Goes, Thomas, J, ,	al) or Full O	rganization Name		Date of Receipt								
	Mailing Address 1526 Harston Ave				07 15 2018								
	City Orlando	State FL	Zip Code 32814-6700						<b>519136-5</b> is Period				
	FEC ID number of contributing federal political committee.	C				-9		- 49°-	42.	00			
	Name of Employer (for Individual) Self-Employed		ipation (for Individual) eral Insurance Agent		Me	emo I	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00	1									
	Full Name of Individual (Last, First, Middle Initia Goes, Thomas, J, ,		Date of	Rece	eint								
	Mailing Address 1526 Harston Ave			07	/	D D 31	/ Y	y y 2018	Ŷ				
	City Orlando	State FL	Zip Code 32814-6700						119136-5				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 42.00									
	Name of Employer (for Individual) Self-Employed	Occi Gen		Me	emo I	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00										
	Full Name of Individual (Last, First, Middle Initia Gores, Patrick, K, ,	al) or Full O	rganization Name		Date of	Rece	eipt						
	Mailing Address 2702 28th Ave S				<sup>M</sup> 07	/	D D D 15	/ Y	ү 2018	Ŷ			
	City Fargo	State ND	Zip Code 58103-5045						519136-2 is Period				
	FEC ID number of contributing federal political committee.	С				,		9	42.	00			
	Name of Employer (for Individual) Dinger Network LLC		ipation (for Individual) cial Agent		Me	emo l	ltem						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00	]									
S	JBTOTAL of Receipts This Page (optional)					,		,	126.	00			
т	OTAL This Period (last page this line number or	וy)		•									

### Use separate schedule(s)

FOR LINE NUMBER:

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			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page		<b>′</b> 11a 13		11b	11c 15	12		17
	nformation copied from such Reports and Star commercial purposes, other than using the n				for the		pose of	soliciting	contrik	butio	ns
	ME OF COMMITTEE (In Full) ne Northwestern Mutual Life Ins	urance	Company Federal PA	С							
	l Name of Individual (Last, First, Middle Initia ores, Patrick, K, ,	) or Full Or	ganization Name		Date of	Re	eceipt				
Ма	iling Address 2702 28th Ave S				M M 07	1	D D D 31	/ Y	2018		1
City Fa	y Irgo	State ND	Zip Code 58103-5045					2018073 eceipt th			-
	C ID number of contributing leral political committee.	С								2.00	
Dir	me of Employer (for Individual) nger Network LLC		pation (for Individual) sial Agent		M	emo	tem				
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00								
	l Name of Individual (Last, First, Middle Initia oris, Tom, , , JR	) or Full Or	ganization Name		Date of	<sup>r</sup> Re	eceipt				
	Mailing Address 4735 Wellington Dr				<sup>M</sup> 07	/	D D D 15	/ Y	2018	Y	]
City	y ng Grove	State IL	Zip Code 60047-5223					<b>2018071</b> eceipt th			
FE	C ID number of contributing eral political committee.	C					1			98.00	
	me of Employer (for Individual) f-Employed	Occupation (for Individual) General Insurance Agent			M	emo	Item				
Re	ceipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ , 2912.00								
	I Name of Individual (Last, First, Middle Initia Goris, Tom, , , JR	) or Full Or	ganization Name		Date of	Re	eceipt				
Ма	iling Address 4735 Wellington Dr				07 <sup>M</sup>	/	D D D 31	/ Y	2018		1
City	y ng Grove	State IL	Zip Code 60047-5223					2018073 eceipt th			_
	C ID number of contributing eral political committee.	С			<u> </u>		, .	. y	20	8.00	
Se	me of Employer (for Individual) If-Employed		pation (for Individual) eral Insurance Agent		M	emc	tem				
	ceipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼ 2912.00								
SUB	TOTAL of Receipts This Page (optional)		••••••	•			,	9	45	8.00	
тот	AL This Period (last page this line number on	ly)		-			-	1.45		-	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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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 Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC			
Α.	Full Name of Individual (Last, First, Middle Initi Gouverneur, Karl, G, ,	al) or Full C	Organization Name	Date of Receipt		
	Mailing Address 12895 N Cobblestone Ct			07 / D D / Y Y Y Y 2018		
	City Mequon	State WI	Zip Code 53097-1812	Transaction ID : 2018071319136-921         Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		20.00		
	Name of Employer (for Individual) NML		cupation (for Individual) Dig Wrkplce & Corp Sol	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00			
в.	Full Name of Individual (Last, First, Middle Initi Gouverneur, Karl, G, ,	al) or Full C	Drganization Name	Date of Receipt		
	Mailing Address 12895 N Cobblestone Ct	07 31 2018				
	City Mequon	State WI	Zip Code 53097-1812	Transaction ID : 2018073119173-917 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	20.00				
	Name of Employer (for Individual) NML		cupation (for Individual) Dig Wrkplce & Corp Sol	Memo Item		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 280.00			
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Grabner, Todd, Matthew, ,	al) or Full C	Drganization Name	Date of Receipt		
	Mailing Address 3086 E Silver Hawk Dr	07 15 2018				
	City Holladay	State UT	Zip Code 84121-1572	Transaction ID : 2018071519136-69 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	eupation (for Individual) neral Insurance Agent	Memo Item		
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1750.00			
s	UBTOTAL of Receipts This Page (optional)		•	165.00		
т	OTAL This Period (last page this line number o	nly)	•			

### Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using			person for the purpose of soliciting contributions be to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	.C					
Full Name of Individual (Last, First, Middle Grabner, Todd, Matthew, ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3086 E Silver Hawk Dr			07 31 2018					
City Holladay	State UT	Zip Code 84121-1572	Transaction ID : 2018073119136-69 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 ▼ 1750.00	]					
Full Name of Individual (Last, First, Middle B. Grogan, John, M, ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7860 N Club Cir City State Zip Code			07 / D D / Y Y Y Y 15 / 2018					
City Fox Point	WI	53217-2939	Transaction ID : 2018071319136-853 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 ▼ 2912.00	]					
Full Name of Individual (Last, First, Middle C. Grogan, John, M, ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 7860 N Club Cir			07 / D D / Y Y Y Y 2018					
City Fox Point	State WI	Zip Code 53217-2939	Transaction ID : 2018073119173-849Amount 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 ▼ 2912.00	]					
SUBTOTAL of Receipts This Page (optional	)		541.00					
TOTAL This Period (last page this line num	ber only)							

### Use separate schedule(s)

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			Use separate schedule(s)		(check only one)						
	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 Stat for commercial purposes, other than using the n				for the		oose of	soliciting	, cont	tributio	ons
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PAC	)							
A.	Full Name of Individual (Last, First, Middle Initial Gross, Stephen, , ,	) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address 6 Twin Springs Ln				м м 07	/	D D 15	/ Y	۲ 201	18	ſ
	City Saint Louis	State MO	Zip Code 63124-1139				-	<b>2018071</b> eceipt th			
	FEC ID number of contributing federal political committee.	С						 		208.00	)
	Name of Employer (for Individual) Self-Employed		upation (for Individual) Jeral Insurance Agent		Me	emo	Item				
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 2082.00								
в.	Full Name of Individual (Last, First, Middle Initial Gross, Stephen, , , Mailing Address 6 Twin Springs Ln	rganization Name	_	Date of	Re	D D	/ Y				
	City Saint Louis	State MO     Zip Code 63124-1139       C       Occupation (for Individual) General Insurance Agent			07         31         2018           Transaction ID : 2018073119136-34         Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.				208.00						
	Name of Employer (for Individual) Self-Employed				Me	emo	Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2082.00								
С.	Full Name of Individual (Last, First, Middle Initial Guay, Thomas, C, ,	) or Full Or	rganization Name		Date of	Re	ceipt				
	Mailing Address W73N377 Mulberry Ave				<sup>M</sup> 07	1	D D D 15	/ Y	201	18	
	City Cedarburg	State WI	Zip Code 53012-2648					2018071 eceipt th			5
NML		С			<u> </u>		y 1	. y		88.00	)
			upation (for Individual) Risk Selection Strat		M	emc	tem				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1232.00								
s	UBTOTAL of Receipts This Page (optional)		•••••	-			,	. ,	Ę	504.00	)
т	OTAL This Period (last page this line number on	ly)	•	-			<b>,</b> .				

### Use separate schedule(s)

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		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a		11b	11c	12	47	
Any information copied from such Reports and or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full)	·								
The Northwestern Mutual Lif	e Insurance	Company Federal PA	С						
Full Name of Individual (Last, First, Middle Guay, Thomas, C, ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address W73N377 Mulberry Ave			м 07	M /	31	) / Y	ү ү 2018	Y	
City Cedarburg	State WI	Zip Code 53012-2648				2018073 Receipt th	119173-5 is Period	42	
FEC ID number of contributing federal political committee.	С						88.0	00	
Name of Employer (for Individual) NML		upation (for Individual) Risk Selection Strat		Memo	o Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1232.00	]						
Full Name of Individual (Last, First, Middle B. Guinan, Stephen, T, ,	e Initial) or Full O	rganization Name	Data	of De					
Mailing Address 126 Waverly Cir			Date 0		15	) / Y	2018	Y	
City	State	Zip Code	Tran	sact	ion ID :	2018071	519136-28	3	
Phoenixville	PA	19460-2500	Amou	nt of	Each R	Receipt th	is Period		
FEC ID number of contributing federal political committee.	C				-y 1		42.0	00	
Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent			o Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00	]						
Full Name of Individual (Last, First, Middle C. Guinan, Stephen, T, ,	e Initial) or Full O	rganization Name	Date	of Re	eceipt				
Mailing Address 126 Waverly Cir			M 07		31	) / Y	y y 2018	Y	
City Phoenixville	State PA	Zip Code 19460-2500					119136-2 is Period	8	
FEC ID number of contributing federal political committee.	С				9	y	42.0	00	
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 ▼ 588.00	]						
SUBTOTAL of Receipts This Page (optiona	I)				, .		172.0	00	
TOTAL This Period (last page this line num	ber only)				<del>.</del>	. <del>.</del>			

#### Image# 201808139119601473

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

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			Use separate schedule(s)	(check only one)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         □	17				
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PA	C					
Α.	Full Name of Individual (Last, First, Middle Initi Hanson, Paul, L, ,	al) or Full O	Drganization Name	Date of Receipt					
	Mailing Address 261 Moser St			07 15 / Y Y Y Y 2018					
	City Moscow	State ID	Zip Code 83843-9264	Transaction ID : 2018071519136-30           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.00					
	Name of Employer (for Individual) Self-Employed		supation (for Individual) neral Insurance Agent	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼ 588.00	]					
В.	Full Name of Individual (Last, First, Middle Initi Hanson, Paul, J, , Mailing Address N38W23333 Broken Hill Cir S	al) or Full O	Drganization Name	Date of Receipt					
	City	State	Zip Code	07 15 2018 Transaction ID : 2018071319136-883					
	Pewaukee	WI	53072-2764	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		23.00					
	Name of Employer (for Individual) NML		cupation (for Individual) naging Director	Memo Item					
	Receipt For:	Aggregate	Year-to-Date ▼ 322.00						
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Hanson, Paul, J, ,	al) or Full O	Drganization Name	Date of Receipt					
	Mailing Address N38W23333 Broken Hill Cir S			07 / D D / Y Y Y Y 2018					
	City Pewaukee	State WI	Zip Code 53072-2764	Transaction ID : 2018073119173-879           Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		23.00					
Name of Employer (for Individual) NML		Man	supation (for Individual) naging Director	Memo Item					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 322.00	1					
F	UBTOTAL of Receipts This Page (optional)		, , , , , , , , , , , , , , , , , , ,	88.00					

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FOR LINE NUMBER:

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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	atements may not be sold or used by any p name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance Company Federal PA	C
Full Name of Individual (Last, First, Middle Initi         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) ▼	al) or Full Organization Name          State       Zip Code         ID       83843-9264         C       Occupation (for Individual)         General Insurance Agent         Aggregate Year-to-Date ▼         588.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi         B.       Heidenreich, Wayne, F, , md         Mailing Address 4753 N Larkin St         City         Whitefish Bay         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       53211-1152         C       Occupation (for Individual)         Vp Medical       Vp Medical         Aggregate Year-to-Date ▼       280.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initi         Heidenreich, Wayne, F, , md         Mailing Address 4753 N Larkin St         City         Whitefish Bay         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       53211-1152         C       Occupation (for Individual)         Vp Medical       Aggregate Year-to-Date ▼         280.00       280.00	Date of Receipt 07 31 2018 Transaction ID : 2018073119173-850 Amount of Each Receipt this Period 20.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		82.00

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FOR LINE NUMBER:

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IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\checkmark$ 11a       11b       11c       12         13       14       15       16       17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the n	tements may ame and ac	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PAC	)
Α.	Full Name of Individual (Last, First, Middle Initia Hempstead, Gerard, M, , Mailing Address 49 W Walling Dr	State	Zip Code	Date of Receipt 07 / 15 / 2018 Transaction ID : 2018071519136-46
	Creve Coeur FEC ID number of contributing federal political committee.	С	63141-7371	Amount of Each Receipt this Period
	Name of Employer (for Individual) Self-Employed Receipt For:	Gene	pation (for Individual) eral Insurance Agent Year-to-Date ▼ 1750.00	Memo Item
в.	Full Name of Individual (Last, First, Middle Initia Hempstead, Gerard, M, , Mailing Address 49 W Walling Dr City	I) or Full Or	Zip Code	Date of Receipt
	Creve Coeur FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed	MO C Occu	63141-7371	Transaction ID : 2018073119136-46         Amount of Each Receipt this Period         125.00         Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1750.00	
C.	Full Name of Individual (Last, First, Middle Initia Heurung, Mark, J, , Mailing Address 3315 Graham Hill Rd	I) or Full Or	ganization Name	Date of Receipt
	City Orono	State MN	Zip Code 55356-5501	Transaction ID : 2018071519136-27           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer (for Individual) Self-Employed Receipt For: Primary General Other (specify)	Gene	pation (for Individual) eral Insurance Agent Year-to-Date ▼ 2912.00	Memo Item
	UBTOTAL of Receipts This Page (optional)		F	458.00
Т	OTAL This Period (last page this line number on	ly)	••••••	

### Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17					
Any information copied from such Reports and or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)			person for the purpose of soliciting contributions					
The Northwestern Mutual Life	Insurance	Company Federal PA	С					
Full Name of Individual (Last, First, Middle A. Heurung, Mark, J, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 3315 Graham Hill Rd			07 31 2018					
City Orono	State MN	Zip Code 55356-5501	Transaction ID : 2018073119136-27 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 ▼ 2912.00	]					
Full Name of Individual (Last, First, Middle   B. Hick, Laila, V, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10315 W Sunset Ave			07 / D D / Y Y Y Y 2018					
City Wauwatosa	State WI	Zip Code 53222-2350	Transaction ID : 2018071319136-846 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) Transformation	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00	]					
Full Name of Individual (Last, First, Middle C. Hick, Laila, V, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 10315 W Sunset Ave			07 31 2018					
City Wauwatosa	State WI	Zip Code 53222-2350	Transaction ID : 2018073119173-842 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) Transformation	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	]					
SUBTOTAL of Receipts This Page (optional).			248.00					
TOTAL This Period (last page this line number	er only)							

FOR LINE NUMBER:

PAGE 46 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	y information copied from such Reports and Sta for commercial purposes, other than using the r	tements ma	y not be sold or used by any poddress of any political committee	erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	
Full Name of Individual (Last, First, Middle In Holter, Steve, H, , Mailing Address 11390 N Creekside Ct		_	-	Date of Receipt
	City Mequon	State WI	Zip Code 53092-4377	Transaction ID : 2018071519136-37
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	
в.	Full Name of Individual (Last, First, Middle Initia Holter, Steve, H, ,	al) or Full Oi	rganization Name	Date of Receipt
	Mailing Address 11390 N Creekside Ct	07 / 07 / 07 / 07 / 07 / 07 / 07 / 07 /		
	City Mequon	State WI	Zip Code 53092-4377	Transaction ID : 2018073119136-37 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 ▼ 2912.00	
С.	Full Name of Individual (Last, First, Middle Initia Iodice, Scott, , ,	al) or Full O	rganization Name	Date of Receipt
	Mailing Address 1930 Old Court Rd		- 1	07 / D D / Y Y Y Y Y 2018
	City Ruxton	State MD	Zip Code 21204-1849	Transaction ID : 2018071519136-10         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:	Gene	pation (for Individual) eral Insurance Agent	Memo Item
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2082.00	
s	UBTOTAL of Receipts This Page (optional)			624.00
т	OTAL This Period (last page this line number or	וy)	••••••	

### Use separate schedule(s)

FOR LINE NUMBER:

PAGE 47 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements mand and a	ay 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 Full) The Northwestern Mutual Lit	fe Insurance	Company Federal PA	C
Full Name of Individual (Last, First, Midd         Iodice, Scott, , ,         Mailing Address 1930 Old Court Rd         City         Ruxton         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Self-Employed         Receipt For:         Other (specify) ▼	State MD C Ger	Drganization Name Zip Code 21204-1849 upation (for Individual) heral Insurance Agent Year-to-Date ▼ 2082.00	Date of Receipt
Full Name of Individual (Last, First, Midd         B. Jahnke, Nicholas, E, ,         Mailing Address 23702 Champe Ford Rd         City         Middleburg         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify)	State VA C	Zip Code 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-2940 20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20117-20110-20117-2010-20117-2010-20110-2010-20	Date of Receipt
Full Name of Individual (Last, First, Midd         Jahnke, Nicholas, E, ,         Mailing Address 23702 Champe Ford Rd         City         Middleburg         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify)	State VA C Occ Reg	Drganization Name Zip Code 20117-2940 upation (for Individual) jonal Director Year-to-Date ▼ 518.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional			282.00
TOTAL This Period (last page this line nur	nber only)		

### Use separate schedule(s)

FOR LINE NUMBER:

PAGE 48 OF

	-	Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17									
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	the name and a	ddress of any political committe	e to solicit contributions from such committee.									
Full Name of Individual (Last, First, Middle Jansky, Meg, E, , Mailing Address 4611 N Wildwood Ave	Initial) or Full O	rganization Name	Date of Receipt									
City Whitefish Bay	State WI	Zip Code 53211-1123	07         15         2018           Transaction ID : 2018071319136-792           Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		45.00									
Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	Vp I	upation (for Individual) Field Integration Year-to-Date ▼ 630.00	Memo Item									
Full Name of Individual (Last, First, Middle B. Jansky, Meg, E, , Mailing Address 4611 N Wildwood Ave	Initial) or Full O	rganization Name	Date of Receipt									
City Whitefish Bay	State WI	Zip Code 53211-1123	Transaction ID : 2018073119173-788 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 ▼ 630,00	]									
Full Name of Individual (Last, First, Middle C. Jessup, Mark, T, ,	Initial) or Full O	rganization Name	Date of Receipt									
Mailing Address 1301 Chickadee Ln	State	Zip Code	07 / 15 / 2018 Transaction ID : 2018071319136-551									
Grafton	WI	53024-9593	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		17.00									
Name of Employer (for Individual) NML Receipt For:	Dire	upation (for Individual) ctor Engineering	Memo Item									
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00	]									
SUBTOTAL of Receipts This Page (optional)			107.00									
TOTAL This Period (last page this line numb	er only)											

#### SCHEDULE A (FEC Form 3X) DEAEIDTA

## Use separate schedule(s)

FOR LINE NUMBER:

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TEMIZED 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	d Statements ma the name and a	A ay not be sold or used by any p ddress of any political committe	erson 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 Jessup, Mark, T, ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1301 Chickadee Ln			07 / D D / Y Y Y Y Y 2018									
City Grafton	State WI	Zip Code 53024-9593	Transaction ID : 2018073119173-548 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		17.00									
Name of Employer (for Individual)		upation (for Individual) ctor Engineering	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00	]									
Full Name of Individual (Last, First, Middle <b>3. Joelson, Ronald, P</b> , ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1918 E Lafayette Pl			07 / D D / Y Y Y Y Y 2018									
City Milwaukee	State WI	Zip Code 53202-1395	Transaction ID : 2018071319136-448 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		200.00									
Name of Employer (for Individual) NML		upation (for Individual) & Cio	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2800.00	]									
Full Name of Individual (Last, First, Middle Joelson, Ronald, P, ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 1918 E Lafayette Pl			07 31 2018									
City Milwaukee	State WI	Zip Code 53202-1395	Transaction ID : 2018073119173-446 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		200.00									
Name of Employer (for Individual) NML		upation (for Individual) & Cio	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2800.00	]									
SUBTOTAL of Receipts This Page (optional)			417.00									
TOTAL This Period (last page this line numb	er only)											

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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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 St for commercial purposes, other than using the			rson for the purpose of soliciting contributions									
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	, ,									
<b>A</b> .	Full Name of Individual (Last, First, Middle Initi Jones, Todd, M, ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address W252N4956 Aberdeen Dr			07 15 2018									
	City Pewaukee	State WI	Zip Code 53072-1351	Transaction ID : 2018071319136-667 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		118.00									
	Name of Employer (for Individual) NML		upation (for Individual) e President-Cntrl	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1652.00										
в.	Full Name of Individual (Last, First, Middle Initi Jones, Todd, M, ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address W252N4956 Aberdeen Dr			07 31 Y Y Y Y 07 31 2018									
	City Pewaukee	State WI	Zip Code 53072-1351	Transaction ID : 2018073119173-663 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		118.00									
	Name of Employer (for Individual) NML		upation (for Individual) e President-Cntrl	Memo Item									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1652.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Kelley, Shawn, F, ,	al) or Full C	Organization Name	Date of Receipt									
	Mailing Address 7812 Remington Rd			07 15 2018									
	City Montgomery	State OH	Zip Code 45242-7130	Transaction ID : 2018071519136-52 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 ▼ 1750.00										
s	UBTOTAL of Receipts This Page (optional)			361.00									
т	OTAL This Period (last page this line number of	only)	•••••										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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		Use separate schedule(s)		(	(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		¥ 11a 13		11b 14	11c		12 16	17		
	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	name and a	address of any political committe	e to	n for the		pose of	solicitin	ig cor	ntributi	ons		
Α.	Full Name of Individual (Last, First, Middle Initi Kelley, Shawn, F, , Mailing Address 7812 Remington Rd	Drganization Name		Date o	of Re	eceipt	, , ,	Y Y	Ý	Y			
	City Montgomery	State Zip Code OH 45242-7130						<b>201807</b> Receipt t	31191		2		
	FEC ID number of contributing federal political committee.	С								125.0	0		
	Name of Employer (for Individual) Self-Employed Receipt For: Primary General	Ger	eupation (for Individual) neral Insurance Agent Year-to-Date ▼		Μ	lemo	ttem						
_	Under (specify) ▼ Full Name of Individual (Last, First, Middle Initi	al) or Full O	1750.00 Drganization Name										
В.	Kemelgor, Troy, B, , Mailing Address 7495 Bridlespur Ln						eceipt 15	) / Y	20	, 18	Y		
	City Delaware	State OH	Zip Code 43015-8613	+				<b>201807</b> Receipt t					
	FEC ID number of contributing federal political committee.	С			42.00								
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			Μ	lemo	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	• Year-to-Date ▼ , 588.00										
с.	Full Name of Individual (Last, First, Middle Initi Kemelgor, Troy, B, ,	al) or Full O	Drganization Name		Date o	of Re	eceipt						
	Mailing Address 7495 Bridlespur Ln				07	/	31		20	)18			
	City Delaware	State OH	Zip Code 43015-8613					<b>201807</b> Receipt t			3		
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, , , , , , , , , , , , , , , , , , ,	_	42.0	0		
Name of Employer (for Individual) Self-Employed Receipt For:			cupation (for Individual) neral Insurance Agent		N	lemo	tem Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00										
s	UBTOTAL of Receipts This Page (optional)				[.		,	,	-	209.0	0		
т	OTAL This Period (last page this line number o	only)					-						

## Use separate schedule(s)

FOR LINE NUMBER:

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171			Use separate schedule(s)			(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page	3	<b>K</b> 11a 13		11b 14	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	contribu	tions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In:	surance	Company Federal PA	С										
A.	Full Name of Individual (Last, First, Middle Initia Kendler, Martha, M, ,	al) or Full O	rganization Name		Date of	Re	eceipt							
	Mailing Address 1775 Village Green Ct # C				07 31 2018									
	City Elm Grove	State WI	Zip Code 53122-1164	_				2018073 Receipt th		55				
	FEC ID number of contributing federal political committee.	С							20.	00				
	Name of Employer (for Individual)		upation (for Individual) Business & Adv Market		Me	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	]											
в.	Full Name of Individual (Last, First, Middle Initia Kiecker, David, Daniel, ,	al) or Full O	rganization Name		Date of	Re	eceipt							
	Mailing Address 11696 Approach Blvd	1		07 / D D / Y Y Y Y 2018										
	City Fishers	State IN	Zip Code 46037-4146	-				2018071		1				
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period									
	Name of Employer (for Individual) Self-Employed		upation (for Individual) Ieral Insurance Agent		Me	emc	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]										
С.	Full Name of Individual (Last, First, Middle Initia Kiecker, David, Daniel, ,	al) or Full O	rganization Name		Date of	Re	eceipt							
	Mailing Address 11696 Approach Blvd				07	/	31	) / Y	2018	Y				
	City Fishers	State IN	Zip Code 46037-4146					2018073 Receipt th		1				
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	. ,	208.	00				
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				emo	tem							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00	]										
s	UBTOTAL of Receipts This Page (optional)			•			, ,	.,	436.	00				
т	OTAL This Period (last page this line number o	nly)		•			-	4						

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

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			Use separate schedule(s)		(check only one)									
	EMIZED RECEIPTS	for each category of the Detailed Summary Page			11a	1	l1b	11c		12				
					13		4	15		16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r													
	NAME OF COMMITTEE (In Full)													
	The Northwestern Mutual Life Ins	surance	Company Federal PAC	2										
Α.	Full Name of Individual (Last, First, Middle Initia Koch, William, S, ,	l) or Full O	rganization Name	D	ate of	Rece	eipt							
	Mailing Address 4645 Swilcan Bridge Ln S			07 15 2018										
	City	State	Zip Code	Transaction ID : 2018071519136-3										
	Jacksonville	FL	32224-5621	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			_					125.0	0			
	Name of Employer (for Individual)	Occi	upation (for Individual)	7 E	Me	mo l	ltem							
	Self-Employed	Gen	neral Insurance Agent	_										
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Other (specify) V		1750.00											
D	Full Name of Individual (Last, First, Middle Initia Koch, William, S, ,	l) or Full O	rganization Name		oto of	Page	oint							
D.	Mailing Address 4645 Swilcan Bridge Ln S				ate of	Rece			vv	Y	V			
	Maning Address 4645 Switcan Bruge Lins		07 31 2018											
	City	State	Zip Code 32224-5621					20180						
	Jacksonville	FL	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С	125.00											
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			Me	emo I	ltem							
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼													
			, 1750.00											
с.	Full Name of Individual (Last, First, Middle Initia Kolawole, Abimbola, O, ,	l) or Full O	rganization Name	D	ate of	Rece	eipt							
	Mailing Address 4801 N Woodburn St			Т	07	/	D 15			) 18	Y			
	City	State	Zip Code		Transa	actio	n ID :	20180	71319	136-44	15			
	Whitefish Bay	WI	53217-6064	A	nount	of E	ach F	Receipt	this F	Period				
	FEC ID number of contributing federal political committee.	С				,		,	_	43.0	0			
Name of Employer (for Individual) NML			upation (for Individual) Policy Benefits		Me	emo	ltem							
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		434.00											
_														
s	UBTOTAL of Receipts This Page (optional)		•			,		,		293.0	0			
т	OTAL This Period (last page this line number or	ıly)		Γ										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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			(check only one)								
11	EMIZED RECEIPTS		<b>×</b> 11a 13		11b 14	11c		12 16	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	name and a	ddress of any political committee	to solicit c							
Α.	Full Name of Individual (Last, First, Middle Initi Kolawole, Abimbola, O, , Mailing Address 4801 N Woodburn St	rganization Name	Date		eceipt	р / ү	20 <sup>,</sup>	Y 10	ſ		
	City Whitefish Bay	State WI	Zip Code 53217-6064	Trar		tion ID :	<b>201807</b> 3 Receipt th	31191	73-44	3	
	FEC ID number of contributing federal political committee.	С				-y	і. 1 ур.	_	43.00	)	
	Name of Employer (for Individual)         NML         Receipt For:         Primary       General         Other (specify) ▼	Vp F	upation (for Individual) Policy Benefits Year-to-Date ▼ 434.00		Vemo	o Item					
в.	Full Name of Individual (Last, First, Middle Initi Konopa, Kevin, J, , Mailing Address 2331 N 90th St	al) or Full O	rganization Name	Date	M /	eceipt 31	) / Y		Y		
	City Wauwatosa	State WI	Zip Code 53226-1828	Tran	sact	ion ID :	<b>2018073</b> Receipt th		73-81	4	
	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 Distribution Strategy			Memo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ , 210.00								
с.	Full Name of Individual (Last, First, Middle Initi Kosnick, Joshua, Steven, ,	al) or Full O	rganization Name	Date	of Re	eceipt					
	Mailing Address 5051 Augusta Dr			07 / D D / Y Y Y Y 2018							
	City Middleton	State WI	Zip Code 53597-8813				<b>201807</b> Receipt th				
	FEC ID number of contributing federal political committee.	С				y	9		42.0	)	
	Name of Employer (for Individual) Self-Employed Receipt For:	Occu Gen		Mem	o Item						
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00								
s	UBTOTAL of Receipts This Page (optional)		•••••			,	. ,		100.00	)	
т	OTAL This Period (last page this line number of	only)				47	-				

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 55 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
			13     14     15     16     1       person for the purpose of soliciting contributions       e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	с								
Full Name of Individual (Last, First, Mid Kosnick, Joshua, Steven, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kosnick, Joshua, Steven, ,										
Mailing Address 5051 Augusta Dr			07 31 2018								
City Middleton	State WI	Zip Code 53597-8813	Transaction ID : 2018073119136-72 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 ▼ 588.00	1								
Full Name of Individual (Last, First, Mid B. Kracht, Carol, L, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kracht, Carol, L.										
Mailing Address 1610 N Prospect Ave			07 15 2018								
City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2018071319136-803 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С										
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 ▼ 644.00	1								
Full Name of Individual (Last, First, Mid C. Kracht, Carol, L, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1610 N Prospect Ave											
City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2018073119173-799 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 ▼ 644.00	1								
SUBTOTAL of Receipts This Page (option	nal)		134.00								
TOTAL This Period (last page this line nu	mber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I LIVILLED RECEIPIO		for each category of the Detailed Summary Page	<b>X</b> 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. Kramer, Ryan, , ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 665 S Euclid Ave			07 15 / Y Y Y Y 07 15 2018								
City Elmhurst	State IL	Zip Code 60126-4337	Transaction ID : 2018071519136-54 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 ▼ 2912.00	]								
Full Name of Individual (Last, First, Middle B. Kramer, Ryan, , , Mailing Address 665 S Euclid Ave	•										
City	State	Zip Code									
Elmhurst	IL	60126-4337	Transaction ID : 2018073119136-54 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 ▼ 2912.00	]								
Full Name of Individual (Last, First, Middle C. Lawhon, M, Kevin, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 2430 Vanderbilt Beach Ro Unit 108-349			07 / D D / Y Y Y Y 07 15 / 2018								
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2018071519136-41           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Self-Employed G		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2082.00	]								
SUBTOTAL of Receipts This Page (optional	)		624.00								
TOTAL This Period (last page this line num	ber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         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)		Company Fodorol DA										
The Northwestern Mutual Life	Insurance	Company Federal PA										
Full Name of Individual (Last, First, Middle Lawhon, M, Kevin, ,	Initial) or Full C	rganization Name	Date of Receipt									
Mailing Address 2430 Vanderbilt Beach Rd Unit 108-349			M M / D D / Y Y Y Y 07 31 2018									
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2018073119136-41 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2082.00	]									
Full Name of Individual (Last, First, Middle <b>B. Leslie, Daniel, J</b> , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name											
Mailing Address 3626 W River Ridge Ct			Date of Receipt 07 15 2018									
City Mequon	State WI	Zip Code 53092-2754	Transaction ID : 2018071319136-477 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) st Regional Director	Memo Item									
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		, 280.00	]									
Full Name of Individual (Last, First, Middle C. Leslie, Daniel, J, ,	Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 3626 W River Ridge Ct			07 31 / Y Y Y Y 2018									
City Mequon	State WI	Zip Code 53092-2754	Transaction ID : 2018073119173-475 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) t Regional Director	Memo Item									
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	]									
SUBTOTAL of Receipts This Page (optional)			248.00									
TOTAL This Period (last page this line numb	er only)											

### Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	★         11a         11b         11c         12           13         14         15         16         17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
The Northwestern Mutual I	ife Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Mid A. Lueder, Matthew, James, ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 2359 N Wahl Ave			07 15 2018								
City Milwaukee	State WI	Zip Code 53211-4513	Transaction ID : 2018071519136-59 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 ▼ 1750.00	]								
Full Name of Individual (Last, First, Mid B. Lueder, Matthew, James, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lueder, Matthew, James,										
Mailing Address 2359 N Wahl Ave			07 / D D / Y Y Y Y Y 2018								
City Milwaukee	State	Zip Code 53211-4513	Transaction ID : 2018073119136-59 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 ▼ 1750.00	]								
Full Name of Individual (Last, First, Mid C. Lueken, Jeffrey, J, ,	ddle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1213 E Goodrich Ln			M         M         /         D         D         /         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y         Y								
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID : 2018071319136-743           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		168.00								
Name of Employer (for Individual) NML		upation (for Individual) Securities	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2352.00	]								
SUBTOTAL of Receipts This Page (optic	nal)		418.00								
TOTAL This Period (last page this line n	umber only)										

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

### Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
			6								
The Northwestern Mutual Life	e insurance	Company Federal PA									
Full Name of Individual (Last, First, Middle Lueken, Jeffrey, J, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 1213 E Goodrich Ln			M M / D D / Y Y Y Y Y 07 31 2018								
City Fox Point	State WI	Zip Code 53217-2946	Transaction ID : 2018073119173-739 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		168.00								
Name of Employer (for Individual) NML		upation (for Individual) Securities	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2352.00	]								
Full Name of Individual (Last, First, Middle B. Lyons, Stephanie, A, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name										
Mailing Address 809 E Sylvan Ave			Date of Receipt								
City Whitefish Bay	State WI	Zip Code 53217-5353	Transaction ID : 2018071319136-619								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) NML		upation (for Individual) - Era	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 778.00	]								
Full Name of Individual (Last, First, Middle C. Lyons, Stephanie, A, ,	e Initial) or Full C	rganization Name	Date of Receipt								
Mailing Address 809 E Sylvan Ave			07 31 2018								
City Whitefish Bay	State WI	Zip Code 53217-5353	Transaction ID : 2018073119173-616 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		77.00								
Name of Employer (for Individual) NML	Occ Vp -	upation (for Individual) Era	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 778.00	]								
SUBTOTAL of Receipts This Page (optional)	)		322.00								
TOTAL This Period (last page this line num	per only)	······									

### Use separate schedule(s)

FOR LINE NUMBER:

PAGE 60 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 State or for commercial purposes, other than using the na	ements may not be sold or used by any pe ame and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	urance Company Federal PAC	
Full Name of Individual (Last, First, Middle Initial)         A.       Mahaffey, Cory, A, ,         Mailing Address 13764 Knaus Rd         City         Lake Oswego         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         Self-Employed         Receipt For:         Primary         General         Other (specify) ▼	) or Full Organization Name State Zip Code OR 97034-2175 C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 1750.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial)         B. Mahaffey, Cory, A, ,         Mailing Address 13764 Knaus Rd         City         Lake Oswego         FEC ID number of contributing federal political committee.         Name of Employer (for Individual) Self-Employed         Receipt For:         Primary       General         Other (specify) ▼	) or Full Organization Name State Zip Code OR 97034-2175 C Occupation (for Individual) General Insurance Agent Aggregate Year-to-Date ▼ 1750.00	Date of Receipt
Full Name of Individual (Last, First, Middle Initial)         C.       Manista, Raymond, J, ,         Mailing Address       7236 N Crossway Rd         City       Fox Point         FEC ID number of contributing federal political committee.         Name of Employer (for Individual)         NML         Receipt For:       /         Other (specify)       /	) or Full Organization Name State Zip Code WI 53217-3519 C Occupation (for Individual) Evp Chief Legal Off & Sec Aggregate Year-to-Date ▼ 2912.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		458.00

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

(check only one)

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TTEMIZED 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 to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	ife Insurance	Company Federal PA	0								
Full Name of Individual (Last, First, Mide A. Manista, Raymond, J, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Manista, Raymond, J, ,										
Mailing Address 7236 N Crossway Rd			07 31 / Y Y Y Y 07 31 2018								
City Fox Point	State WI	Zip Code 53217-3519	Transaction ID : 2018073119173-480 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 ▼ 2912.00									
Full Name of Individual (Last, First, Mide B. Mannebach, Steven, C, ,	Date of Receipt										
Mailing Address 101 Colorado St # 260			07 / D D / Y Y Y Y 2018								
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2018071319136-572 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		118.00								
Name of Employer (for Individual) NML		upation (for Individual) naging Partner	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1652.00									
Full Name of Individual (Last, First, Mide . Mannebach, Steven, C, ,	dle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 101 Colorado St # 260			07 / D D / Y Y Y Y 2018								
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2018073119173-569           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) aging Partner	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1652.00	1								
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu			444.00								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         17								
	y information copied from such Reports and Sta for commercial purposes, other than using the			rson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Inst	surance	Company Federal PAC									
<u>к</u>	Full Name of Individual (Last, First, Middle Initia Marks, Jeffrey, S, ,	Date of Receipt										
	Mailing Address 8232 S Country Club Cir			07 / D D / Y Y Y Y Y 07 15 2018								
	City Franklin	State WI	Zip Code 53132-8532	Transaction ID : 2018071319136-499 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		21.00								
	Name of Employer (for Individual) NML		upation (for Individual) Dir Uw Standards	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.00									
в.	Full Name of Individual (Last, First, Middle Initia Marks, Jeffrey, S, ,	Date of Receipt										
	Mailing Address 8232 S Country Club Cir			07 31 2018								
	City Franklin	State WI	Zip Code 53132-8532	Transaction ID : 2018073119173-497 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		21.00								
	Name of Employer (for Individual) NML		upation (for Individual) Dir Uw Standards	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 294.00									
с.	Full Name of Individual (Last, First, Middle Initia McClure, Brian, W, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McClure, Brian, W, ,										
	Mailing Address 1402 Wyndemere Point Dr	07 / 15 / Y Y Y Y 2018										
	City Champaign	State IL	Zip Code 61822-3349	Transaction ID : 2018071519136-57 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		42.00								
Self-Employed Ge			upation (for Individual) Ieral Insurance Agent	Memo Item								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00									
	UBTOTAL of Receipts This Page (optional)			84.00								

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

(check only one)

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				Detailed Summary Page		<b>(</b> 11			11b		11c		2			
Δn	y information copied from such Reports and SI	atemente m		not be sold or used by any n	erson	for		nur	14		15		6 ributi	17 ions		
	for commercial purposes, other than using the															
$\backslash$	NAME OF COMMITTEE (In Full)		~		~											
	The Northwestern Mutual Life In															
Δ	Full Name of Individual (Last, First, Middle Init McClure, Brian, W, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McClure Brian W						Date of Receipt								
	Mailing Address 1402 Wyndemere Point Dr						- M	_	D	D	/ Y	Y	Y	Y		
						07 31 2018										
	City Champaign	State IL		Zip Code 61822-3349							018073			7		
			_	_ Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.				42.00											
	Name of Employer (for Individual)	Occ	cupa	tion (for Individual)			M	emo	ltem							
	Self-Employed	Ger	nera	I Insurance Agent												
	Receipt For:	Aggregate	Yea	ar-to-Date <b>V</b>												
	Other (specify) ▼		-	588.00												
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McLennon, Mark, J, ,								eceipt							
	Mailing Address 2571 N 86th St							07 15 2018								
	City	State		Zip Code	ip Code Transaction ID : 201807								36-51	0		
	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 Individual) NML		Occupation (for Individual) Vp Ips Bus Dev					Memo Item								
	Receipt For:	Aggregate Year-to-Date ▼														
	Other (specify) ▼		<b>,</b>	588.00												
с.	Full Name of Individual (Last, First, Middle Init McLennon, Mark, J, ,	ial) or Full C	Drga	nization Name		Dat	e of	<sup>r</sup> Re	eceipt							
	Mailing Address 2571 N 86th St					07 31 2018										
	City	State		Zip Code					-		2018073	-		08		
	Wauwatosa	WI		53226-1921		Am	ount	t of	Each	Re	ceipt th	nis Per	riod			
	FEC ID number of contributing federal political committee.	C				42.00								0		
	Name of Employer (for Individual)	Occupation (for Individual)						emo	b Item	I						
	NML	Vp I	lps E	Bus Dev												
	Receipt For:	Aggregate	Yea	ar-to-Date <b>V</b>												
	Other (specify)		-	588.00												
s	UBTOTAL of Receipts This Page (optional)				<u> </u>				9			1	26.0	0		
т	OTAL This Period (last page this line number of	only)			•				-				-			

### Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\checkmark$ 11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	nents may not be sold or used by any pe e and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insur	ance Company Federal PAC	2
Elmhurst I FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed Receipt For:	State Zip Code L 60126-3228	Date of Receipt
Elmhurst FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-Employed	State Zip Code IL 60126-3228	Date of Receipt
Hinsdale FEC ID number of contributing federal political committee.	State Zip Code IL 60521-4603	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		516.00

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	K       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			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	C
Full Name of Individual (Last, First, Middle Init         A.       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	State IL Occu Chie	rganization Name Zip Code 60521-4603 upation (for Individual) of Distribution Adv Year-to-Date ▼	Date of Receipt
Other (specify)		1400.00	
Full Name of Individual (Last, First, Middle Init         B.       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) ▼	State WI C Occu Dire	Zip Code 53012-2266	Date of Receipt
Full Name of Individual (Last, First, Middle Init C. 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)	State WI C Occu Direct	Zip Code 53012-2266	Date of Receipt 07 / 31 / 2018 Transaction ID : 2018073119173-482 Amount of Each Receipt this Period 19.00 Memo Item
SUBTOTAL of Receipts This Page (optional)			138.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 66 OF

IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)         X       11a         11b       11c         12         13       14         15       16         17						
	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			e to solicit contributions from such committee.						
	The Northwestern Mutual Life In	surance	Company Federal PA	С						
Α.	Full Name of Individual (Last, First, Middle Init Meeks, Jim, Edward, , JR	ial) or Full O	organization Name	Date of Receipt						
	Mailing Address 264 Cloister Green Ln			07 15 2018						
	City Memphis	State TN	Zip Code 38120-2357	Transaction ID : 2018071519136-9 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 ▼ 1750.00	]						
в.	Full Name of Individual (Last, First, Middle Init Meeks, Jim, Edward, , JR	ial) or Full O	organization Name	Date of Receipt						
Mailing Address 264 Cloister Green Ln				07 31 Y Y Y Y Y 07 31 2018						
	City Memphis	State TN	Zip Code 38120-2357	Transaction ID : 2018073119136-9						
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period						
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item						
Possipt For:			Year-to-Date ▼ 1750.00	]						
с.	Full Name of Individual (Last, First, Middle Init Mees, Arthur, J, , JR	ial) or Full O	organization Name	Date of Receipt						
	Mailing Address 5347 N Hollywood Ave			07 / D D / Y Y Y Y 2018						
	City Whitefish Bay	State WI	Zip Code 53217-5324	Transaction ID : 2018071319136-901           Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		36.00						
			upation (for Individual) Distribution Performance	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 504.00	]						
$\vdash$	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of			286.00						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 67 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
II EIVIIZED RECEIPIO		for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1								
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С								
Full Name of Individual (Last, First, Mid Mees, Arthur, J, , JR	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5347 N Hollywood Ave			07 31 2018								
City Whitefish Bay	State WI	Zip Code 53217-5324	Transaction ID : 2018073119173-897 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 ▼ 504.00	]								
Full Name of Individual (Last, First, Mid B. Miller, Aaron, , ,	Idle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 82 Worcester St Apt 1			07 / D D / Y Y Y Y 2018								
City Boston	State MA	Zip Code 02118-3903	Transaction ID : 2018071519136-70 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) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00	]								
Full Name of Individual (Last, First, Mic C. Miller, Aaron, , ,	ldle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 82 Worcester St Apt 1			07 / D D / Y Y Y Y 2018								
City Boston	State MA	Zip Code 02118-3903	Transaction ID : 2018073119136-70 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) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00	1								
SUBTOTAL of Receipts This Page (option	nal)		120.00								
TOTAL This Period (last page this line n	umber only)										

## Use separate schedule(s)

FOR LINE NUMBER:

PAGE 68 OF

т			Use separate schedule(s)	(ch	(check only one)										
11			for each category of the Detailed Summary Page		<b>′</b> 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	, contribu	tions					
$\overline{)}$	NAME OF COMMITTEE (In Full)														
/	The Northwestern Mutual Life Ins	surance	Company Federal PAC	;											
A.	Full Name of Individual (Last, First, Middle Initia Miller, Ben, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt								
	Mailing Address 11315 E Winchcomb Dr				07 15 2018										
	City Scottsdale	State AZ	Zip Code 85255-1638						519136-4 iis Period						
	FEC ID number of contributing federal political committee.	С				01			125.						
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emc	ltem								
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00													
D	Full Name of Individual (Last, First, Middle Initia Miller, Ben, , ,	l) or Full Or	rganization Name		Data of	Po	opint								
р.	Mailing Address 11315 E Winchcomb Dr				Date of	ne	31	) / Y	ү 2018	Y					
	City Scottsdale	State AZ					Transaction ID : 2018073119136-45								
FEC ID number of contributing federal political committee.						Amount of Each Receipt this Period									
						emc	ltem								
Passint For:			Year-to-Date ▼ 1750.00												
<u> </u>	Full Name of Individual (Last, First, Middle Initia Miller, Joseph, , ,	l) or Full Or	rganization Name		Date of	Re	ceipt								
	Mailing Address N33W29207 Millridge Rd				м м 07	1	15		ү ү 2018	Y					
	City Pewaukee	State WI	Zip Code 53072-3264						<b>319136-6</b> iis Period						
FEC ID number of contributing federal political committee.					<u> </u>		,	,	15.	_					
Name of Employer (for Individual) NML			upation (for Individual) aging Director		Me	emo	tem								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 270.00												
s	UBTOTAL of Receipts This Page (optional)		•				, .	. ,	265.	00					
Т	OTAL This Period (last page this line number or	lly)	•	-											

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

(check only one)

PAGE 69 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Pag		✗         11a         11b         11c         12           13         14         15         16         17							
	y information copied from such Reports and St for commercial purposes, other than using the				on for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal	I PAC								
A.	Full Name of Individual (Last, First, Middle Initi Miller, Joseph, , ,	al) or Full C	Drganization Name		Date of Receipt							
	Mailing Address N33W29207 Millridge Rd				07 / D D / Y Y Y Y 2018							
	City Pewaukee	State WI	Zip Code 53072-3264		Transaction ID : 2018073119173-633 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			15.00							
	Name of Employer (for Individual) NML		cupation (for Individual) naging Director		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	P Year-to-Date ▼ 270.0	0								
В.	Full Name of Individual (Last, First, Middle Initi Miller, Kevin, E, ,	al) or Full C	Drganization Name		Date of Receipt							
	Mailing Address 214 Schenley Rd				07 15 2018							
	City Pittsburgh	State PA	Zip Code 15217-1171	Transaction ID : 2018071519136-26 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			208.00							
			cupation (for Individual) neral Insurance Agent		Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2912.0	00								
C.	Full Name of Individual (Last, First, Middle Initi Miller, Kevin, E, ,	al) or Full C	Drganization Name		Date of Receipt							
	Mailing Address 214 Schenley Rd				07 / D D / Y Y Y Y 2018							
	City Pittsburgh	State PA	Zip Code 15217-1171		Transaction ID : 2018073119136-26 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.					208.00							
	Name of Employer (for Individual) Self-Employed Receipt For:		cupation (for Individual) neral Insurance Agent		Memo Item							
	Primary General Other (specify)	Aggregate	PYear-to-Date ▼ 2912.0	00								
s	UBTOTAL of Receipts This Page (optional)			····· <b>&gt;</b>	431.00							
Т	OTAL This Period (last page this line number of	nly)		►								

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

(check only one)

PAGE 70 OF

			Detailed Summary Page		_	11a 13		11b 14	11c		12 16	17				
Ar	y information copied from such Reports and S	tatements ma	I ay not be sold or used by any p	erson	for	the	pur	pose of	f solicitin	g con	ntribut	ions				
or	for commercial purposes, other than using the	name and a	ddress of any political committee	e to so	olic	it cor	ntrik	outions	from suc	cor	nmitte	e.				
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С												
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A.</b> Mitchell, Christian, , ,						Date of Receipt									
	Mailing Address 640 E Carlisle Ave				IV	07	1	D 15			)18 )18	Y				
	City Whitefish Bay	State WI	Zip Code 53217-4832						201807			29				
	,		33217-4032		An	nount	t of	Each F	Receipt t	his Pe	eriod	_				
	FEC ID number of contributing federal political committee.	С			Ļ	_	_	-			55.0	00				
	Name of Employer (for Individual) NML		upation (for Individual) Ips		Ļ	Me	emo	o Item								
	Receipt For:	Aggregate	Year-to-Date <b>V</b>													
	Other (specify) ▼		770.00	]												
в.	Full Name of Individual (Last, First, Middle Init Mitchell, Christian, , ,	tial) or Full C	organization Name		Da	ite of	Re	eceipt								
	Mailing Address 640 E Carlisle Ave				07 31 / Y Y Y Y 07 31 2018											
	City	State Zip Code WI 53217-4832				Transaction ID : 2018073119173-527										
	······································		53217-4832	_	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:	Aggregate	Year-to-Date ▼													
	Primary     General       Other (specify) ▼	, 770.00														
<u></u>	Full Name of Individual (Last, First, Middle Init Molloy, Karen, A, ,	tial) or Full C	organization Name		Da	ite of	Re	eceipt								
	Mailing Address 2004 N 85th St				IV	07 <sup>M</sup>	1	15		20	18 <sup>°</sup>	Y				
	City	State WI	Zip Code						201807			30				
	Wauwatosa	VVI	53226-2846		An	nount	t of	Each F	Receipt t	his Pe	eriod					
	FEC ID number of contributing federal political committee.	С			Ļ	_	_	, . ,			41.0	00				
	Name of Employer (for Individual) NML	Occupation (for Individual) Vp Treasurer Aggregate Year-to-Date ▼				M	emo	o Item								
	Receipt For:															
	Other (specify)		574.00	]												
	UBTOTAL of Receipts This Page (optional)			▶ -		-		y	. ,		151.0	0				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 71 OF

			i	Detailed Summary Page		_	11a 13		11b 14	11c			17		
	y information copied from such Reports and Sta for commercial purposes, other than using the					fo	r the		pose of	soliciting	g contr	ibuti	ions		
	NAME OF COMMITTEE (In Full)	name anu a		ess of any political committee						rom suc	n com	mue	e.		
	The Northwestern Mutual Life Ins	surance	С	ompany Federal PA	C										
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Molloy, Karen, A, ,					Date of Receipt									
	Mailing Address 2004 N 85th St						07 31 2018								
	City State Zip Code					Transaction ID : 2018073119173-726									
	Wauwatosa	WI		53226-2846	_	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C					41.00								
	Name of Employer (for Individual) NML		•	tion (for Individual) asurer		Memo Item									
	Receipt For:	Aggregate Year-to-Date ▼													
	Primary General Other (specify) ▼		-7-	574.00											
B	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morris, Scott, J, ,						ate of	Be	ceipt						
٦.	Mailing Address 4406 N MADERO DR						07 31 2018								
	City	State		Zip Code		Transaction ID : 2018073119173-881					31				
	MEQUON	WI		53092						Receipt th					
	FEC ID number of contributing federal political committee.	C					15.00								
	Name of Employer (for Individual) NML	Occupation (for Individual) Ast Gn Cnl & Ast Sec -Tax/Hr					Me	emc	ltem						
	Receipt For:	Aggregate Year-to-Date ▼													
	Primary General Other (specify) ▼		,	, 210.00											
C.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mulroy, Timothy, Michael, ,							Re	eceipt						
	Mailing Address 20 Indian Pipe						07 15 2018								
	City	State		Zip Code		-	Trans	act	ion ID :	2018071	51913	86-68	8		
	Dove Canyon	CA		92679-4206		Ar	nount	of	Each F	Receipt th	nis Per	iod			
	FEC ID number of contributing federal political committee.	С				125.00						0			
	Name of Employer (for Individual) Occupation (for Individual)							Memo Item							
	Self-Employed	General Insurance Agent													
	Receipt For:	Aggregate	Yea	ar-to-Date 🔻		]									
	Other (specify)	1750.00													
s	UBTOTAL of Receipts This Page (optional)			•					,	. ,	1	81.0	0		
Т	OTAL This Period (last page this line number o	nly)			•				-			-			

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FOR LINE NUMBER:

PAGE 72 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 and		
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance	ce Company Federal PAC	;
Self-Employed G	I Organization Name         Zip Code         92679-4206         Deccupation (for Individual)         General Insurance Agent         ate Year-to-Date ▼         1750.00	Date of Receipt
NML C	I Organization Name         Zip Code         53122-2019         Decupation (for Individual)         Dir Distribution Finance         ate Year-to-Date ▼         472,00	Date of Receipt
NML D	I Organization Name         Zip Code         53122-2019         Decupation (for Individual)         bir Distribution Finance         ate Year-to-Date ▼         472.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	<b>F</b>	189.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 73 OF

				Detailed Summary Page		11a		11b		11c	12	<u> </u>
Δην	information copied from such Reports and Sta	temente m	av n	ot he sold or used by any n	areon	13 for the		14 rnose	ofer	15 Nicitina	16	tions
	or commercial purposes, other than using the											
	IAME OF COMMITTEE (In Full)											
/	The Northwestern Mutual Life In				с 							
	ull Name of Individual (Last, First, Middle Initia O Connell, Kevin, , ,	al) or Full C	Drgar	nization Name		Deta	.4 F					
-	Aailing Address 4807 W Woodmere Rd				-	Date c						
N	aning Address 4607 W Woodhiele Ru					07			15	/ Y	2018	Y
C	City	State		Zip Code		Tran	sact	tion ID	) : 20	18071	519136-0	67
-	Tampa	FL		33609-3632	_	Amour	nt of	Each	Rec	eipt thi	is Period	
	EC ID number of contributing ederal political committee.	С						-y		-7-	208.	00
Ī	lame of Employer (for Individual)	Occ	cupat	ion (for Individual)		N	lem	o Item	n			
	Self-Employed	Ger	neral	Insurance Agent								
F	Receipt For:	Aggregate	Yea	r-to-Date ▼								
	Primary General Other (specify) ▼			2912.00								
		<u> </u>	7									
	ull Name of Individual (Last, First, Middle Initia O Connell, Kevin, , ,	al) or Full C	Drgar	nization Name		Date c	of Re	eceipt				
_	Aailing Address 4807 W Woodmere Rd					07 / 31 / 2018 Transaction ID : 2018073119136-67						
C	City	State		Zip Code							57	
_	Гатра	FL		33609-3632	_	Amount of Each Receipt this Period						
	EC ID number of contributing ederal political committee.	С						-g=-		-95-	208.	00
۔ ۲	Calf Employed			ion (for Individual) I Insurance Agent		Memo Item						
F	Receipt For:	Aggregate	Yea	r-to-Date ▼								
Primary     General       Other (specify) ▼				2912.00								
	ull Name of Individual (Last, First, Middle Initia Oberland, Gregory, C, ,	al) or Full C	Drgar	nization Name		Date o	of D	ocoint				
_	Aailing Address 4514 N Lake Dr					07		/ D	D 15	/ Y	2018	Y
	City	State		Zip Code		Tran	sac	tion IE	D : 20	018071	319136-	501
_	Whitefish Bay	WI		53211-1252	_	Amour	nt of	Each	Rec	eipt th	is Period	
	FEC ID number of contributing federal political committee.					Ē		<b>,</b>		y	208	00
١				ion (for Individual) nt		Memo Item						
Receipt For: Aggregate			Yea	r-to-Date ▼								
	Primary General Other (specify)	· · · ·		2912.00	11							
			-9-									
su	BTOTAL of Receipts This Page (optional)				- -		-	9		5	624.	00
то	TAL This Period (last page this line number o	nly)			•					-		

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	-	Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17					
or for commercial purposes, other than using			person for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	С					
Full Name of Individual (Last, First, Middle Oberland, Gregory, C, ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 4514 N Lake Dr			07 31 2018					
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID : 2018073119173-499 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 ▼ 2912.00	]					
Full Name of Individual (Last, First, Middle B. Otto, Timothy, A, ,	e Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address 14255 Tulane St			07 31 2018					
City Brookfield	State WI	Zip Code 53005-4170	Transaction ID : 2018073119173-546 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/Ins	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00	]					
Full Name of Individual (Last, First, Middle C. Pavlick, Randy, M, ,	Initial) or Full O	rganization Name	Date of Receipt					
Mailing Address N38W28908 Middlefield F	Rd		07 / D D / Y Y Y Y 2018					
City Pewaukee	State WI	Zip Code 53072-3154	Transaction ID : 2018071319136-470 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		20.00					
NML		upation (for Individual) Ianaged Investmens Compl	Memo Item					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00	]					
SUBTOTAL of Receipts This Page (optional	)		243.00					
TOTAL This Period (last page this line num	ber only)							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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11	EMIZED 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 Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.										
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC										
Α.	Full Name of Individual (Last, First, Middle Initia Pavlick, Randy, M, ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address N38W28908 Middlefield Rd			07 31 Y Y Y Y 2018							
	City Pewaukee	State WI	Zip Code 53072-3154	Transaction ID : 2018073119173-468 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С									
NML V			upation (for Individual) Managed Investmens Compl Year-to-Date ▼	Memo Item							
	Primary General Other (specify) ▼		280.00								
в.	Full Name of Individual (Last, First, Middle Initia Pickering, William, C, ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address 1823 N 81st St	07 31 2018									
	City Wauwatosa	State WI	Zip Code 53213-2146	Transaction ID : 2018073119173-857 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		15.00							
NML A			upation (for Individual) Gn Cnl & Ast Sec/Intl Pro	Memo Item							
			Year-to-Date ▼ 210.00								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Pierz, Michele, E, ,	ll) or Full O	Organization Name	Date of Receipt							
	Mailing Address 9719 N Lamplighter Ln										
	City Mequon	State WI	Zip Code 53092-5322	Transaction ID : 2018071319136-458 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) Dir Fld Mrktg Eng&Intg	Memo Item							
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 280.00								
s	UBTOTAL of Receipts This Page (optional)		•	55.00							
Т	OTAL This Period (last page this line number or	וy)	•								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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		Detailed Summary Page	×	-		11b	11c	12			
Any information control from such D	and Otate			13		14	15	16	17		
Any information copied from such Reports or for commercial purposes, other than usin											
NAME OF COMMITTEE (In Full)	<u> </u>	·····							-		
The Northwestern Mutual Li	ife Insurance	Company Federal PA	С								
/											
Full Name of Individual (Last, First, Mide Pierz, Michele, E, ,	dle Initial) or Full C	organization Name	.	Data at	f De	noint					
Mailing Address 9719 N Lamplighter Ln				Date of	_			V ····	N.		
Maning Address 97 19 N Lampighter Lh				07	'	31	/ Y	2018	Y		
City	State	Zip Code		Trans	acti	the second se	2018073	119173-4	56		
Mequon	WI	53092-5322		Amoun	t of	Each R	eceipt th	is Period			
FEC ID number of contributing	C							20.	00		
federal political committee.	C				-	-y		20.			
Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item					
NML		Dir Fld Mrktg Eng&Intg									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General			<b>.</b>   .								
Other (specify) <b>v</b>		280.00									
Full Name of Individual (Last, First, Mide	dle Initial) or Full C	Irganization Name									
Plocher, Matthew, J, ,											
Mailing Address 4324 Chevy Chase Dr				Date of	/	D D	/ Y	Y Y	Y		
				07 15 2018 Transaction ID : 2018071519136-36							
City	State	Zip Code							6		
La Canada	CA	91011-3203	/	Amoun	t of	Each R	eceipt th	is Period			
FEC ID number of contributing	С	С					208.00				
federal political committee.	0										
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item								
Self-Employed	General Insurance Agent										
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify) ▼		2912.00	1								
		, 2312.00	┛║╴								
Full Name of Individual (Last, First, Mide	dle Initial) or Full C	rganization Name									
Plocher, Matthew, J, ,	-		I	Date of	f Re	ceipt					
Mailing Address 4324 Chevy Chase Dr				M M	/		/ Y	Y Y	Y		
City	State	Zip Code		07 Trans	acti	31	2018073	2018 3119136-3	6		
La Canada	CA	91011-3203						is Period			
FEC ID number of contributing			-	anoun					_		
federal political committee.	С					9		208.	00		
		unalian (fau bailt data - D	"	M	emo	Item					
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent			UIIC						
Receipt For:	I	-	_								
Primary General Ag		Year-to-Date ▼									
Other (specify)		2912.00									
								105			
SUBTOTAL of Receipts This Page (option	nal)	······ ]				y		436.	JU		
	under an ende à		- 1								
TOTAL This Period (last page this line nu	mber only)	······ ]				_			_		

#### SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

## Use separate schedule(s)

FOR LINE NUMBER:

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17			Use separate scl		(che	ck only	one	e)			
111	EMIZED RECEIPTS		for each category Detailed Summa		×	11a 13		11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the n					or the p	purp	ose of	soliciting	contribu	itions
$\overline{)}$	NAME OF COMMITTEE (In Full)										
/	The Northwestern Mutual Life Ins	surance	Company Fee	deral PAC	)						
A.	Full Name of Individual (Last, First, Middle Initia Porter, Rebecca, L, ,	l) or Full O	rganization Name			Date of	Rec	ceipt			
	Mailing Address 4800 Stratford Dr					м м 07	/	15	) / Y	ү ү 2018	Y
	City	State WI	Zip Code						2018071		
	Greendale	VVI	53129-2017	_	_ A	Mount	of E	Each F	leceipt th	is Period	
	FEC ID number of contributing federal political committee.	С						,		76.	.00
	Name of Employer (for Individual) NML		upation (for Individua Corp Strat	al)		Me	emo	Item			
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify) ▼			1064.00							
в.	Full Name of Individual (Last, First, Middle Initia Porter, Rebecca, L, ,	l) or Full O	rganization Name			Date of	Rec	ceipt			
	Mailing Address 4800 Stratford Dr				м м 07	/	D 1	) / Y	у у 2018	Ŷ	
	City	State	Zip Code						2018073		-
	Greendale	WI	53129-2017	_	A	Mount	of E	Each F	leceipt th	is Period	
FEC ID number of contributing federal political committee.								 -		76	.00
	Name of Employer (for Individual) NML		upation (for Individu Corp Strat	al)		Me	emo	Item			
	Receipt For:	Aggregate	Aggregate Year-to-Date ▼								
	Other (specify) ▼		, 1064.00								
<u> </u>	Full Name of Individual (Last, First, Middle Initia Pruett, Charles, R, ,	l) or Full O	rganization Name			Date of	Rec	ceipt			
	Mailing Address 1019 Stonewall Dr					м м 07	/	15	) / Y	2018	Y
	City	State	Zip Code			Trans	actio	on ID :	2018071	519136-3	38
	Nashville	TN	37220-1022		A	Mount	of E	Each F	Receipt th	is Period	l
								y		208.	.00
			upation (for Individua eral Insurance Agent	,		Me	emo	ltem			
Poppint For:		1	Year-to-Date ▼	·	-						
	Primary General			2912.00							
	Other (specify)	L		2912.00							
s	UBTOTAL of Receipts This Page (optional)			••••••	[			,	. ,	360.	00
т	OTAL This Period (last page this line number or	nly)		•••••				<u>,                                    </u>	<u> </u>		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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т	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)				
••			Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
Ar or	for commercial purposes, other than using the	statements ma name and a	ay not be sold or used by any p address of any political committe	erson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II	nsurance	Company Federal PA	С				
Α.	Full Name of Individual (Last, First, Middle Ini Pruett, Charles, R, ,	tial) or Full C	rganization Name	Date of Receipt				
	Mailing Address 1019 Stonewall Dr			07 / D D / Y Y Y Y 2018				
	City Nashville	State TN	Zip Code 37220-1022	Transaction ID : 2018073119136-38 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) neral Insurance Agent	Memo Item				
	Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 2912.00	]				
В.	Full Name of Individual (Last, First, Middle Ini Radke, Steven, M, ,	tial) or Full C	organization Name	Date of Receipt				
	Mailing Address 111 W Ravine Ct			07 15 / Y Y Y Y 07 15				
	City Thiensville	State WI	Zip Code 53092-5861	Transaction ID : 2018071319136-679 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С						
	Name of Employer (for Individual) NML		upation (for Individual) Govt Relations	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 907.00	]				
с.	Full Name of Individual (Last, First, Middle Ini Radke, Steven, M, ,	tial) or Full C	organization Name	Date of Receipt				
	Mailing Address 111 W Ravine Ct			07 / D D / Y Y Y Y 2018				
	City Thiensville	State WI	Zip Code 53092-5861	Transaction ID : 2018073119173-675           Amount of Each Receipt this Period				
NML Vp				108.00				
			upation (for Individual) Govt Relations Year-to-Date ▼	Memo Item				
	Primary General Other (specify)	1						
┢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			424.00				

## Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
The Northwestern Mutual Li	fe Insurance	Company Federal PA	С
Full Name of Individual (Last, First, Mide <b>A.</b> Reeter, Jeff, D, ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7 Williamsburg Ln			07 15 / Y Y Y Y 2018
City Houston	State TX	Zip Code 77024-5144	Transaction ID : 2018071519136-53 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) eral Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1820.00	]
Full Name of Individual (Last, First, Mido B. Reeter, Jeff, D, ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 7 Williamsburg Ln			07 31 2018
City Houston	State TX	Zip Code 77024-5144	Transaction ID : 2018073119136-53 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		130.00
Name of Employer (for Individual) Self-Employed		upation (for Individual) Ieral Insurance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1820.00	]
Full Name of Individual (Last, First, Mido C. Remstad, David, R, ,	lle Initial) or Full O	rganization Name	Date of Receipt
Mailing Address 2634 N Lake Dr			07 / D D / Y Y Y Y 2018
City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID : 2018071319136-628 Amount of Each Receipt this Period
NML Sv			117.00
		upation (for Individual) & Chief Actuary	Memo Item
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1638.00	]
SUBTOTAL of Receipts This Page (option	al)		377.00
TOTAL This Period (last page this line nu	mber only)		

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

(check only one)

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				Detailed Summary Page		_	11a 13	-	11b 14	11c	12		17					
	ny information copied from such Reports and St for commercial purposes, other than using the					for	the		pose of	soliciting	g contril							
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In																	
Α.	Full Name of Individual (Last, First, Middle Initi Remstad, David, R, , Mailing Address 2634 N Lake Dr	al) or Full C	nization Name	Date of Receipt														
	City	State		Zip Code		07 31 2018 Transaction ID : 2018073119173-625												
	Milwaukee	WI		53211-3837	_	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			117.00													
	Name of Employer (for Individual) NML		•	ion (for Individual) hief Actuary			Me	emo	tem									
	Receipt For:       Primary       General         Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 1638.00	3.00													
в.	Full Name of Individual (Last, First, Middle Initi Reynolds, Courtney, K, , Mailing Address 2221 E Newberry Blvd	al) or Full C	Drgar	nization Name		Date of Receipt												
	City	State		Zip Code		T		acti		2018071	-	-464						
	Milwaukee	WI		53211-3746	_	An	nount	of	Each F	Receipt th	nis Perio	bd						
	FEC ID number of contributing federal political committee.	С	C						20.00									
	Name of Employer (for Individual) MML		•	ion (for Individual) nm & Corp Affairs	Memo Item													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Aggregate Year-to-Date ▼ 280.00															
с.	Full Name of Individual (Last, First, Middle Initi Reynolds, Courtney, K, ,	al) or Full C	Drgar	nization Name		Date of Receipt												
	Mailing Address 2221 E Newberry Blvd					N	07	1	31	) / Y	2018	Y						
	City Milwaukee	State WI		Zip Code 53211-3746	_					<b>201807</b> 3 Receipt th								
	FEC ID number of contributing federal political committee.	С					nount	U				0.00						
	Name of Employer (for Individual) NML		•	ion (for Individual) m & Corp Affairs			Me	emo	tem Item									
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 280.00														
┢	UBTOTAL of Receipts This Page (optional)				•			-	y	· ·	15	7.00						

## Use separate schedule(s)

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			Use separate schedule(s)	(ch	eck only	y or	ne)							
	IVILLED RECEIPIS		for each category of the Detailed Summary Page		<b>′</b> 11a 13		11b 14	11c	12	Г	17			
	information copied from such Reports and Sta or commercial purposes, other than using the n				for the		pose of	soliciting	g contri	ibutic	ns			
	IAME OF COMMITTEE (In Full)			~										
/	The Northwestern Mutual Life Ins	surance	Company Federal PA	С										
	Full Name of Individual (Last, First, Middle Initia Rhoades, Adam, T, ,	l) or Full Or	Date of Receipt											
N	Iailing Address 2038 Rosemont PI				07 15 2018									
	Dity	State AL	Zip Code	Transaction ID : 2018071519136-42										
_	Vestavia		35243-1767		Amount	t of	Each R	leceipt th	nis Peri	iod				
	EC ID number of contributing ederal political committee.	С			<u> </u>	_	-		20	08.00				
N	lame of Employer (for Individual)	Осси	pation (for Individual)		M	emc	ltem							
_	Self-Employed	Gen	eral Insurance Agent											
F	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General Other (specify) V		2912.00	11										
	ull Name of Individual (Last, First, Middle Initia Rhoades, Adam, T, ,	l) or Full Or	rganization Name		Data at									
-	Aailing Address 2038 Rosemont Pl			_	Date of	Re	·							
N	ZU38 Rosemont Pl				07	1	31		2018					
C	Dity	State	Zip Code		Trans	acti	ion ID :	2018073	119136	6-42				
	/estavia	AL	35243-1767		Amount	t of	Each R	leceipt th	nis Peri	iod				
	EC ID number of contributing ederal political committee.	C				208.00								
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent			M	emc	tem							
F	Receipt For:													
	Primary General	Aggregate Year-to-Date ▼												
	Other (specify)		, 2912.00											
	ull Name of Individual (Last, First, Middle Initia Richardson, Peter, K, ,	l) or Full Or	rganization Name		Date of	f Re	eceipt							
N	Iailing Address 720 E Green Tree Rd				07	1	15		2018		1			
	Dity	State	Zip Code		Trans	act	ion ID :	2018071	31913	6-44	2			
_	Fox Point	WI	53217-3615		Amount	t of	Each R	leceipt th	nis Peri	iod				
	EC ID number of contributing ederal political committee.	С					y .	.,	2	20.00				
Name of Employer (for Individual)			ipation (for Individual) Sn Cnl & Ast Sec/Ipas	Memo Item										
F	Receipt For:	I	Year-to-Date ▼											
	Primary General		280.00	11.										
	Other (specify)													
su	BTOTAL of Receipts This Page (optional)			► '			, ,	. ,	43	36.00				
то	TAL This Period (last page this line number on	ly)		•			<del>,</del>			-				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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		Detailed Summary Page	<b>X</b> 11a 11b 11c 12											
Any information copied from such Reports a	nd Statements ma	I ay not be sold or used by any r	13     14     15     16     1       person for the purpose of soliciting contributions											
or for commercial purposes, other than using	g the name and a	ddress of any political committe	e to solicit contributions from such committee.											
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	o Incuranco	Company Federal PA	C											
The Northwestern Mutual Li		Company rederarrA	6											
Full Name of Individual (Last, First, Middl	e Initial) or Full C	organization Name												
A. Richardson, Peter, K, , Mailing Address 720 E Green Tree Rd			Date of Receipt											
Maning Address 720 E Green free Ku			07 31 2018											
City	State	Zip Code	Transaction ID : 2018073119173-440											
Fox Point	WI	53217-3615	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		20.00											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
NML	Ast	Gn Cnl & Ast Sec/Ipas												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		280.00	]											
Full Name of Individual (Last, First, Middl B. Richardson, Wesley, H, ,	e Initial) or Full C	organization Name	Date of Receipt											
·	Mailing Address 1 Open Gate Whitaker Hill Rd													
City	State	Zip Code	Transaction ID : 2018071519136-71											
Huntington	WV	25701	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:	Aggregate	Year-to-Date 🔻												
Primary General Other (specify) ▼		1750.00	]											
Full Name of Individual (Last, First, Middl C. Richardson, Wesley, H, ,	e Initial) or Full C	organization Name	Date of Receipt											
Mailing Address 1 Open Gate Whitaker H	ll Rd		07 / D D / Y Y Y Y Y 2018											
City	State WV	Zip Code 25701	Transaction ID : 2018073119136-71											
Huntington		25701	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C		125.00											
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item											
Self-Employed	Gen	eral Insurance Agent												
Receipt For:	Aggregate	Year-to-Date ▼	_											
Other (specify)		1750.00	]											
SUBTOTAL of Receipts This Page (optiona	l)		270.00											
TOTAL This Period (last page this line num														

## Use separate schedule(s)

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		-	Use separate schedule(s)				(check only one)								
ITEMIZED RE			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	Г	17				
Any information co or for commercial p	pied from such Reports ar purposes, other than using	nd Statements ma the name and a	y not be sold or used by any platess of any political committee	person for	or the	purpo	ose of	soliciting	g contrib	outio	ns				
	IMITTEE (In Full)														
		e Insurance	Company Federal PA	C											
Full Name of Ind A. Rivers, J, Dar	dividual (Last, First, Middle niel, ,	e Initial) or Full O	ganization Name		Date of Receipt										
Mailing Address	3601 River Ridge Cv				07 15 2018										
City		State	Zip Code		Trans	actio	on ID : :	2018071	519136	6-12					
Prospect		KY	40059-8038	A	Amount	of E	Each R	eceipt th	nis Perio	bc					
FEC ID number federal political	0	С							20	8.00					
Name of Employ	yer (for Individual)	Осси	pation (for Individual)	- 1	Me	emo	Item								
Self-Employed		Gen	eral Insurance Agent												
Receipt For:		Aggregate	Year-to-Date 🔻												
Primary	General			11											
Other (spe	ecify) ▼		2912.00												
	dividual (Last, First, Middle	e Initial) or Full O	ganization Name												
B. Rivers, J, Da					Date of	Rec	eipt								
	3601 River Ridge Cv	Chata	Zin Oode	_ [	м м 07	1	D D 31	/ Y	2018	Ý					
City		State KY	Zip Code					2018073							
Prospect			40059-8038	A	Amount	OTE	ach R	eceipt th	iis Peric	bd	_				
FEC ID number federal political	0	С	C Occupation (for Individual) General Insurance Agent				208.00								
Name of Employ Self-Employed	yer (for Individual)						Item								
Receipt For:		Aggregate	Year-to-Date 🔻												
Primary Other (spe	General ecify) ▼		2912.00												
				- L.											
Full Name of Ind	dividual (Last, First, Middle , Bethany, M, ,	e Initial) or Full O	ganization Name		Date of	Rec	eipt								
Mailing Address	3900 N Lake Dr				<sup>M</sup> 07	1	D D D 15	/ Y	2018	Y	]				
City		State	Zip Code		Trans	actic	on ID :	2018071	319136	6-531	l				
Shorewood		WI	53211-2448	A	Amount	of E	Each R	eceipt th	nis Perio	bc					
FEC ID number federal political	0	C			_	,	, .	,	15	0.00					
Name of Employ	yer (for Individual)		pation (for Individual) & Chief Transformation Off		M	emo	ltem								
Receipt For:			Year-to-Date 🔻												
Primary	General	33 - 3		- L -											
Other (spe	ecify)		2100.00												
SUBTOTAL of Re	ceipts This Page (optional	)		•		. ,	,	, ,	56	6.00					
TOTAL This Perio	d (last page this line num	ber only)		•				-		-					

#### Use separate schedule(s)

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	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗         11a         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 <b>A</b> . Rodenhuis, Bethany, M, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 3900 N Lake Dr			07 31 Y Y Y Y Y 2018								
City Shorewood	State WI	Zip Code 53211-2448	Transaction ID : 2018073119173-529 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 ▼ 2100.00	]								
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	State	Zip Code	07 15 2018 Transaction ID : 2018071319136-674								
Germantown FEC ID number of contributing federal political committee.	C	53022-6611	Amount of Each Receipt this Period								
Name of Employer (for Individual) NML		upation (for Individual) & Chief Risk Officer	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 870.00	]								
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			07 / D D / Y Y Y Y 2018								
City Germantown	State WI	Zip Code 53022-6611	Transaction ID : 2018073119173-670           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 ▼ 870.00	]								
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:

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	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12								
Any information copied from such Reports a or for commercial purposes, other than using	and Statements ma	Ay not be sold or used by any p ddress of any political committed	13     14     15     16     17       erson for the purpose of soliciting contributions       to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)	<u>.</u>	·····									
The Northwestern Mutual Li	fe Insurance	Company Federal PA	0								
Full Name of Individual (Last, First, Mide Russo, Matt, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 139 Deep Valley Rd			07 15 2018								
City New Canaan	State CT	Zip Code 06840-2804	Transaction ID : 2018071519136-44           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) Ieral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]								
Full Name of Individual (Last, First, Midc B. Russo, Matt, , ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 139 Deep Valley Rd			07 31 2018								
City New Canaan	State CT	Zip Code 06840-2804	Transaction ID : 2018073119136-44								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		2912.00	]								
Full Name of Individual (Last, First, Mide C. Salchert, Julie, L, ,	lle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 367 Tanager Dr			07 / D D / Y Y Y Y 07 15 2018								
City Grafton	State WI	Zip Code 53024-1764	Transaction ID : 2018071319136-568           Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		17.00								
Name of Employer (for Individual) NML		upation (for Individual) Sales Promo & Integration	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 238.00									
SUBTOTAL of Receipts This Page (option	al)		433.00								
TOTAL This Period (last page this line nu	nber only)										

## Use separate schedule(s)

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			for each category of the Detailed Summary Page		<b>1</b> 1a		11b 14	11c		2	17		
	r information copied from such Reports and Star or commercial purposes, other than using the n				for the		pose of	soliciting	g cont	ributio	ons		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PA	С									
	Full Name of Individual (Last, First, Middle Initia Salchert, Julie, L, ,	l) or Full Or	rganization Name		Date of Receipt								
ľ	Mailing Address 367 Tanager Dr				07 31 2018								
	City Grafton	State WI	Zip Code 53024-1764	_				2018073 Receipt th			5		
	FEC ID number of contributing ederal political committee.	С			. 01				17.00	0			
1	Name of Employer (for Individual)		upation (for Individual) Sales Promo & Integration		M	emc	tem						
F	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 238.00										
	Full Name of Individual (Last, First, Middle Initia Sarnecki, R, Philip, ,	l) or Full Or	rganization Name		Date of	Re	eceipt						
-	Mailing Address 18240 Melrose Dr	1			07	1	15	) / Y	201	8			
	City Bucyrus	State KS	Zip Code 66013-9081	-				2018071 Receipt th					
F	FEC ID number of contributing ederal political committee.	С								100.00	D		
	Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent				emc	tem						
Ē	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1400.00										
	Full Name of Individual (Last, First, Middle Initia Sarnecki, R, Philip, ,	l) or Full Or	rganization Name		Date of	Re	eceipt						
1	Mailing Address 18240 Melrose Dr				<sup>M</sup> 07	1	31		y 201		Ý		
	City Bucyrus	State KS	Zip Code 66013-9081				-	2018073 Receipt th			!		
	FEC ID number of contributing ederal political committee.	С			<u> </u>		9		1	100.00	0		
5	Name of Employer (for Individual) Self-Employed	Gene	upation (for Individual) eral Insurance Agent		M	emo	o Item						
r	Receipt For: Primary General Other (specify)	Aggregate											
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NAME OF COMMITTEE (In Full)												
The Northwestern Mutual Life	Insurance	Company Federal PA										
Full Name of Individual (Last, First, Middle I Schaefer, Timothy, G, ,	nitial) or Full O	rganization Name		Date of Receipt								
Mailing Address 1013 E Lexington Blvd				07 15 2018								
City	State WI						319136-7	09				
Whitefish Bay	VVI	53217-5381	/	Amount	of	Each F	Receipt th	is Period				
FEC ID number of contributing federal political committee.	С							208.	00			
Name of Employer (for Individual) NML		upation (for Individual) Client And Dig Exp		Me	emo	Item						
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2912.00										
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Full Name of Individual (Last, First, Middle I B. Schaefer, Timothy, G, ,	nitial) or Full O	rganization Name	[	Date of	Re	ceipt						
Mailing Address 1013 E Lexington Blvd				м м 07	/	31	) / Y	2018	Y			
City Whitefish Bay	State WI	Zip Code 53217-5381						119173-7				
FEC ID number of contributing	_	33217-3301	/	Amount	OT	Each F	receipt tr	iis Period	_			
federal political committee.	ů l							208.	00			
Name of Employer (for Individual) NML	Occi Evp		Me	emo	Item							
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Primary     General       Other (specify) ▼		2912.00	]									
Full Name of Individual (Last, First, Middle I C. Schattschneider, Cal, D, ,	nitial) or Full O	rganization Name		Date of	Re	ceipt						
Mailing Address 5940 Stefanie Way				07	/	15		үүү 2018	Y			
City Caledonia	State WI	Zip Code 53108-9563						319136-8 iis Period				
FEC ID number of contributing federal political committee.	С					,	,	35.				
Name of Employer (for Individual) NML		upation (for Individual) Campus Planning&Ops		Me	emo	ltem						
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify)		478.00										
SUBTOTAL of Receipts This Page (optional)	<u> </u>							451.	00			
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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
I EIVILED RECEIPIS		for each category of the Detailed Summary Page	<b>X</b> 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than using			person for the purpose of soliciting contributions ee 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 Schattschneider, Cal, D, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 5940 Stefanie Way			07 31 Y Y Y Y Y								
City Caledonia	State WI	Zip Code 53108-9563	Transaction ID : 2018073119173-859 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) Campus Planning&Ops	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 478.00	]								
Full Name of Individual (Last, First, Middle B. Schenkel, Christopher, J, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 27085 Saddlerock Pl			07 15 2018								
City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018071519136-64 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00	]								
Full Name of Individual (Last, First, Middle C. Schenkel, Christopher, J, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 27085 Saddlerock Pl			07 / D D / Y Y Y Y 2018								
City Harrisburg	State SD	Zip Code 57032-8243	Transaction ID : 2018073119136-64 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 588.00	]								
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

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An	y information copied from such Reports and S	tatements ma	l ay not be sold or used by any r	berson	13 for the	uq e		4 se of s	15 soliciting	16 d contrib	utions	17 s					
	for commercial purposes, other than using the											-					
$\backslash$	NAME OF COMMITTEE (In Full)	europoo	Company Eddard BA	C													
	The Northwestern Mutual Life Ir																
^	Full Name of Individual (Last, First, Middle Init Schickert, Sherri, L, ,	ial) or Full C	rganization Name		Date of Receipt												
А.	Mailing Address W147N9815 Emerald Ln				Date					- Y - Y	V						
					07 15 2018												
	City Germantown	State WI	Zip Code 53022-6620		Transaction ID : 2018071319136-699												
			55022-0020	_	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			22.00												
	Name of Employer (for Individual)	Occ	upation (for Individual)	_		Nem	no I	tem									
	NML	Dir	Proj/Bus Imp Serv														
	Receipt For:	Aggregate	Year-to-Date ▼														
	Other (specify) ▼		308.00														
в.	Full Name of Individual (Last, First, Middle Init Schickert, Sherri, L, ,		Date of Receipt														
	Mailing Address W147N9815 Emerald Ln							07 / D D / Y Y Y Y Y 2018									
	City	State	Zip Code		Tran	sac	tio	n ID : 2	018073	119173	-695						
	Germantown	WI	53022-6620	_	Amou	nt o	fΕ	ach Re	eceipt th	nis Perio	d	_					
	FEC ID number of contributing federal political committee.	С		<u> </u>		- 7			2:	2.00							
	Name of Employer (for Individual) NML		upation (for Individual) Proj/Bus Imp Serv		Memo Item												
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary     General       Other (specify) ▼		308.00														
<u>с.</u>	Full Name of Individual (Last, First, Middle Init Schlifske, John, E, ,	ial) or Full C	rganization Name		Date of Receipt												
	Mailing Address 1500 Greenway Ter				<sup>™</sup> 07	M	/	D D 15	/ Y	2018	Y						
	City Elm Grove	State WI	Zip Code 53122-1611							1319136							
			03122-1011		Amou	nt o	fΕ	ach Re	eceipt th	nis Peric	d	_					
	FEC ID number of contributing federal political committee.	C			Ļ.		9		9	20	3.00						
	Name of Employer (for Individual) NML		upation (for Individual) irman & Ceo			Merr	no I	ltem									
	Receipt For:	Aggregate	Year-to-Date ▼														
	Other (specify)		2912.00														
s	UBTOTAL of Receipts This Page (optional)						5			25:	2.00						
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	5	for each category of the Detailed Summary Page	<b>X</b> 11a	11b	11c 15	12 16	17						
		l ay not be sold or used by any p ddress of any political committee	erson for the	purpose of	soliciting	contributi	ions						
NAME OF COMMITTEE (Ir													
The Northwestern	Mutual Life Insurance	Company Federal PA	C										
Full Name of Individual (La A. Schlifske, John, E, ,	st, First, Middle Initial) or Full C	rganization Name	Date of	f Receipt									
Mailing Address 1500 Gree	nway Ter		07 31 2018										
City	State	Zip Code		119173-64	12								
Elm Grove	WI	53122-1611	Amoun	t of Each R	eceipt thi	s Period							
FEC ID number of contribut federal political committee.	ting				-	208.0	0						
Name of Employer (for Indi NML	,	upation (for Individual) irman & Ceo	M	emo Item									
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify) ▼		2912.00	1										
Full Name of Individual (La B. Schmidt, Calvin, R, ,	st, First, Middle Initial) or Full C	rganization Name	Date of	f Receipt									
Mailing Address W205 Aller			M M 07	/ D D 15	/ Y	y y 2018	Y						
City Oconomowoc	State	Zip Code 53066-9048		action ID :			57						
FEC ID number of contribu	in a	33000-9040	Amoun	t of Each R	eceipt thi								
federal political committee.	C				7	105.0	0						
Name of Employer (for Indi NML	·	upation (for Individual) Product Services	M	emo Item									
Receipt For:		Year-to-Date ▼											
Other (specify) ▼	eral	1470.00	]										
Full Name of Individual (La c. Schmidt, Calvin, R,	st, First, Middle Initial) or Full C	rganization Name	Date of	f Receipt									
Mailing Address W205 Alle	n Rd		M M 07	/ D D 31	/ Y	2018	Y						
City Oconomowoc	State WI	Zip Code 53066-9048		saction ID :			53						
FEC ID number of contributive federal political committee.	ting C			t of Each R	eceipt thi	105.0	0						
Name of Employer (for Indi NML		upation (for Individual) Product Services	м	emo Item									
Receipt For:	Aggregate	Year-to-Date ▼											
Other (specify)		1470.00											
SUBTOTAL of Receipts This	Page (optional)				. ,	418.0	0						
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	ny information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	name and a	ddress of any political committee	e to soli				soliciting		tions
A.	Full Name of Individual (Last, First, Middle Initia Schneider, Rodd, , , Mailing Address 1415 E Fairy Chasm Rd	al) or Full O	rganization Name		Date of	Rec	ceipt		ÝÝ	Y
	# R City	State WI	Zip Code		07 Transa		15 on ID : 2		2018 <b>319136-</b> 4	50
	Bayside           FEC ID number of contributing           federal political committee.	C	53217-1433	A	mount	of E	Each Re	eceipt th	is Period 50.	
	Name of Employer (for Individual) NML Receipt For:	Vp L	upation (for Individual) .itig & Dist Counsel Year-to-Date ▼		Me	emo	Item			
	Primary     General       Other (specify) ▼		652.00							
в.	Full Name of Individual (Last, First, Middle Initia Schneider, Rodd, , , Mailing Address 1415 E Fairy Chasm Rd # R	al) or Full O	rganization Name		Date of	Rec	ceipt 31	/ Y	2018	Y
	City Bayside	State WI						<b>119173-4</b> is Period		
	FEC ID number of contributing federal political committee.	С					y		50.	00
	Name of Employer (for Individual) NML		upation (for Individual) Litig & Dist Counsel		Me	emo	Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 652.00							
C.	Full Name of Individual (Last, First, Middle Initia Schneider, Sarah, R, ,	al) or Full O	rganization Name		ate of	Red	ceipt			
	Mailing Address 4380 N Wildwood Ave	State	Zip Code	_ [	07 Trans	/ actio	15 0n ID : 2	JL	2018 3 <b>19136-</b> 0	
	Shorewood FEC ID number of contributing	WI	53211-1436	A			-		is Period	-
	federal political committee.	С			Me	mo	ltem		97.	00
	Name of Employer (for Individual) NML Receipt For:	Vp-N	upation (for Individual) New Business Year-to-Date ▼	-	IVIC	51110	Item			
	Primary General Other (specify)	Ayyreyale	1358.00							
s	UBTOTAL of Receipts This Page (optional)						,	,	197.	00
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page	>	<b>(</b> 11a	a		11k 14	, [	11c 15		12 16	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r										solicitin		ntribu	tions			
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	С	ompany Federal PAC	;												
A.	Full Name of Individual (Last, First, Middle Initia Schneider, Sarah, R, ,	First, Middle Initial) or Full Organization Name							Date of Receipt								
	Mailing Address 4380 N Wildwood Ave			-		07 / D D / Y Y Y Y 07 31 2018											
	City Shorewood	State WI		Zip Code 53211-1436	Transaction ID : 2018073119173-637           Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C						97.00									
	Name of Employer (for Individual) NML			ation (for Individual) w Business			Me	mo	Ite	m							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Ye	ar-to-Date ▼ 1358.00													
в.	Full Name of Individual (Last, First, Middle Initia Schott, Sarah, E, ,	al) or Full C	)rga	anization Name		Date	of	Re	ceip	ot							
	Mailing Address 5712 N Kent Ave	07 / D D / Y Y Y Y 2018								Y							
	City Whitefish Bay	State WI		Zip Code 53217-4724	_	Transaction ID : 2018071319136-614 Amount of Each Receipt this Period							14				
	FEC ID number of contributing federal political committee.	С	50.00								00						
	Name of Employer (for Individual) NML		•	ation (for Individual) mpliance/Bp			Me	emo	lte	m							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Ye	ar-to-Date ▼ 700.00													
С.	Full Name of Individual (Last, First, Middle Initia Schott, Sarah, E, ,	al) or Full C	Drga	anization Name		Date	of	Re	ceip	ot							
	Mailing Address 5712 N Kent Ave					<sup>™</sup> 0	7 <sup>M</sup>	/	D	31	/		)18 <sup>°</sup>	Y			
	City Whitefish Bay	State WI		Zip Code 53217-4724					-		<b>201807</b> eceipt t			11			
	FEC ID number of contributing federal political committee.	С	-			Ē			<b>y</b>	_			50.	00			
	Name of Employer (for Individual) NML		•	ation (for Individual) npliance/Bp	Memo Item												
	Receipt For: Primary General Other (specify)	Aggregate	Ye	ar-to-Date ▼ 700.00	1												
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#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	EMIZED RECEIPTS			for each category of the Detailed Summary Page	×	]11a			11 14	ŀ		11c	12		47				
	y information copied from such Reports and Stateme for commercial purposes, other than using the name								205	se of				oution					
\	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insura	ance	С	ompany Federal PAC	)														
Α.	Full Name of Individual (Last, First, Middle Initial) or Schultz, Deborah, A, , Mailing Address 1219 S WATERVILLE LA	nitial) or Full Organization Name							Date of Receipt										
	City St OCONOMOWOC W	tate VI		Zip Code 53066		Tra	nsa		-	ID :	20		2018 319136 is Perio	6-749					
	FEC ID number of contributing federal political committee.	;							-		_	-		0.00					
	Name of Employer (for Individual) NML		•	tion (for Individual) Incial Management			Me	mo	lt:	em									
	Receipt For:     Agg       Primary     General       Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 716.00															
<b>B.</b>	Full Name of Individual (Last, First, Middle Initial) or Schultz, Deborah, A, ,	r Full C	Drga	nization Name		Date	of	Re	ce	ipt									
	Mailing Address 1219 S WATERVILLE LA	Zip Code		<sup>™</sup> 07	7	/	Ļ	31			2018								
		VI		53066	Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	C					50.00												
l	Name of Employer (for Individual) NML		•	tion (for Individual) ancial Management			Me	mo	lt.	em									
	Receipt For:     Agg       Primary     General       Other (specify) ▼	gregate	Yea	ar-to-Date ▼ 716.00															
C	Full Name of Individual (Last, First, Middle Initial) or Seiden, Adam, D, ,	r Full C	Drga	nization Name		Date	of	Re	ce	ipt									
	Mailing Address 44 Sunset Rd					<sup>™</sup> 07		/		15		/ Y	2018	Y					
	5	tate CT		Zip Code 06820-3527	A								519136 is Perio						
	FEC ID number of contributing federal political committee.	;							,		_	9	20	8.00					
	Name of Employer (for Individual) Self-Employed Receipt For:	Ger	neral	tion (for Individual) Insurance Agent			Me	mo	) It	em									
	Primary     General       Other (specify)	gregate	Yea	ar-to-Date ▼ 2912.00															
SI	JBTOTAL of Receipts This Page (optional)			•					,		Ī	y	30	8.00					
т	OTAL This Period (last page this line number only)			•					7		2	-		-					

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			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				or the p	ourp	ose of	soliciting	contrib	outions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С								
A.	Full Name of Individual (Last, First, Middle Initia Seiden, Adam, D, ,	al) or Full O	rganization Name	C	Date of	Rec	ceipt					
	Mailing Address 44 Sunset Rd				07 31 Y Y Y Y 07 31 2018							
	City Darien	State CT	Zip Code 06820-3527	A				<b>2018073</b> eceipt th				
	FEC ID number of contributing federal political committee.	С					y- 1		208	3.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00									
в.	Full Name of Individual (Last, First, Middle Initia Seitzinger, Brad, P, ,	al) or Full O	rganization Name	C	Date of	Rec	ceipt					
Mailing Address 920 Pine Needle Trl					M M 07	/	D D 15	/ Y	2018	Y		
	City Oakland Twp	State MI	Zip Code 48306-1034					2018071 eceipt th				
	FEC ID number of contributing federal political committee.	C								8.00		
	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 ▼ 2912.00	]								
с.	Full Name of Individual (Last, First, Middle Initia Seitzinger, Brad, P, ,	al) or Full O	rganization Name		Date of	Rec	ceipt					
	Mailing Address 920 Pine Needle Trl				м м 07	/	D D D 31	/ Y	2018 <sup>°</sup>	Y		
	City Oakland Twp	State MI	Zip Code 48306-1034	A				2018073 eceipt th				
	FEC ID number of contributing federal political committee.	С					y	, <u>,</u>	208	3.00		
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		Me	emo	ltem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00									
s	UBTOTAL of Receipts This Page (optional)		••••••	[			,	. ,	624	4.00		
т	OTAL This Period (last page this line number or	nly)					y~			-		

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			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 Lif	e Insurance	Company Federal PA	C									
Full Name of Individual (Last, First, Middl A. Simbro, David, W, ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 311 E Erie St Unit 4			07 / D D / Y Y Y Y 2018									
City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID : 2018071319136-888           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 ▼ 1190.00	]									
Full Name of Individual (Last, First, Middl B. Simbro, David, W, ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 311 E Erie St Unit 4			07 / D D / Y Y Y Y Y 2018									
City Milwaukee	State WI	Zip Code 53202-6040	Transaction ID : 2018073119173-884 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		85.00									
Name of Employer (for Individual) NML		upation (for Individual) ) Life, Annuity & Prod Sol	Memo Item									
Receipt For: Primary General	Aggregate	Year-to-Date V	1									
Other (specify) ▼		, 1190.00										
Full Name of Individual (Last, First, Middl C. Smith, Walter, N, ,	e Initial) or Full C	organization Name	Date of Receipt									
Mailing Address 860 W Blackhawk St	Ototo	Zin Oode	07 / D D / Y Y Y Y 15 / 2018									
City Chicago	State IL	Zip Code 60642-2510	Transaction ID : 2018071319136-909           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 ▼ 382.00	]									
SUBTOTAL of Receipts This Page (optiona	l)		187.00									
TOTAL This Period (last page this line num	ber only)											

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

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1-			Use separate schedule(s)	(check	only c	ne)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11		11b	11c		12	
				13		14	15		16	17
	y information copied from such Reports and St for commercial purposes, other than using the									
$\square$	NAME OF COMMITTEE (In Full)			_						
$ \rangle$	The Northwestern Mutual Life In	surance	Company Federal PAC	2						
<u>/</u>	Full Name of Individual (Last, First, Middle Init	ial) or Full O	organization Name							
Α.				Date	e of R	eceipt				
	Mailing Address 860 W Blackhawk St			0	™ 7	/ D 31	D / Y		)18	Y
	City	State	Zip Code	Tra	ansac	tion ID :	2018073			5
	Chicago	IL	60642-2510	Amo	unt of	Each F	Receipt th	nis Pe	əriod	
	FEC ID number of contributing	С							17.00	0
	federal political committee.				_	-y-				
	Name of Employer (for Individual)		upation (for Individual)		Mem	o Item				
	NML Receipt For:	jional Director	_							
	Primary General	Aggregate	Year-to-Date ▼							
	Other (specify) ▼	382.00								
	Full Name of Individual (Last, First, Middle Init	ial) or Full O	Vrappization Namo							
В.	Sperka, Steve, P, ,	iai) or Full O	rganization Name	Date	e of R	eceipt				
	Mailing Address S67W17735 Copper Oaks Ct			M	M	/ D I	) / Ү	Y	YY	Y
	<u></u> ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	State	Zip Code	0	7	15		201	18	
	City Muskego	WI	53150-7503				2018071 Receipt th			1
	FEC ID number of contributing					Lacini		115 1 0		_
	federal political committee.	С				-y		_	94.00	0
	Name of Employer (for Individual)	Occ	upation (for Individual)	- П	Mem	o Item				
	NML	Vpl	Field Rewards							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify) V		1316.00							
~	Full Name of Individual (Last, First, Middle Init	ial) or Full O	organization Name	Dete		:				
С.	Sperka, Steve, P, , Mailing Address S67W17735 Copper Oaks Ct				POTR	eceipt		V	Y	V
				0	7	31		20		
	City Muskego	State WI	Zip Code 53150-7503				2018073			57
		VVI	55150-7505	Amo	unt of	f Each F	Receipt th	is Pe	əriod	_
	FEC ID number of contributing federal political committee.	С						_	94.00	0
		0.000	unction (for Individual)	- 1	Mem	o Item				
	Name of Employer (for Individual) NML		upation (for Individual) Field Rewards							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		1316.00							
	Other (specify)		7							
Г					_			_		
s	UBTOTAL of Receipts This Page (optional)		••••••••••••••••••••••••••••••••••••••			y		_	205.00	J
Т	OTAL This Period (last page this line number of	only)								

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>K</b> 11a 13		11b 14	11c 15	12	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r				for the		pose of	soliciting	contribu	tions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PA	С							
A.	Full Name of Individual (Last, First, Middle Initia Stanley, Tony, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 3914 White Stone Rd				07	/	D 15	) / Y	y y 2018	Y	
	City Newtown Sq	State PA	Zip Code 19073-1095						<b>519136-6</b> is Period	6	
	FEC ID number of contributing federal political committee.	С							42.	00	
	Name of Employer (for Individual) Self-Employed		ipation (for Individual) eral Insurance Agent		Me	emc	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 588.00								
B	Full Name of Individual (Last, First, Middle Initia Stanley, Tony, , ,	al) or Full Or	rganization Name		Date of	Bo	oceint				
D.	Mailing Address 3914 White Stone Rd			07	/	D 10	) / Y	2018	Y		
	City Newtown Sq	State PA	Zip Code 19073-1095						119136-6	6	
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 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 ▼ , 588.00								
с.	Full Name of Individual (Last, First, Middle Initia Steigman, Jason, , ,	al) or Full Or	rganization Name		Date of	Re	eceipt				
	Mailing Address 2301 E Newton Ave				м м 07	1	15		2018 <sup>Y</sup>	Y	
	City Shorewood	State WI	Zip Code 53211-2617						319136-5 is Period	14	
	FEC ID number of contributing federal political committee.	С			<u> </u>	_	, .	. y	23.	00	
	Name of Employer (for Individual) NML		ipation (for Individual) aging Dire Pub Bond		Me	emo	tem Item				
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 286.00								
s	UBTOTAL of Receipts This Page (optional)		•	•			, ,	. ,	107.(	00	
т	OTAL This Period (last page this line number or	nly)	••••••	-			-				

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

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

FOR LINE NUMBER:

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	EMIZED RECEIFTS		Detailed Summary Page	×	11a		11	- H	11c		12	<u>-</u> _			
An or	y information copied from such Reports and State for commercial purposes, other than using the na	ments ma me and a	A not be sold or used by any pe address of any political committee	rson f to so	13 or the licit cor	purp ntrib	14 pos outic	se of	15 soliciti om su	ng ca uch c	16 ontribut committ	ions ee.			
$\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu														
A.	Full Name of Individual (Last, First, Middle Initial) Steigman, Jason, , , Mailing Address 2301 E Newton Ave	or Full O	Organization Name	Date of Receipt											
	City Shorewood	State WI	Zip Code 53211-2617									12			
		C		_ /	Amount	: of	Ea	ich Re	eceipt	this	Period	00			
	Name of Employer (for Individual) NML Receipt For: Primary General Other (specify) ▼	Mar	upation (for Individual) naging Dire Pub Bond Year-to-Date ▼ 286.00		Me	emo	o Ite	em							
B.	Full Name of Individual (Last, First, Middle Initial) Stone, Stephen, R, , Mailing Address 2511 N 95th St	or Full O	Organization Name		Date of	<sup>:</sup> Re	_	ipt D D 15	/		Y Y 2018	Y			
	City Wauwatosa FEC ID number of contributing federal political committee.	State WI	Zip Code 53226-1749		6 <b>9</b>										
	Name of Employer (for Individual) NML		upation (for Individual) Enterprise Risk Mgmt		Me	emo	o Ite	em							
	Receipt For:       A         Primary       General         Other (specify) ▼	ggregate	Year-to-Date ▼ 392.00												
C.	Full Name of Individual (Last, First, Middle Initial) Stone, Stephen, R, , Mailing Address 2511 N 95th St	or Full O	Organization Name		Date of	Re		•			V	V			
		<u></u>			07	ĺ	L	31		2	2018				
	City Wauwatosa	State WI	Zip Code 53226-1749								9173-5 Period	66			
	FEC ID number of contributing federal political committee.	С							,		28.0	00			
	Name of Employer (for Individual) NML		upation (for Individual) Enterprise Risk Mgmt		M	emo	o Ite	em							
	Receipt For:   A     Primary   General     Other (specify)	ggregate	Year-to-Date ▼ 392.00												
S	UBTOTAL of Receipts This Page (optional)		•••••				y		,	_	79.0	00			
т	OTAL This Period (last page this line number only	/)	••••••				-								

## Use separate schedule(s)

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	<b>X</b> 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 I	ife Insurance	Company Federal PA	С							
Full Name of Individual (Last, First, Mi A. Striano, Peter, F, , III	ddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11050 NW 78th PI			07 / D D / Y Y Y Y 2018							
City Parkland	State FL	Zip Code 33076-4723	Transaction ID : 2018071519136-39 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]							
Full Name of Individual (Last, First, Mi B. Striano, Peter, F, , III	ddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11050 NW 78th Pl			07 / D D / Y Y Y Y 07 31 2018							
City Parkland	State FL	Zip Code 33076-4723	Transaction ID : 2018073119136-39 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		208.00							
Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2912.00	]							
Full Name of Individual (Last, First, Mi C. Stribling, Steven, J, ,	ddle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 11830 W Whitaker Ave			07 / D D / Y Y Y Y 15 / 2018							
City Greenfield	State WI	Zip Code 53228-2455	Transaction ID : 2018071319136-898           Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		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 ▼ 550.00	]							
SUBTOTAL of Receipts This Page (optic	nal)		451.00							
TOTAL This Period (last page this line n	umber only)									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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17		Use separate schedule(s) for each category of the				(check only one)							
11	EMIZED RECEIPTS		2	<b>×</b> 11a		11b	11c		12				
	y information copied from such Reports and St for commercial purposes, other than using the												
	NAME OF COMMITTEE (In Full)		iduless of any political co	minitee	10 3				nom suc			<del>.</del>	
	The Northwestern Mutual Life In	surance	Company Federa	al PAC	,								
Α.	Full Name of Individual (Last, First, Middle Initi Stribling, Steven, J, ,	ial) or Full O	organization Name			Date o	f Re	eceipt					
	Mailing Address 11830 W Whitaker Ave					м м 07	/	D 31			)18	Ŷ	
	City Greenfield	State WI	Zip Code 53228-2455		_				<b>201807</b> Receipt t			4	
	FEC ID number of contributing federal political committee.	С				<u> </u>					35.0	0	
	Name of Employer (for Individual) NML		upation (for Individual) Product Development			M	lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550	.00									
	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	Irganization Name		+								
В.	Stugelmeyer, Brenda, J, ,		nganization Name			Date o	f Re	eceipt					
	Mailing Address 6970 W Fox Haven Ct						07 / D D / Y Y Y Y 2018						
	City Franklin	State WI	Zip Code 53132-7402		-				201807			9	
	FEC ID number of contributing federal political committee.	C				Amount of Each Receipt this Period 43.00							
	·						lomo	ltom			- 46		
	Name of Employer (for Individual) NML		upation (for Individual) & Real Estate Counsel				iemo	ltem					
	Receipt For:	Aggregate	Year-to-Date <b>V</b>										
	Other (specify) ▼		, 638	.00									
с.	Full Name of Individual (Last, First, Middle Initi Stugelmeyer, Brenda, J, ,	ial) or Full O	Organization Name			Date o	f Re	eceipt					
	Mailing Address 6970 W Fox Haven Ct					07	/	31			18 18	Ŷ	
	City Franklin	State WI	Zip Code 53132-7402						201807 Receipt t			25	
	FEC ID number of contributing federal political committee.	С				Ľ.		,	. y		43.0	0	
	Name of Employer (for Individual)		upation (for Individual) & Real Estate Counsel			N	lemo	ttem					
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 638	.00									
s	UBTOTAL of Receipts This Page (optional)							,	. ,		121.0	)	
т	OTAL This Period (last page this line number c	only)		►				-	-				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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every information coded from such Reports and Statements may not be odd or used by any perion for the purpose of soliciting contributions from such committee.         NAME OF COMMITTEE (in Full)         The Northwestern Mutual Life Insurance Company Federal PAC         Full Name of individual (Last, First, Middle initial) or Full Organization Name         A. Swain, Christopher, P.,         Malling Address 10927 N Wyngate Trce         City         Meguon         Yes         State         Zip Code         Malling Address 10927 N Wyngate Trce         City         Primary       General         Other (specify)       General         Other (specify)       General         City       Malling Address 10927 N Wyngate Trce         Cit		EMIZED RECEIPTS		for each category of the Detailed Summary Page		<b>X</b> 11a 11b 11c 12 13 14 15 16 17						
The Northwestern Mutual Life Insurance Company Federal PAC         A. Swain, Christopher, P,         Maiing Address 10927 N Wyngate Trce         City         Name of Employer (for Individual)         Yp Public Investments         Beceipt For:         Other (specify)         General         Other (specify)         B. Swain, Christopher, P,         Mailing Address 10927 N Wyngate Trce         City         Mailing Address 10927 N Wyngate Trce						on for the purpose of soliciting contributions						
A.       Swain, Christopher, P, .       Date of Receipt         Mailing Address 10927 N Wyngata Trce       07       15       2018         City       Meauon       Wit       S3092-5662       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       Occupation (for Individual) // Vp Public Investments       Meano       Memo Item         Name of Employer (for Individual) // Vp Public Investments       Aggregate Year-to-Date ▼       Date of Receipt in Period         B.       Swain, Christopher, P, .       Mailing Address 10927 N Wyngate Trce       City       S32.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt in Period       Date of Receipt in Period         Swain, Christopher, P, .       Mailing Address 10927 N Wyngate Trce       City       State       Zip Code         Name of Employer (for Individual) // Vp Public Investments       Qor gregate Year-to-Date ▼       Date of Receipt in Period         Receipt For:       Aggregate Year-to-Date ▼       Qorgegate Year-to-Date ▼       Date of Receipt in Period         Mailing Address 227 N Hollywood Ave       City       State       State       State         Primary       General       Occupation (for Individual)       Transaction ID: 2016071319173-682         Name of Employer (for Individual)		. ,	surance	Company Federa	al PAC							
City     State     Zip Code     Transaction ID: 2018071319136-696       FEC ID number of contributing federal political committee.     C     Amount of Each Receipt his Period       Name of Employer (for Individual) NML     Occupation (for Individual) Yp Public Investments     Memo Item       Receipt For:	Α.											
Mequon       WI       53982-5862         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Maine of Employer (for Individual) NML       Occupation (for Individual) Vp Public Investments       Memo Item         Receipt For: Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         Mailing Address 10927 N Wyngate Tree       C       38.00         City       State       ZIp Code WI       S3092-5862         Receipt For: Mequon       C       State       ZIp Code WI       S3092-5862         Name of Employer (for Individual) NML       Occupation (for Individual) Vp Public Investments       Date of Receipt this Period         Receipt For: Primary       General       C       S38.00         Receipt For: Primary       General       C       Memo Item         C       Swoboda, Benjamin, E, ,       Aggregate Year-to-Date ▼       Date of Receipt         Maing Address 5227 N Holywood Ave       C       State       ZIp Code         Maing Address 6227 N Holywood Ave       C       State       Zip Code         Maing Address 6227 N Holywood Ave       C       State       Zip Code         Maing Address 6227 N Holywood Ave       C       State       Zip Code												
rederal political committee.       0		-										
NML       Vp Public Investments         Receipt For:       Aggregate Year-to-Date ▼         Date of Receipt       532.00         B. Swain, Christopher, P, .       Date of Receipt         Mailing Address 10927 N Wyngate Tree       07 / 31 / 2018         City       State       Zip Code         Mecuon       Wi       53092-5862         FEC. ID number of contributing tederal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Vp Public Investments       38.00         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       S32,00         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify) ▼       S32,00         Receipt For:       Aggregate Year-to-Date ▼         Mailing Address 5227 N Hollywood Ave       S32,00         City       Whitelish Bay         Whitelish Bay       Wil         Suborda, Benjamin, E, ,       Mailing Address 5227 N Hollywood Ave         City       State       Zip Code		0	С			38.00						
Primary       General       Primary       Size of the initial or Full Organization Name         B. Swain, Christopher, P, ,       Mailing Address 10927 N Wyngate Trce       Date of Receipt         City       State       Zip Code         Mequon       State       Sigore_5862         FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       Occupation (for Individual)         Vp Public Investments       Size.00         Primary       General         Other (specify) ▼       State         Zip Code       Size.00         Name of Employer (for Individual)       Occupation (for Individual)         Vp Public Investments       Size.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         C. Swoboda, Benjamin, E, ,       Mailing Address 5:227 N Hollywood Ave       Transaction ID : 2018071319136-724         Mailing Address 5:227 N Hollywood Ave       C       Size View Size/Secℜ       Primary         General       Occupation (for Individual)       Aggregate Year-to-Date ▼       19.00         Mame of Employer (for Individual)       Aggregate Year-to-Date ▼       19.00         Mame of Employer (for Individual)       Aggregate Year-to-Date ▼       19.00						Memo Item						
B. Swain, Christopher, P, ,       Date of Receipt         Mailing Address 10927 N Wyngate Trce       07       31       2018         City       State       Zip Code       Transaction ID : 2018071319172-682         Mequon       C       Source of contributing tederal political committee.       07       31       2018         Name of Employer (for Individual) MML       Occupation (for Individual) Vp Public Investments       Memo Item       0         Primary       General Other (specify) ▼       Aggregate Year-to-Date ▼       015       2018         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt       07       15       2018         City       Mailing Address 5227 N Hollywood Ave       C       015       2018       15       2018         City       State       Zip Code       15       2018       15       2018         Mailing Address 5227 N Hollywood Ave       C       15       2018       15       2018         City       Whitefish Bay       State       Zip Code       15       2018       19.00         FEC ID number of contributing federal political committee.       C       19.00       19.00       19.00       19.00       19.00       19.00       19.00       19.00       <		Primary General	Aggregate		00							
City       State       Zip Code       Sog2-5862         Mequon       City       Sog2-5862       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       38.00         Name of Employer (for Individual) Vp Public Investments       Occupation (for Individual) Vp Public Investments       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       Memo Item       Date of Receipt         Ctly       Mailing Address 5227 N Hollywood Ave       Sog217-5322       Date of Receipt This Period         City       State       Zip Code       Transaction ID : 2018071319136-724         Mailing Address 5227 N Hollywood Ave       Sog217-5322       Transaction ID : 2018071319136-724         Mailing Address 5227 N Hollywood Ave       City       State       Zip Code         Whitefish Bay       Vit       Sog217-5322       Transaction ID : 2018071319136-724         NML       Aggregate Year-to-Date ▼       19.00       Memo Item         NML       Aggregate Year-to-Date ▼       95.00       95.00         SUBTOTAL of Receipts This Page (optional)	в.		al) or Full C	Drganization Name		Date of Receipt						
Mequon       Wi       53092-5862       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       38.00         Name of Employer (for Individual) NML       Occupation (for Individual) Vp Public Investments       Memo Item         Receipt For:       Primary       General       Aggregate Year-to-Date ▼         Other (specify) ▼       Aggregate Year-to-Date ▼       Date of Receipt         City       State       Zip Code         Whitefish Bay       State       Zip Code         FEC ID number of contributing federal political committee.       C       10 00         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         Mailing Address 5227 N Hollywood Ave       C       10 00         City       State       Zip Code       Transaction ID : 2018071319136-724         Mame of Employer (for Individual)       Occupation (for Individual)       Aggregate Year-to-Date ▼       19.00         Memo Item       19.00       Memo Item       19.00       95.00         SUBTOTAL of Receipts This Page (optional)		Mailing Address 10927 N Wyngate Trce										
federal political committee.       38.00         Name of Employer (for Individual) NML       Occupation (for Individual) Vp Public Investments       Memo Item         Receipt For:       Aggregate Year-to-Date ▼       Date of Receipt         Ctly       State       Zip Code         Whitefish Bay       WI       53217-5322         FEC ID number of contributing federal political committee.       Cuprementation ID : 2018071319136-724         Name of Employer (for Individual) NML       Occupation (for Individual) Astgneni&Ast Sec/Secℜ       Memo Item         Receipt For:       Primary       General       Occupation (for Individual)         Name of Employer (for Individual) NML       Aggregate Year-to-Date ▼       Memo Item         SUBTOTAL of Receipts This Page (optional)												
NML       Vp Public (vor methodal)       Vp Public (vor methodal)         NML       Vp Public (vor methodal)       Vp Public (vor methodal)         Primary       General       General       General         Other (specify) ▼       General       General       General         Other (specify) ▼       General       General       General         Other (specify) ▼       General       General       Date of Receipt         Mailing Address 5227 N Hollywood Ave       General       General       General         City       State       Zip Code       Transaction ID : 2018071319136-724         Whitefish Bay       State       Sigregate Year-to-Sa22       Amount of Each Receipt His Period         FEC ID number of contributing federal political committee.       C       19.00       Merno Item         NML       Occupation (for Individual)       Aggregate Year-to-Date ▼       Merno Item         NML       Aggregate Year-to-Date ▼       95.00       95.00         SUBTOTAL of Receipts This Page (optional)		0	С			38.00						
Primary       General         Other (specify)       General         Other (specify)       532.00         Full Name of Individual (Last, First, Middle Initial) or Full Organization Name       Date of Receipt         City       State       Zip Code         Whitefish Bay       State       Zip Code         FEC ID number of contributing federal political committee.       C       15         Name of Employer (for Individual)       Occupation (for Individual)       Astgneni&Ast Sec/Secℜ         Receipt For:       Aggregate Year-to-Date ▼       Memo Item         Uher (specify)       Querty Contact       95.00		NML		1 ( )		Memo Item						
C. Swoboda, Benjamin, E, ,       Date of Receipt         Mailing Address 5227 N Hollywood Ave       07       15       2018         City       State       Zip Code       Transaction ID : 2018071319136-724         Whitefish Bay       WI       53217-5322       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       19.00       19.00         Name of Employer (for Individual) NML       Occupation (for Individual) Astgncni&Ast Sec/Secℜ       Memo Item         Primary       General       266.00       266.00       95.00         SUBTOTAL of Receipts This Page (optional)       95.00       95.00		Primary General	Aggregate		.00							
City       State       Zip Code         Whitefish Bay       WI       53217-5322         FEC ID number of contributing federal political committee.       C       Amount of Each Receipt this Period         Name of Employer (for Individual)       Occupation (for Individual)       19.00         NML       Astgnenl&Ast Sec/Secℜ       Memo Item         Primary       General       266.00         Other (specify)       95.00	с.	· · · ·	al) or Full C	Drganization Name		Date of Receipt						
Whitefish Bay       WI       53217-5322       Amount of Each Receipt this Period         FEC ID number of contributing federal political committee.       C       19.00         Name of Employer (for Individual)       Occupation (for Individual)       Memo Item         NML       Aggregate Year-to-Date ▼       Memo Item         Primary       General       266.00       95.00         SUBTOTAL of Receipts This Page (optional)												
federal political committee.       19.00         Name of Employer (for Individual)       Occupation (for Individual)         NML       Astgncnl&Ast Sec/Secℜ         Receipt For:       Aggregate Year-to-Date ▼         Primary       General         Other (specify)       266.00         SUBTOTAL of Receipts This Page (optional)												
NML       Astgncnl&Ast Sec/Secℜ         Receipt For:       Aggregate Year-to-Date ▼         Other (specify)       266.00         SUBTOTAL of Receipts This Page (optional)		0	С			19.00						
Primary       General         Other (specify)       266.00         SUBTOTAL of Receipts This Page (optional)		NML		,		Memo Item						
		Primary General	Aggregate		00							
TOTAL This Devied (last means this line month on each)	⊢					95.00						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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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 usin		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	fe Insurance Company Federal P	AC
Full Name of Individual (Last, First, Middl A. Swoboda, Benjamin, E, ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 5227 N Hollywood Ave		07 31 2018
City Whitefish Bay	StateZip CodeWI53217-5322	Transaction ID : 2018073119173-720 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.00
Name of Employer (for Individual) NML Receipt For:	Occupation (for Individual) Astgncnl&Ast Sec/Secℜ	Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	
Full Name of Individual (Last, First, Midd B. Talajkowski, Thomas, , ,	Date of Receipt	
Mailing Address 4119 N Prospect Ave		07 15 / Y Y Y Y 07 15 2018
City Shorewood	StateZip CodeWI53211-1741	Transaction ID : 2018071319136-716 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.00
Name of Employer (for Individual) NML	Occupation (for Individual) Avp Tax And Tax Policy	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 552.00	
Full Name of Individual (Last, First, Midd C. Talajkowski, Thomas, , ,	le Initial) or Full Organization Name	Date of Receipt
Mailing Address 4119 N Prospect Ave		07 / D D / Y Y Y Y 07 31 2018
City Shorewood	StateZip CodeWI53211-1741	Transaction ID : 2018073119173-712           Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.00
Name of Employer (for Individual) NML Receipt For:	Occupation (for Individual) Avp Tax And Tax Policy	Memo Item
Primary General Other (specify)	Aggregate Year-to-Date ▼ 552.00	
	al)	

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

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

FOR LINE NUMBER:

(check only one)

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			for each category of the Detailed Summary Page	✗         11a         11b         11c         12           13         14         15         16         1										
or	y information copied from such Reports and State for commercial purposes, other than using the na	ements ma ame and ad	y not be sold or used by any p ddress of any political committe	erson for the purpose of soliciting contributions										
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	urance	Company Federal PA	С										
Α.	Full Name of Individual (Last, First, Middle Initial Tews, Michael, F, , Mailing Address 609 S 249th Cir	) or Full Or	rganization Name	Date of Receipt										
	City Waterloo	State NE	Zip Code 68069-4432	Transaction ID : 2018071519136-8 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 ▼ 1750.00	1										
	Full Name of Individual (Last, First, Middle Initial Tews, Michael, F, ,	) or Full Or	rganization Name	Date of Receipt										
	Mailing Address 609 S 249th Cir	1		07 31 2018										
	City Waterloo	State NE	Zip Code 68069-4432	Transaction ID : 2018073119136-8 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) Ieral Insurance Agent	Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00	1										
С.	Full Name of Individual (Last, First, Middle Initial Theodore, Scott, P, ,	) or Full Or	rganization Name	Date of Receipt										
	Mailing Address 12505 Ventana Mesa Cir	1		07 / D D / Y Y Y Y 07 15 2018										
	City Castle Pines	State CO	Zip Code 80108-9148	Transaction ID : 2018071519136-19           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		208.00										
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent	Memo Item										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 2912.00	]										
s	UBTOTAL of Receipts This Page (optional)			458.00										
т	OTAL This Period (last page this line number onl	ly)												

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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11	EMIZED RECEIPTS			for each category of the Detailed Summary Page		¥ 11a 13		-	1b 4	11c		12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r														
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	C	ompany Federal PAC	)										
Α.	Full Name of Individual (Last, First, Middle Initia Theodore, Scott, P, ,	al) or Full C	Drga	nization Name		Date	of R	lece	eipt						
	Mailing Address 12505 Ventana Mesa Cir					07 31 2018									
	City Castle Pines	State CO		Zip Code 80108-9148	Transaction ID : 2018073119136-19           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С				[]		,				208.	00		
	Name of Employer (for Individual) Self-Employed			tion (for Individual) I Insurance Agent			Mem	io l	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2912.00											
в.	Full Name of Individual (Last, First, Middle Initia Timmer, Douglas, D, ,	al) or Full C	nization Name		Date	of R	lece	eipt							
	Mailing Address 13525 N Laurel Ln	Otata		7. 0.4		<sup>™</sup> 07	M	/	D 0 31	1		18	Y		
	City Mequon	State WI		Zip Code 53097-2427						201807 eceipt			30		
	FEC ID number of contributing federal political committee.	С				<u> </u>		,		-		15.(	00		
	Name of Employer (for Individual) NML		•	tion (for Individual) Cnl & Ast Sec/Secr			Mem	io l	tem						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 210.00											
с.	Full Name of Individual (Last, First, Middle Initia Tronco, Alex, J, ,	al) or Full C	Drga	nization Name		Date	of R	lece	eipt						
	Mailing Address 11 Stoneridge Dr	1				<sup>M</sup> 07	M	′	D 15			)18 <sup>°</sup>	Y		
	City Loudonville	State NY		Zip Code 12211-2625	_					201807			0		
	FEC ID number of contributing federal political committee.	С				Ē		y				208.	00		
	Name of Employer (for Individual) Self-Employed Receipt For:	Ger	nera	tion (for Individual) I Insurance Agent			Mem	no I	tem						
	Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 2082.00											
s	UBTOTAL of Receipts This Page (optional)			•				,		9		431.0	00		
т	OTAL This Period (last page this line number of	nly)		<b></b>				-		1.45					

## Use separate schedule(s)

FOR LINE NUMBER:

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171			(check only one)							
			for each category of the Detailed Summary Page		<b>K</b> 11a 13		11b 14	11c	12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the				for the		pose of	soliciting	g contribu	tions
$\left\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Company Federal PAC	2						
A.	Full Name of Individual (Last, First, Middle Initia Tronco, Alex, J, ,	al) or Full Oi	rganization Name		Date of	Re				
	Mailing Address 11 Stoneridge Dr				07	1 '	31		2018	Y
	City Loudonville	State NY	Zip Code 12211-2625						<b>119136-5</b> iis Period	
	FEC ID number of contributing federal political committee.	С			<u> </u>				208.	00
	Name of Employer (for Individual) Self-Employed Receipt For:	Gen	upation (for Individual) eral Insurance Agent		Me	emo	tem			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2082.00							
в.	Full Name of Individual (Last, First, Middle Initia Trost, Chris, G, ,	al) or Full Oi	rganization Name		Date of	Re	eceipt			
	Mailing Address 1218 E Olive St	1-			м м 07	/	D 15		y y 2018	Y
	City Shorewood	State WI	Zip Code 53211-1825						319136-5	13
	FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period						
	Name of Employer (for Individual) NML	upation (for Individual) Actuary		Me	emo	ttem				
	Receipt For: Primary General Other (specify) ▼									
— С.	Full Name of Individual (Last, First, Middle Initia Trost, Chris, G, ,	al) or Full O	rganization Name		Date of	Re	eceipt			
	Mailing Address 1218 E Olive St				м м 07	/	31		үүү 2018	Y
	City Shorewood	State WI	Zip Code 53211-1825						119173-	
	FEC ID number of contributing federal political committee.	С		<u> </u>		y :		40.	00	
	Name of Employer (for Individual)		upation (for Individual) Ictuary	Memo Item						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 572.00							
s	UBTOTAL of Receipts This Page (optional)						y .	,	288.	00
т	OTAL This Period (last page this line number or	nly)		-						

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

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	EMIZED RECEIPTS			or each category of the Detailed Summary Page		11a 13		11b 14	11c 15	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the n												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	surance	Сс	ompany Federal PAC	2								
Α.	Full Name of Individual (Last, First, Middle Initia Tucker, Leo, C, ,	l) or Full C	Drgar	nization Name		Date o	of Re	ceipt					
	Mailing Address 605 Potomac River Rd					M 07	/	D D 15	/ Y	y y 2018	Y		
	City Mc Lean	State VA		Zip Code 22102-1402						<b>519136</b>			
	FEC ID number of contributing federal political committee.	С						-	- -	208	_		
	Name of Employer (for Individual) Self-Employed			ion (for Individual) Insurance Agent		N	1emo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2082.00									
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tucker, Leo, C, ,							ceipt					
	Mailing Address 605 Potomac River Rd	s 605 Potomac River Rd						07 31 2018					
	City Mc Lean	State VA		Zip Code 22102-1402						<b>119136-:</b> nis Perioc			
	FEC ID number of contributing federal political committee.	С						208	.00				
	Name of Employer (for Individual) Self-Employed		•	tion (for Individual) I Insurance Agent		N	lemo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Yea	r-to-Date ▼ 2082.00									
<u> </u>	Full Name of Individual (Last, First, Middle Initia Van Der Hyde, John, , ,	l) or Full C	Drgar	nization Name		Date o	of Re	ceipt					
	Mailing Address 849 Sabot Hill Rd					<sup>M</sup> 07	/	D 15	/ Y	2018 Y	Y		
	City Manakin Sabot	State VA		Zip Code 23103-3009						<b>1519136-</b> his Period			
	FEC ID number of contributing federal political committee.	С						y		208	_		
	Name of Employer (for Individual) Self-Employed		Occupation (for Individual) General Insurance Agent					Item					
	Receipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 2912.00									
s	UBTOTAL of Receipts This Page (optional)			•				y	. ,	624	.00		
Т	OTAL This Period (last page this line number or	nly)			-								

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

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

FOR LINE NUMBER:

(check only one)

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14       15       16       17         re purpose of soliciting contributions contributions from such committee.       16       17         of Receipt       7       2018       12         msaction ID : 2018073119136-11       208.00       208.00         Memo Item       15       2018       208.00         Memo Item       34.00       34.00         Memo Item       34.00       34.00									
of Receipt y 2018 nsaction ID : 2018073119136-11 unt of Each Receipt this Period 208.00 Memo Item of Receipt y 15 / 2018 nsaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y									
y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y       y									
7       31       2018         nsaction ID : 2018073119136-11       208.00         unt of Each Receipt this Period       208.00         Memo Item       208.00         y       15         2018       2018         nsaction ID : 2018071319136-771       2018         unt of Each Receipt this Period       34.00									
of Receipt y 1 D D 1 2018 msaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
208.00 Memo Item of Receipt 7 15 2018 msaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
Memo Item of Receipt / 15 / 2018 nsaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
of Receipt 7 15 2018 msaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
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7 15 2018 msaction ID : 2018071319136-771 unt of Each Receipt this Period 34.00									
unt of Each Receipt this Period 34.00									
unt of Each Receipt this Period 34.00									
Memo Item									
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07 31 2018									
nsaction ID : 2018073119173-767									
unt of Each Receipt this Period									
34.00									
Memo Item									
7									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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116	MIZED RECEIPTS			for each category of the Detailed Summary Page	>	< 1 1	1a 3		11   14	lb 1	11c		12 16	17			
	information copied from such Reports and Sta or commercial purposes, other than using the										soliciti		ontribu	itions			
	IAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	C	ompany Federal PAC	;												
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vedder, Andrew, T, ,						Date of Receipt										
_	Iailing Address     4856 N Bartlett Ave       State     Zip Code						07 / D D / Y Y Y Y 07 15 2018										
	Sity Nhitefish Bay	State WI	Transaction ID : 2018071319136-900           Amount of Each Receipt this Period														
	EC ID number of contributing ederal political committee.	C	_						,		-		32	.00			
Ν	lame of Employer (for Individual) IML		•	tion (for Individual) vency & Risk Mgmt			М	emo	o It	em							
F	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 364.00													
	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vedder, Andrew, T, ,							f Re	ece	ipt							
	failing Address 4856 N Bartlett Ave						07 31 2018										
	City Vhitefish Bay	State WI		Zip Code 53217-6016	_	Transaction ID : 2018073119173-896 Amount of Each Receipt this Period											
	EC ID number of contributing ederal political committee.	C					32.00										
	lame of Employer (for Individual) IML		•	ation (for Individual) vency & Risk Mgmt			М	emo	o It	em							
F	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 364.00													
	ull Name of Individual (Last, First, Middle Initi Warren, John, W, ,	al) or Full C	)rga	nization Name		Dat	e o	f Re	ece	ipt							
N	Aailing Address 4201 N Murray Ave							07 15 2018									
	City Shorewood	State WI		Zip Code 53211-2013	_						<b>20180</b> Receipt						
	EC ID number of contributing ederal political committee.	С	-			Ľ			,		,	_	18	_			
Ν	lame of Employer (for Individual)	Occupation (for Individual) Ast Gn Cnl & Ast Sec/Ins						lemo	o It	em							
F	Receipt For: Primary General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 252.00													
SU	BTOTAL of Receipts This Page (optional)			•			_		,		,	_	82	00			
то	TAL This Period (last page this line number o	nly)		•••••		Ĺ			-								

### Use separate schedule(s)

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		Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17								
or for commercial purposes, other than using to 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	Insulance										
Full Name of Individual (Last, First, Middle Warren, John, W, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 4201 N Murray Ave			07 31 2018								
City Shorewood	State WI	Zip Code 53211-2013	Transaction ID : 2018073119173-804 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		18.00								
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 ▼ 252.00	]								
Full Name of Individual (Last, First, Middle B. Wassweiler, Andrew, T, ,	Data of Descript										
Mailing Address 6746 W River Terrace Dr # D			Date of Receipt 07 15 2018								
City	State WI	Zip Code	Transaction ID : 2018071319136-665								
Franklin FEC ID number of contributing federal political committee.	C	53132-8363	Amount of Each Receipt this Period								
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 ▼ 254.00	]								
Full Name of Individual (Last, First, Middle C. Wassweiler, Andrew, T, ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6746 W River Terrace Dr # D			07 / D D / Y Y Y Y 2018								
City Franklin	State WI	Zip Code 53132-8363	Transaction ID : 2018073119173-661           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) g Dir High Yield	Memo Item								
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 254.00	]								
SUBTOTAL of Receipts This Page (optional).			56.00								
TOTAL This Period (last page this line number	er only)										

### Use separate schedule(s)

FOR LINE NUMBER:

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	-	Use separate schedule(s)	(check only one)				
		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.				
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	Insurance	Company Federal PA	.C				
Full Name of Individual (Last, First, Middle Williams, Jeffrey, B, ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Williams, Jeffrey, B, ,						
Mailing Address 2004 N 72nd St			07 15 / Y Y Y Y 2018				
City Wauwatosa	State WI	Zip Code 53213-1828	Transaction ID : 2018071319136-489           Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		39.00				
Name of Employer (for Individual) NML		upation (for Individual) Nmis-Nmwmc Chief Compl Off	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00	]				
Full Name of Individual (Last, First, Middle B. Williams, Jeffrey, B, ,	Date of Receipt						
Mailing Address 2004 N 72nd St	07 31 2018						
City Wauwatosa	State WI	Zip Code 53213-1828	Transaction ID : 2018073119173-487 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		39.00				
Name of Employer (for Individual) NML		upation (for Individual) Nmis-Nmwmc Chief Compl Off	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 582.00	]				
Full Name of Individual (Last, First, Middle C. Williams-Kemp, Kamilah, D, ,	Initial) or Full O	rganization Name	Date of Receipt				
Mailing Address 8645 N Dean Cir			07 / D D / Y Y Y Y 2018				
City River Hills	State WI	Zip Code 53217-2038	Transaction ID : 2018071319136-672         Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		80.00				
Name of Employer (for Individual) NML		upation (for Individual) Di & Ltc	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1120.00	]				
SUBTOTAL of Receipts This Page (optional).			158.00				
TOTAL This Period (last page this line numb	er only)						

### Use separate schedule(s)

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ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17						
			person for the purpose of soliciting contributions be to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)	· ·	0 E I I BA							
The Northwestern Mutual Li	te Insurance	Company Federal PA							
Full Name of Individual (Last, First, Midd A. Williams-Kemp, Kamilah, D, ,									
Mailing Address 8645 N Dean Cir			07 31 2018						
City River Hills	State WI	Zip Code 53217-2038	Transaction ID : 2018073119173-668 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		80.00						
Name of Employer (for Individual) NML		upation (for Individual) Di & Ltc	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1120.00	]						
Full Name of Individual (Last, First, Midd B. Worrell, Richard, , ,	Date of Receipt								
Mailing Address 2423 Beretania Cir									
City Charlotte	State NC	Zip Code 28211-3631	Transaction ID : 2018071519136-49 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) Ieral Insurance Agent	Memo Item						
Receipt For:	Aggregate	Year-to-Date ▼	1						
Other (specify) <b>v</b>		, 2912.00	1						
Full Name of Individual (Last, First, Midd C. Worrell, Richard, , ,	le Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2423 Beretania Cir			07 31 2018						
City Charlotte	State NC	Zip Code 28211-3631	Transaction ID : 2018073119136-49 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 ▼ 2912.00	]						
SUBTOTAL of Receipts This Page (optional	al)		496.00						
TOTAL This Period (last page this line nur	nber only)								

### Use separate schedule(s)

FOR LINE NUMBER:

PAGE 112 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
I LIVIIZED KEGEIFIS		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 Mut		Company Federal PA	С						
Full Name of Individual (Last, Fin Mright, John, William, , II	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wright, John, William, , II								
Mailing Address 510 King Rd NW	1		07 15 2018						
City Atlanta	State GA	Zip Code 30342-4011	Transaction ID : 2018071519136-24 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		41.67						
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 ▼ 583.38	1						
Full Name of Individual (Last, Fin B. Wright, John, William, , II	Date of Receipt								
Mailing Address 510 King Rd NW			07 31 / Y Y Y Y 2018						
City Atlanta	State GA	Zip Code 30342-4011	Transaction ID : 2018073119136-24 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		41.67						
Name of Employer (for Individua Self-Employed	<i>,</i>	upation (for Individual) neral Insurance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 583.38	]						
Full Name of Individual (Last, Fin C. Yeazel, Brian, K, ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address N110W5390 W	Highland Dr		M M / D D / Y Y Y Y 07 15 2018						
City Cedarburg	State WI	Zip Code 53012-3604	Transaction ID : 2018071319136-591           Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		18.00						
Name of Employer (for Individua NML		upation (for Individual) aging Director	Memo Item						
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 252.00	]						
SUBTOTAL of Receipts This Page	(optional)		101.34						
TOTAL This Period (last page this	line number only)								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

(check only one)

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••			Detailed Summary Page		<b>*</b> 11a 13	-	_	11b 14	$\mid$	11c 15	12	17	
	ny information copied from such Reports and Star for commercial purposes, other than using the				for th			oose c		liciting	contrib	utions	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In					Jont			,				
A.	Full Name of Individual (Last, First, Middle Initi Yeazel, Brian, K, , Mailing Address N110W5390 W Highland Dr	(Last, First, Middle Initial) or Full Organization Name Date of Received Signal Dr									• Y • Y	Y	
	-	Otate	Zin Code	07 31 2018									
	City Cedarburg	State WI	Zip Code 53012-3604		Transaction ID : 2018073119173-588           Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>				18.00				
	Name of Employer (for Individual)		upation (for Individual) naging Director			Mer	mo	Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00										
В.	Full Name of Individual (Last, First, Middle Initi Young, Catherine, M, , Mailing Address 929 N ASTOR ST UNIT	rganization Name	Date of Receipt										
			07 15 2018										
	City MILWAUKEE	State WI	Zip Code 53202	_							319136-		
	FEC ID number of contributing federal political committee.	С						Lacii	nec		is Perio 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 ▼ 720.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Young, Catherine, M, ,	al) or Full C	rganization Name		Date	of I	Re	ceipt					
	Mailing Address 929 N ASTOR ST UNIT				M 07	М	/	3	D 1	/ Y	y y 2018	Y	
	City MILWAUKEE	State WI	Zip Code 53202								<b>119173</b> - is Perio		
	FEC ID number of contributing federal political committee.	С						J	nec			.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 ▼ 720.00										
5	UBTOTAL of Receipts This Page (optional)		•		[			y		9	138	.00	
1	<b>OTAL</b> This Period (last page this line number o	nly)		•	Γ.								

### Use separate schedule(s)

FOR LINE NUMBER:

PAGE 114 OF

1 T	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)									
11			for each category of the Detailed Summary Page		<b>4</b> 11a 13		11b 14	11c		2	17			
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	erson to 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 PAC	2										
Α.	Full Name of Individual (Last, First, Middle Initia Zach, T Scott, , ,	al) or Full O	rganization Name	Date of Receipt										
	Mailing Address 6630 Country Creek Ln	1-			07 15 / Y Y Y Y 2018									
	City Cedar Rapids	State IA	Zip Code 52403-7023					2018071 leceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>				·	125.00	)			
	Name of Employer (for Individual) Self-Employed		upation (for Individual) eral Insurance Agent		М	emo	tem							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1750.00											
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Zach, T Scott, , ,						eceipt							
	Mailing Address 6630 Country Creek Ln					07 31 Y Y Y Y 2018								
	City	State	Zip Code		Trans	acti	ion ID :	2018073	11913	36-43				
	Cedar Rapids	IA	52403-7023	_	Amoun	t of	Each R	leceipt th	nis Pe	riod				
	FEC ID number of contributing federal political committee.	С		125.00										
	Name of Employer (for Individual) Self-Employed		upation (for Individual) neral Insurance Agent		M	emo	tem							
	Receipt For:	Aggregate	Year-to-Date ▼ 1750.00											
	Full Name of Individual (Last, First, Middle Initia Zale, Thomas, D, ,	al) or Full O	rganization Name		Date of	Be								
0.	Mailing Address 2818 E Menlo Blvd				07	/	15	) / Y	201					
	City Shorewood	State WI	Zip Code 53211-2652					<b>201807</b> 1 leceipt th			2			
	FEC ID number of contributing federal political committee.	С			<u> </u>		9			174.00	D			
	Name of Employer (for Individual) NML		upation (for Individual) Real Estate		М	emo	tem							
	Receipt For: Primary General Other (specify)	nary General General												
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number o			-			y .	5	2	124.00				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE 115 OF

			Use separate schedule(s)	(check only one)								
111	EMIZED RECEIPTS		for each category of the Detailed Summary Page	<b>X</b> 11a 13	11b 14	11c	12	Г	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ins	name and a	ddress of any political committee	to solicit cont								
<b>A</b> .	Full Name of Individual (Last, First, Middle Initia Zale, Thomas, D, ,	al) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 2818 E Menlo Blvd			07 31 2018								
	City Shorewood	State WI	Zip Code 53211-2652		<b>ction ID :</b> of Each R				3			
	FEC ID number of contributing federal political committee.	С					1	74.00				
	Name of Employer (for Individual) NML		upation (for Individual) Real Estate	Me	no Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2436.00									
в.	Full Name of Individual (Last, First, Middle Initia Zehner, Rick, T, ,	Date of	Receipt									
	Mailing Address 203 W Ravine Baye Rd	07	07 15 2018									
	City Bayside	State WI	Zip Code 53217-1334		<mark>ction ID :</mark> of Each R				<u>i</u>			
	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: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 614.00									
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia Zehner, Rick, T, ,	al) or Full O	rganization Name	Date of	Receipt							
	Mailing Address 203 W Ravine Baye Rd	1		07	/ D D D 31	) / Y	۲ 2018	Y Y }	]			
	City Bayside	State WI	Zip Code 53217-1334		ction ID : of Each R				1			
	FEC ID number of contributing federal political committee.	С			, . , .	. ,		43.00	,			
	Name of Employer (for Individual) MML	upation (for Individual) tesearch & Special Projects										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 614.00									
	UBTOTAL of Receipts This Page (optional)					· ·	-	60.00 03.34	-			

S	CHEDULE B (FEC Form 3X)			FC	OR LIN	IE NUMBER: PAGE 116 OF 121					
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cl	heck o 21 28 28						
Ar or	y information copied from such Reports and State for commercial purposes, other than using the na	ments may r me and addr	not be sold or used ress of any politica	d by I corr	any pennittee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	Irance Co	ompany Fede	eral	PAC	2					
Α.	Full Name (Last, First, Middle Initial) US Bank					Date of Disbursement					
	Mailing Address 777 E.Wisconsin Ave.		1			07 16 2018					
	City Milwaukee Purpose of Disbursement	State WI	Zip Code 53202			FEC Identification Number					
	Service Charge Candidate Name				01 egory/	Transaction ID : 65A86948F44 Amount of Each Disbursement this Period					
	Office Sought: House Disburse	ment For: Primary	General		ype	239.55					
	State: District:	Other (spec	cify) ▼			Memo Item					
В.	Full Name (Last, First, Middle Initial)					Date of Disbursement					
	Mailing Address										
	City Purpose of Disbursement	State Zip Code				FEC Identification Number					
	Candidate Name	Category/ Type				Amount of Each Disbursement this Period					
	Office Sought: House Disburse Senate President	ment For: Primary Other (spec	General								
	State: District:					Memo Item					
C.						Date of Disbursement					
	Mailing Address										
	City	State	Zip Code			FEC Identification Number					
	Purpose of Disbursement Candidate Name		[	Cate	egory/	Amount of Each Disbursement this Period					
	Office Sought: House Disburse	ment For:			/pe						
	State: District:	Primary Other (spec	General cify) ▼			Memo Item					
	UBTOTAL of Disbursements This Page (optional).					239.55					
⊢	OTAL This Period (last page this line number only				-	239.55					

S	CHEDULE B (FEC Form 3X)			FC	RLINF	NUMBER: PAGE 117 OF 121
	EMIZED DISBURSEMENTS		arate schedule(s) category of the	-	neck on	ly one)
			Summary Page		21b 28a	
	ny information copied from such Reports and State for commercial purposes, other than using the na					
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)	-	_			
	The Northwestern Mutual Life Insu	irance C	ompany Fec	aeral	PAC	
<u> </u>	Full Name (Last, First, Middle Initial) Ann Wagner For Congress					Date of Disbursement
						M M / D D / Y Y Y Y
	Mailing Address PO Box 50					07 12 2018
	City Ballwin	State MO	Zip Code 63022			FEC Identification Number
	Purpose of Disbursement		00022	-	_	C C00495846
	2018 General Candidate Name			01	11	Transaction ID : EFF090E7DF
	Wagner, Ann, Louise, ,				gory/ pe	Amount of Each Disbursement this Period
		ment For: 2	2018	. ,	• • •	500.00
	Senate President	Primary Other (spe	General			
	State: MO District: 02		uiy) ▼			Memo Item
_	Full Name (Last, First, Middle Initial)					
В.	Beatty For Congress					Date of Disbursement
	Mailing Address 222 East Town Street Suite 2W					07 11 2018
	City	State OH	Zip Code			FEC Identification Number
	Columbus Purpose of Disbursement	ОП	43215	_	_	C C00507368
	2018 General			0	11	Transaction ID : 8FDAA07839/
	Candidate Name Beatty, Joyce, , ,				gory/ pe	Amount of Each Disbursement this Period
		ment For:	2018	.,	<u>po</u>	1000.00
	Senate	Primary	General			
	State: OH District: 03	Other (spe	спу)			Memo Item
_	Full Name (Last, First, Middle Initial)					
C.	Bill Foster For Congress					Date of Disbursement
	Mailing Address P.O. Box 9104					07 11 2018
	City Aurora	State IL	Zip Code 60598			FEC Identification Number
	Purpose of Disbursement			_	_	C C00435099
	2018 General Candidate Name	11	Transaction ID : 4C2ADD5E6			
	Foster, Bill, , ,				gory/ pe	Amount of Each Disbursement this Period
	Office Sought: 🗶 House Disburse	ment For: 2	2018	,	•	1000.00
	Senate President	Primary Other (spe	cify) ▼			
	State: IL District: 11		y/ ▼			Memo Item
Γ	· · ·					
8	<b>CUBTOTAL</b> of Disbursements This Page (optional).				••••• ►	2500.00
T	OTAL This Period (last page this line number only	/)			🕨	, , , , , , , , , , , , , , , , , , , ,

S	CHEDULE B (FEC Form 3X)			F	OR		UMBEF	R:		F	PAGE	118 OF 121				
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	- I - '		k only	one)		1.00							
			Summary Page			21b 28a	22 28b	×	23 28c	26		27 30b				
	w information conied from such Departs and Ot 1	monte re	not bo cold													
	y information copied from such Reports and State for commercial purposes, other than using the na															
$  \rangle$	NAME OF COMMITTEE (In Full)	~				• •										
$\square$	The Northwestern Mutual Life Insu	urance C	ompany Fed	iera	P/											
Δ	Full Name (Last, First, Middle Initial) Date of Disburse															
Π.	Cleaver For Congress								D		V	Y Y Y				
	Mailing Address 4801 Main Street, Suite 1000						07		2			2018				
	City	State	Zip Code				FEC I	denti	ficatio	n Numb	er					
	Kansas City	MO	64112				-				-	-				
	Purpose of Disbursement 2018 General			C C	)11		С	C00	)39584	48						
	Candidate Name									ID:23						
	Cleaver, Emanuel, , , II			Cate T	egor ype	y/	AMOUI	n ot	⊏acn	Dispurs	eme	nt this Period				
		ement For:	2018	-								2500.00				
	Senate	Primary	X General						9							
	State: MO District: or	Other (spe	cify) 🔻				М	emo	Item							
	State: MO District: 05															
В.	Full Name (Last, First, Middle Initial) Common Sense Colorado									Date of Disbursement						
	Common Gense Colorado															
	Mailing Address PO Box 1978									7		2018				
	City	State	Zip Code				FEC I	denti	ficatio	n Numb	er					
	Denver Purpose of Disbursement	CO	80201				0 000404000									
	2018 Contribution				C C00491936											
	Candidate Name			Cat	edor	21/	Transaction ID : 8FEFA749C1: Amount of Each Disbursement this Pe									
	Common Sense Colorado				ype	y/										
	Office Sought: House Disburse	ement For:	2018						-			1000.00				
	Senate	Primary	General						,	,						
	State: District:	Other (spe	city) Contribution				М	emo	Item							
	Full Name (Last, First, Middle Initial)		Contribution													
C.	Jobs And Innovation Matter PAC (	JIM PAC	2)				Date o	_		_	V	V				
	Mailing Address PO Box 15320						07	n /	1	D / 1		2018				
	City	State	Zip Code				FFC 4	dentit	ficatio	n Numb	er					
	Washington	DC	20003				C				5.	-				
	Purpose of Disbursement 2018 Contribution	Contribution							04941	12 ID : C9	4EB	7AD0{				
	Candidate Name		-) I	Cat		ry/	Amou	nt of	Each	Disburs	seme	nt this Period				
	Jobs And Innovation Matter PAC Office Sought: House Disburse	ement For:	· ·	ľ	ype							2500.00				
	Senate	Primary	General				<u> </u>		,			40				
	President	Other (spe	cify) 🔻					emo	Itom							
	State: District:	J	Contribution						nom							
s	UBTOTAL of Disbursements This Page (optional).					•						6000.00				
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S	CHEDULE B (FEC Form 3X)			F			IUMBER:	PAGE 119 OF 121		
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		-		c only	one)			
			Summary Page			21b 28a	22 <b>X</b> 23 26 28b 28c 29			
	ny information copied from such Reports and State									
or	for commercial purposes, other than using the na	me and addr	ess of any politic	al con	nmitt	tee to	solicit contributions from s	such committee.		
$ \rangle$	NAME OF COMMITTEE (In Full)	irance Ci	ompany Fer	loral	P/	AC.				
$\square$	The Northwestern Mutual Life Insurance Company Federal PAC									
Δ	Full Name (Last, First, Middle Initial)							Date of Disbursement		
Λ.	Larson For Congress			Y Y Y Y						
	Mailing Address PO Box 261172		07 11 2018							
	City	State CT	Zip Code				FEC Identification Number			
	Hartford Purpose of Disbursement	CT 06126-1172			_	C C00330142				
	2018 General							89FD936B		
	Candidate Name		Category/			y/	Amount of Each Disbursement this Period			
	Larson, John, Barry, , Office Sought:	ment For: 2	2018	IJ	ype		3500.00			
	Senate	Senate     Primary     ✗     General       President     Other (specify)     ▼								
	State: CT District: 01						Memo Item			
	Full Name (Last, First, Middle Initial)									
В.	Preserving America's Traditions (F	PATPAC	)				Date of Disbursement			
							07 27 2018			
	Mailing Address 610 S. Boulevard		07 27 2010	2010						
	City	State FL	Zip Code				FEC Identification Numb	ber		
	Tampa Purpose of Disbursement	ΓL.	33606	_	-		C C00383869			
		2018 Contribution 011					Transaction ID : 27F40EDDD9			
	Candidate Name Preserving America's Traditions (F	Category/					Amount of Each Disbursement this Period 5000.00			
	Iffice Sought:         House         Disbursement For: 2018         2018									
	Senate	Primary General					,			
	ate: District: Contribution						Memo Item			
_	Full Name (Last, First, Middle Initial)									
C.	Ron Estes For Congress		Date of Disbursement							
	Mailing Address 12224 E Bracken Ct									
	City	State	Zip Code				FEC Identification Numb	ber		
	Wichita         KS         67206-4126           Purpose of Disbursement						C C00632067 Transaction ID : C48D21D14D			
	2018 Primary 011									
	Candidate Name Estes, Ron, , ,	y/	Amount of Each Disbursement this Period 1000.00							
	Office Sought: X House Disburse									
	Senate <b>x</b>									
	ate: KS District: 04 Other (specify) ▼					Memo Item				
Г										
s	SUBTOTAL of Disbursements This Page (optional)									
т	TOTAL This Period (last page this line number only	/)						,		

S	CHEDULE B (FEC Form 3X)			F	DR I	INF	NUMBER: PAGE 120 OF	121		
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			heck		/ one)			
		Detailed	Summary Page			28a	28b 28c 29 30b			
	Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.									
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	0		1						
	The Northwestern Mutual Life Insurance Company Federal PAC									
Α.	Full Name (Last, First, Middle Initial) Ron Johnson For Senate Inc						Date of Disbursement			
	Mailing Address 138 Conant Street 2Nd Floor									
	City Beverly	State MA	Zip Code 01915				FEC Identification Number			
	Purpose of Disbursement	nent					C C00482984			
	2022 Primary Candidate Name				011		Transaction ID : ECD7EDC466 Amount of Each Disbursement this Period			
	Johnson, Ronald, H., ,					//				
	Office Sought: House Disburse	Office Sought:     House     Disbursement For: 2022       x     Senate     x   Primary General					1000.00			
	X Senate X President									
	State: WI District:						Memo Item			
_	Full Name (Last, First, Middle Initial)						Date of Disbursement 07 / 18 / 2018			
в.	Smucker For Congress									
	Mailing Address 548 Steel Way PO Box 7066									
	City	State Zip Code					FEC Identification Number			
	Lancaster PA 17604 Purpose of Disbursement						C C00599464 Transaction ID : E555CA54762			
	2018 General 011									
	Candidate Name Smucker, Lloyd, K., ,				egory ype	//	Amount of Each Disbursement this Period			
	ffice Sought: X House Disbursement For: 2018			1990			500.00			
	Senate	Primary General								
	State: PA District: 11	PA District: 11 Other (specify)					Memo Item			
_	Full Name (Last, First, Middle Initial)									
C.	Steil For Wisconsin, Inc.		Date of Disbursement							
	Mailing Address 1818 Milton Avenue #1448	07 18 2018								
	City Janesville	State WI	Zip Code 53545				FEC Identification Number			
	Purpose of Disbursement						C C00677286 Transaction ID : 365CC62547; Amount of Each Disbursement this Period 5000.00			
	Candidate Name 011 Category/									
	Steil, Bryan, G., ,									
	Office Sought: X House Disburse									
	Senate     ★     Primary     General       President     Other (specify)     ▼									
_	State: WI District: 01						Memo Item			
SUBTOTAL of Disbursements This Page (optional)							7			
⊢°	USDUTAL OF DISDUISEMENTS THIS Page (Optional).							=		
т	OTAL This Period (last page this line number only	/)					, ,	_		

SCHEDULE B (FEC Form 3X)	NUMBER: PAGE 121 OF 121							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		(check only 21b 28a					
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Co	ompany Fede	eral PAC					
Full Name (Last, First, Middle Initial) A. Victory Now PAC	Date of Disbursement							
	Mailing Address 10605 Concord St Ste. 202							
Kensington	State MD	Zip Code 20895		FEC Identification Number				
Purpose of Disbursement 2018 Contribution Candidate Name	018 Contribution 011							
Victory Now PAC	ctory Now PAC							
State: District:	Primary Other (spec	General		Memo Item				
Full Name (Last, First, Middle Initial) B.		Date of Disbursement						
Mailing Address								
City Purpose of Disbursement				FEC Identification Number				
Candidate Name	Category/ Type	C Amount of Each Disbursement this Period						
President	ment For: Primary Other (spec	General						
State: District: Full Name (Last, First, Middle Initial)	Last, First, Middle Initial)							
C. Mailing Address	Date of Disbursement							
City	State Zip Code			FEC Identification Number				
Purpose of Disbursement	C							
Candidate Name	Amount of Each Disbursement this Period							
Office Sought: House Disburser		1 1 9 1 1 9 1 1 9 1						
State: District:	Other (spec	sify) 🔻		Memo Item				
SUBTOTAL of Disbursements This Page (optional)			•••••	5000.00				
TOTAL This Period (last page this line number only)	)		•••••	29500.00				