Image# 201605189015529514				PAGE 1 / 103
FEC AN	PORT OF F ND DISBURS Other Than An Author	SEMENTS		
1. NAME OF TYP	E OR PRINT V	Example: If typing, typ		Office Use Only
COMMITTEE (in full)		over the lines.	12FE4M5	
The Northwestern Mutual	Life Insurance Cor	npany Federal PA	C	
	20 E Wisconsin Ave			
ADDRESS (number and street)				
Check if different than previously reported. (ACC)	1ilwaukee		WI	53202
2. FEC IDENTIFICATION NUMB	ER V CITY	A	STATE 🔺	ZIP CODE
C C00197095	3. IS RE	THIS X NEW PORT X (N)	OR AM	ENDED
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: 	Report Due On:	0 (M2) X May 2 0 (M3) Jun 20		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15	Apr 2	D (M4) Jul 20	(M7) Oct 2	Year Only) 20 (M10) Jan 31 (YE)
Quarterly Report (Q1)	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (Q2) October 15 Quarterly Report (Q3)	PRE-Election Report for the:	Convention (12C)	Special (1	2S)
January 31 Year-End Report (YE)	Election	on / D	D / Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST -Election Report for the:	General (30G)	Runoff (30	0R) Special (30S)
Termination Report (TER)	Election		D / Y Y Y Y Y	in the State of
5. Covering Period 04	01 / Y Y Y Y 01 2016	through	M M / D D / 04 30	2016
I certify that I have examined this Re	eport and to the best of n	ny knowledge and belief	it is true, correct and	complete.
Type or Print Name of Treasurer M	lichelle A. Hinze			
Signature of Treasurer	. Hinze	[Electronically Filed	Date 05	/ D D / Y Y Y Y 18 / 2016
NOTE: Submission of false, erroneous,	or incomplete information	may subject the person sig	gning this Report to the	e penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

05/18/2016 12 : 43

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

		COLUMN A This Period	COLUMN B Calendar Year-to-Date					
6.	(a) Cash on Hand January 1, 2016		196955.78					
	(b) Cash on Hand at Beginning of Reporting Period	167537.75						
	(c) Total Receipts (from Line 19)	34638.04	140178.16					
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	202175.79	337133.94					
7.	Total Disbursements (from Line 31)	48238.85	183197.00					
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	153936.94	153936.94					
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00						
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00						

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

For further information contact:

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

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

X

DETAILED SUMMARY PAGE

of Receipts

Page 3

7

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

R	eport Covering the Period: From: 04	/ D D / Y Y Y Y 01 2016	To: 04 / 0 D D / Y Y Y Y 30 2016			
	I. Receipts	I. Receipts COLUMN A Total This Period				
11.	Contributions (other than loans) From:					
	(a) Individuals/Persons Other					
	Than Political Committees	28352.32	98766.12			
	(i) Itemized (use Schedule A)	7 7 7	38700.12			
		6285.72	41412.04			
	(ii) Unitemized	7 7 7 0203.72	7 7 7			
	(iii) TOTAL (add	34638.04	140178.16			
	Lines 11(a)(i) and (ii)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
	(b) Political Party Committees	0.00	0.00			
	(c) Other Political Committees	7 7	7 7			
	(such as PACs)	0.00	0.00			
	(d) Total Contributions (add Lines	7 7				
	11(a)(iii), (b), and (c)) (Carry					
	Totals to Line 33, page 5)	34638.04	140178.16			
12.	Transfers From Affiliated/Other					
	Party Committees	0.00	0.00			
		7 7 7				
13.	All Loans Received	0.00	0.00			
		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
1/	Loan Repayments Received	0.00	0.00			
	Offsets To Operating Expenditures	7 7				
15.	(Refunds, Rebates, etc.)					
	(Carry Totals to Line 37, page 5)	0.00	0.00			
16	Refunds of Contributions Made		/5. /5. /5. /5.			
10.	to Federal Candidates and Other					
	Political Committees	0.00	0.00			
17.	Other Federal Receipts	7 7	7 7			
	(Dividends, Interest, etc.)	0.00	0.00			
18.	Transfers from Non-Federal and Levin Funds	7 7 7				
	(a) Non-Federal Account					
	(from Schedule H3)	0.00	0.00			
	(b) Levin Funds (from Schedule H5)	0.00	0.00			
	(b) Levin Funds (non Schedule Fis)	7 7	7 7 7			
	(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))▶	34638.04	140178.16			
		7 7	7 7			
20.	Total Federal Receipts					
	(subtract Line 18(c) from Line 19)▶	34638.04	140178.16			

I

DETAILED SUMMARY PAGE

	II. Disbursements	COLUMN A	COLUMN B
. C	perating Expenditures:	Total This Period	Calendar Year-to-Date
	 Allocated Federal/Non-Federal Activity (from Schedule H4) 		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(t	, 1 5	238.85	947.0
(0	Expenditures) Total Operating Expenditures	200.00	347.0
((add 21(a)(i), (a)(ii), and (b))►	238.85	947.00
Т	ransfers to Affiliated/Other Party		
	ommittees	0.00	0.00
F	ontributions to ederal Candidates/Committees nd Other Political Committees	48000.00	168250.00
		48000.00	108230.00
	idependent Expenditures ise Schedule E)	0.00	0.00
С	oordinated Party Expenditures		
(2 (1	2 U.S.C. §441a(d)) ise Schedule F)	0.00	0.00
L	oan Repayments Made	0.00	0.00
		0.00	0.00
	oans Made efunds of Contributions To:		
(8	a) Individuals/Persons Other Than Political Committees	0.00	0.00
		7 7	7 7
(t	b) Political Party Committees	0.00	0.00
(0	c) Other Political Committees		
	(such as PACs)	0.00	0.00
/	N. Tatal Cartillation Defineda		
(0	 I) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	0.00	0.00
	(add Lines 20(a), (b), and (c))		7 7 7
С	ther Disbursements	0.00	14000.00
F	ederal Election Activity (2 U.S.C. §431(20))		
(8	,		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
(t			
	With Federal Funds	0.00	0.00
(0	,	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0.00	0.00
Т	otal Disbursements (add Lines 21(c), 22,		
	3, 24, 25, 26, 27, 28(d), 29 and 30(c)).	48238.85	183197.00
-	-, -, -, -, -, -, -, -, -, -, -, -, -, -	40230.03	103197.00
Т	otal Federal Disbursements		
(5	subtract Line 21(a)(ii) and Line 30(a)(ii)		
fr	om Line 31)	48238.85	183197.00

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L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	34638.04	140178.16
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34638.04	140178.16
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	238.85	947.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	238.85	947.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

		Detailed Summary Page	X	11a		111	b	11c	12								
				13		14		15	16	17							
Any information copied from such Reports an or for commercial purposes, other than using																	
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	o Incuronco	Company Eddoral BA	~														
			<u> </u>														
Full Name (Last, First, Middle Initial)				ate of	Re	eceip	pt										
Mailing Address 9 Woodhull Ct								M = M / D = D / Y = Y = Y = Y 04 15 2016									
City Northport	State NY	Zip Code 11768-2844							519748-6 is Period	7							
FEC ID number of contributing federal political committee.	С					1		,	125.0	00							
Name of Employer	Occupation	urance Agent	- 0	Mer	mo li	ltem	ו										
Self-Employed Receipt For:																	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00															
Full Name (Last, First, Middle Initial) Steven Fay Abbass				Date of	Re	ecei	pt										
Mailing Address 9 Woodhull Ct							04 30 _2016 _										
City	State	Zip Code		Transaction ID : 2016042919750-67													
Northport	NY	11768-2844	A	mount	of	Ead	ch Re	ceipt th	is Period								
FEC ID number of contributing federal political committee.	С			125.00													
Name of Employer Self-Employed	Occupation General Ins	urance Agent		- Memo Item													
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00															
Full Name (Last, First, Middle Initial)				ate of	Re	eceip	pt										
Mailing Address 6025 Princeton Reach Wa	ау			м м 04	/		15	/ Y	2016	Y							
City Granite Bay	State CA	Zip Code 95746-6217							519748-5	3							
FEC ID number of contributing federal political committee.	С			imount	. Of	Ead	ch Re	ceipt th	is Period 125.0	00							
Name of Employer	Occupation		- [Mer	mo l	ltem	۱										
Self-Employed	General Ins	surance Agent															
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00															
SUBTOTAL of Receipts This Page (optional)	-			-		1	-	-7	375.0	0							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE

7 OF

			Detailed Summary Page		-	$\mid \mid$	11b	11c	12						
An	v information copied from such Reports and	Statemente m	av not be sold or used by any n	Areon	13 for the	nurr	14	15 soliciting	16	17 tions					
	for commercial purposes, other than using t														
\setminus	NAME OF COMMITTEE (In Full)														
\rangle	The Northwestern Mutual Life	Insurance	Company Federal PA	С											
۱.	Full Name (Last, First, Middle Initial) Rick A. Abell														
	Mailing Address 6025 Princeton Reach Way			_	Date of Receipt 04 30 2016 Transaction ID : 2016042919750-53										
	City	State	Zip Code												
	Granite Bay	CA	95746-6217		Amount of Each Receipt this Period										
	FEC ID number of contributing rederal political committee.	С		125.00											
	Name of Employer	Occupation	1		— Memo Item										
	Self-Employed	General Ins	surance Agent												
	Receipt For:	Aggregate	Year-to-Date V												
	Primary General Other (specify) ▼		1000.00	1											
	Full Name (Last, First, Middle Initial) Eric D. Aslakson						Date of Receipt								
	Mailing Address 15323 SE 82nd St City State Zip Code						04 15 2016								
	City		Transaction ID : 2016041519748-60 Amount of Each Receipt this Period												
-	Newcastle														
	FEC ID number of contributing rederal political committee.		62.50												
	Name of Employer		Memo Item												
	Self-Employed	urance Agent													
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		500.00												
	Full Name (Last, First, Middle Initial) Eric D. Aslakson					f Red	ceipt								
	Mailing Address 15323 SE 82nd St						30	/ Y	y y 2016	Y					
	City	State WA	Zip Code					20160429		0					
	Newcastle	VVA	98059-9223	- :	Amount	t of I	Each Re	eceipt thi	s Period						
	FEC ID number of contributing rederal political committee.	С					,	7	62.	50					
	Name of Employer		Memo Item												
	Self-Employed General Insurance Agent														
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		500.00	11.											
s	JBTOTAL of Receipts This Page (optional).						,	7	250.0	00					
т	OTAL This Period (last page this line number	er only)				-	7								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 8 OF

11	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 for commercial purposes, other than using th			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PA	C								
<u>к</u> .	Full Name (Last, First, Middle Initial) Leslie Barbi			Date of Receipt								
	Mailing Address 6620 N Lake Dr			04 / Y Y Y Y Y 04 15 2016								
	City Fox Point	State WI	Zip Code 53217-4245	Transaction ID : 2016041319749-503 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		208.00								
	Name of Employer NML Receipt For:		c Investments Year-to-Date ▼	Memo Item								
	Primary General Other (specify) ▼											
в.	Full Name (Last, First, Middle Initial) Leslie Barbi			Date of Receipt								
	Mailing Address 6620 N Lake Dr	04 30 2016										
	City Fox Point	State WI	Zip Code 53217-4245	Transaction ID : 2016042719749-503 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		208.00								
	Name of Employer NML	Occupation Svp - Public	c Investments	Memo Item								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00									
<u>с</u> .	Full Name (Last, First, Middle Initial) Rebekah B. Barsch			Date of Receipt								
	Mailing Address N46W5455 Spring Ct	04 15 2016										
	City Cedarburg	State WI	Zip Code 53012-2547	Transaction ID : 2016041319749-759 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		77.00								
	Name of Employer	— Memo Item										
	NML Receipt For:	VP Plannin	-									
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 616.00									
s	UBTOTAL of Receipts This Page (optional)			493.00								
т	OTAL This Period (last page this line number	only)										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 9 OF

			Use separate schedule(s)		(check only one)									
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		X 11a	11b		1c	12					
	w information canied from such Departs and C	totomonto mo	w not be cold or used by only n		13	14	1		16	17				
	ny information copied from such Reports and S for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full)													
$ \rangle$	The Northwestern Mutual Life Ir	2												
<u> </u>	Full Name (Last, First, Middle Initial)													
Α.					Date of Receipt									
	Mailing Address N46W5455 Spring Ct				м м 04		0 / 30		2016	Y				
	City	State	Zip Code			action ID				59				
	Cedarburg	WI	53012-2547	_	Amount	of Each	Recei	pt this I	Period					
	FEC ID number of contributing	С							77.0	0				
	federal political committee.	U						7		_				
	Name of Employer	Occupation			Men	no Item								
	NML Receipt For:	VP Planning	• 	_										
	Primary General	Aggregate	Year-to-Date ▼	1										
	Other (specify)		616.00											
			, , , , , , , , , , , , , , , , , , , ,	4										
R	Full Name (Last, First, Middle Initial) Douglas P. Bates				Date of	Receint								
υ.	Mailing Address 5413 Mount Corcoran PI				M M	· ·	D /	YY	(Y	Y				
			04 15 2016											
	City	State VA	Zip Code			tion ID				25				
	Burke	VA	22015-2188		Amount	of Each	Recei	pt this I	Period					
	FEC ID number of contributing federal political committee.	С							55.0	00				
	Name of Employer	Occupation			Men	no Item		,						
	NML	VP Federal												
	Receipt For:		Year-to-Date ▼											
	Primary General	33 - 3												
	Other (specify)		, 440.00											
	Full Name (Last, First, Middle Initial)													
C.	Douglas P. Bates				Date of	Receipt								
	Mailing Address 5413 Mount Corcoran Pl				м м 04		D / 30	Y Y Y	016	Y				
	City	State	Zip Code			action ID				25				
	Burke	VA	22015-2188	_	Amount	of Each	Recei	pt this I	Period					
	FEC ID number of contributing	С							55.0	00				
	federal political committee.				Man	, ltom		7						
	Name of Employer	Occupation		Memo Item										
NML VP I Receipt For:			Relations	_										
	Primary General	Aggregate	Year-to-Date ▼	1										
	Other (specify)		440.00											
_														
							_		187.0	0				
\vdash^{s}	UBTOTAL of Receipts This Page (optional)		•	-		7	=	7						
т	OTAL This Period (last page this line number	only)	••••••	•				7						

FOR LINE NUMBER:

PAGE 10 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	X 11a 11b 11c 12						
Any information copied from such Reports	and Statements ma	ay not be sold or used by any p ddress of any political committee	13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee. 1						
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	-								
Full Name (Last, First, Middle Initial) A. Blaise C. Beaulier			Date of Receipt						
Mailing Address 23300 Dover Line Rd			04 15 _ 2016 _						
City Waterford	State WI	Zip Code 53185-4908	Transaction ID : 2016041319749-897 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.00						
Name of Employer NML	Occupation VP Ent Proj		Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 664.00							
Full Name (Last, First, Middle Initial) B. Blaise C. Beaulier			Date of Receipt						
Mailing Address 23300 Dover Line Rd		04 30 Y Y Y Y Y Y							
City Waterford	State WI	Zip Code 53185-4908	Transaction ID : 2016042719749-897 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.00						
Name of Employer NML	Occupation VP Ent Proj		Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 664.00							
Full Name (Last, First, Middle Initial) C. Mitchell C. Beer			Date of Receipt						
Mailing Address 3387 Hampton Ct			04 15 2016						
City Thousand Oaks	State CA	Zip Code 91362-1130	Transaction ID : 2016041519748-29 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		125.00						
Name of Employer Self-Employed	Occupation General Ins	surance Agent	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]						
SUBTOTAL of Receipts This Page (optio	nal)		291.00						
TOTAL This Period (last page this line n	umber only)								

FOR LINE NUMBER:

PAGE 11 OF

	-	Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	IZED RECEIPTS for each category of the Detailed Summary Page formation copied from such Reports and Statements may not be sold or used by commercial purposes, other than using the name and address of any political com ME OF COMMITTEE (In Full) the Northwestern Mutual Life Insurance Company Federal Name (Last, First, Middle Initial) tchell C. Beer ling Address 3387 Hampton Ct busand Oaks C C C purposed, other than using the name and address of any political com tchell C. Beer ling Address 3387 Hampton Ct busand Oaks C C C color contributing real political committee. C e of Employer Coccupation General Insurance Agent Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Name (Last, First, Middle Initial) Philip Bender ling Address 70 Forest St Apt 18D cocupation General Other (specify) ▼ C Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General <t< th=""><th></th></t<>									
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance	Company Federal PA	C							
Full Name (Last, First, Middle Initial) A. Mitchell C. Beer			Date of Receipt							
Mailing Address 3387 Hampton Ct			04 30 _ 2016 _							
City Thousand Oaks			04 30 2016 Transaction ID : 2016042919750-29 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		125.00							
	General Ins	surance Agent	Memo Item							
Full Name (Last, First, Middle Initial) J. Philip Bender Mailing Address 70 Forest St			Date of Receipt							
Apt 18D City Stamford			04 15 2016 Transaction ID : 2016041519748-31 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer Self-Employed			— Memo Item							
	Aggregate	Year-to-Date ▼ 400.00								
Full Name (Last, First, Middle Initial) C. J. Philip Bender			Date of Receipt							
	State	Zin Code	04 / 04 / 2016 Transaction ID : 2016042919750-31							
Stamford			Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		50.00							
Name of Employer Self-Employed			Memo Item							
	Aggregate	400.00]							
SUBTOTAL of Receipts This Page (optiona	l)		225.00							
TOTAL This Period (last page this line num	ber only)									

FOR LINE NUMBER:

PAGE 12 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page							
			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	-								
Full Name (Last, First, Middle Initial) A. Beth M. Berger			Date of Receipt						
Mailing Address 4141 N Murray Ave			04 15 _ 2016						
City Shorewood	State WI	Zip Code 53211-2011	Transaction ID : 2016041319749-521 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		38.00						
Name of Employer NML	Occupation Ast Gn Cnl	& Ast Sec/Secur	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 304.00]						
Full Name (Last, First, Middle Initial) B. Beth M. Berger	ł		Date of Receipt						
Mailing Address 4141 N Murray Ave	04 30 2016								
City Shorewood	State WI	Zip Code 53211-2011	Transaction ID : 2016042719749-521 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		38.00						
Name of Employer NML	Occupation Ast Gn Cnl	& Ast Sec/Secur	— Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 304.00]						
Full Name (Last, First, Middle Initial) C. Dwaan C. Black			Date of Receipt						
Mailing Address 3520 Dumbarton Rd NW		Zin Code	04 / D D / Y Y Y Y Y 2016						
City Atlanta	State GA	Zip Code 30327-2614	Transaction ID : 2016041519748-24 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer Self-Employed Receipt For:	I	surance Agent	— Memo Item						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	1						
SUBTOTAL of Receipts This Page (optiona	al)		118.00						
TOTAL This Period (last page this line nun	nber only)								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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17			Use separate schedule(s)	(chec	k only	one)				
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×		11b	11c		12	
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Ь.	Mailing Address 5460 Chelsea Ave					· ·	D / 1	Y Y	Y	Y
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С.	Full Name (Last, First, Middle Initial) Timothy John Bohannon				Date of	Re	eceip	ot					
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif Full Name (Last, First, Middle Initial) A. Michael T. Byrne Mailing Address 395 La Casa Via City Walnut Creek FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Michael G. Carter Mailing Address 7322 N Mohawk Rd City	-	Use separate schedule(s)	(check only one)							
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	IZED RECEIPTS for each category of the Detailed Summary Page ormation copied from such Reports and Statements may not be sold or used by commercial purposes, other than using the name and address of any political com The OF COMMITTEE (in Full) e Northwestern Mutual Life Insurance Company Federal Name (Last, First, Middle Initial) c chael T. Byrne ing Address 395 La Casa Via Int Creek C ing Address 395 La Casa Via C ing Address 7322 N Mohawk Rd General Insurance Agent ing Address 7322 N Mohawk Rd C Point General ing Address 7322 N Mohawk Rd C ing Address 7322 N Mohawk Rd State Zip Code Vil 53217-3454 ing Address 7322 N Mohawk Rd C Point State Zip Code Vil 53217-3454									
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Greg Castronovo				Date of	f Rec	ceipt								
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federal political committee.	FEC ID number of contributing federal political committee							42.00						
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. Scott G. Christensen				Date of	f Rec	ceipt								
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	NAME OF COMMITTEE (In Full)	name and a		to solicit contributions from such committee.				
$\Big\rangle$	The Northwestern Mutual Life In	surance	Company Federal PAC	2				
Α.	Full Name (Last, First, Middle Initial) Scott G. Christensen			Date of Receipt				
	Mailing Address 12 High Meadow Ln	04 30 Y Y Y Y Y Y Y						
	City	State NH	Zip Code	Transaction ID : 2016042919750-37				
	Amherst		03031-2554	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		75.00				
	Name of Employer	Occupation	1	Memo Item				
	Self-Employed	General Ins	surance Agent					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Other (specify)		600.00					
В.	Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt				
	Mailing Address N25W27286 Fairmount Ct	04 15 2016						
	City	State	Zip Code	Transaction ID : 2016041319749-657				
	Pewaukee	WI	53072-4962	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	ů l						
	Name of Employer NML	Occupation VP Strat Ph	il & Comm Rel	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 720.00					
с.	Full Name (Last, First, Middle Initial) Eric P. Christophersen			Date of Receipt				
	Mailing Address N25W27286 Fairmount Ct			04 30 2016				
	City	State	Zip Code	Transaction ID : 2016042719749-657				
	Pewaukee	WI	53072-4962	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		90.00				
	Name of Employer	Occupation	1	Memo Item				
	NML	VP Strat Ph	nil & Comm Rel					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		720.00					
s	UBTOTAL of Receipts This Page (optional)		•••••	255.00				
т	OTAL This Period (last page this line number of	only)	•					

FOR LINE NUMBER:

PAGE 20 OF

	-	Use separate schedule(s)	(check only one)			
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12			
Any information copied from such Reports or for commercial purposes, other than usi	and Statements mang the name and a	L ay not be sold or used by any p ddress of any political committee	13 14 15 16 1 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 (Last, First, Middle Initial) A. <u>R. Michael Condrey</u>						
Mailing Address 907 Williamson Dr	M M / D D / Y Y Y Y Y 04 15 _ 2016 _					
City Raleigh	State NC	Zip Code 27608-2307	Transaction ID : 2016041519748-3 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		208.00			
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00				
Full Name (Last, First, Middle Initial) B. R. Michael Condrey			Date of Receipt			
Mailing Address 907 Williamson Dr			04 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			
City Raleigh	State NC	Zip Code 27608-2307	Transaction ID : 2016042919750-3 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		208.00			
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00				
Full Name (Last, First, Middle Initial) C. Tait Cruse			Date of Receipt			
Mailing Address 2961 Belclaire Dr			04 15 2016			
City Frisco	State TX	Zip Code 75034-5969	Transaction ID : 2016041519748-28 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		208.00			
Name of Employer Self-Employed	Occupation General Ins	surance Agent	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00				
SUBTOTAL of Receipts This Page (option	nal)		624.00			
TOTAL This Period (last page this line nu	mber only)					

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

PAGE 21 OF

			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page		< 11a 13		11b 14	11c	12	Г	17
	y information copied from such Reports and St for commercial purposes, other than using the				for the		oose of		contrik		ns
\setminus	NAME OF COMMITTEE (In Full)		_								
	The Northwestern Mutual Life In	surance	Company Federal PAC	2							
A.	Full Name (Last, First, Middle Initial) Tait Cruse				Date of	Re	ceipt				
	Mailing Address 2961 Belclaire Dr						D D	/ Y	Y Y	Y	1
	City	State	Zip Code	_	04 Trans	acti	30 on ID • 1	2016042	2016 919750		
	Frisco	ТХ	75034-5969					eceipt th			
	FEC ID number of contributing federal political committee.	С					7	7	20	8.00	
	Name of Employer	Occupation			Mer	no li	tem				
	Self-Employed	General Inst	urance Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		1664.00								
в.	Full Name (Last, First, Middle Initial) Brian R. Cunningham				Date of	Re	ceipt				
	Mailing Address 6251 S Billings Way				м м 04	/	15	/ Y	2016	Y	1
	City	State	Zip Code				-	2016041		-	
	Centennial	CO	80111-6009	_	Amount	of	Each Re	eceipt th	is Peric	bd	
	FEC ID number of contributing federal political committee.	С			Ľ.	_	9		12	5.00	
	Name of Employer Self-Employed	Occupation			Mer	mo l	tem				
	Receipt For:		urance Agent	_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		1000.00								
c.	Full Name (Last, First, Middle Initial) Brian R. Cunningham				Date of	Re	ceipt				
	Mailing Address 6251 S Billings Way				м м 04	/	30	/ Y	2016	Y	
	City Centennial	State CO	Zip Code 80111-6009					2016042 eceipt th			
	FEC ID number of contributing	0			Amount	OI		eceipt th			-
	federal political committee.	С			<u></u>		9	7	12	5.00	_
	Name of Employer	Occupation			Mer	no l	tem				
	Self-Employed Receipt For:		urance Agent	_							
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
s	UBTOTAL of Receipts This Page (optional)								458	8.00	Π
	OTAL This Period (last page this line number of		· ·	-	<u> </u>					-	Π

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		X 11a		11b	11c		12	<u> </u>	
	y information copied from such Reports and St								ng cor			
or	for commercial purposes, other than using the	name and a	ddress of any political committee	tos	Solicit Cor	ntrib	utions t	rom su	ch coi	mmitte	e.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	2								
Α.	Full Name (Last, First, Middle Initial) Paul Dodd				Date of	Re	ceipt					
	Mailing Address 7078 E Genesee St						04 15 _ 2016 _					
	City	State	Zip Code		Trans	acti	on ID :	201604	15197	748-25	i	
	Fayetteville	NY	13066-1123	_	Amount	of	Each R	eceipt	his P	eriod		
	FEC ID number of contributing federal political committee.	С					,	,		208.0	0	
	Name of Employer	Occupation			Mer	mo li	tem					
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		1664.00									
			gg									
в.	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 7078 E Genesee St				M M	/	30	/	Y Y 20	y 16	Y	
	City	State	Zip Code		Trans	acti	on ID : :	201604	<u>29197</u>	750-25		
	Fayetteville	NY	13066-1123	_	Amount	of	Each R	eceipt	his P	eriod		
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	7		208.0	0	
	Name of Employer	Occupation			Mei	mo l	tem					
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) V	Primary General Other (specify) ▼ 1664.00										
<u>с</u> .	Full Name (Last, First, Middle Initial)				Date of	Re	ceipt					
	Mailing Address 9 Falcon Dr				м м 04	/	D D 15		20) 16	Y	
	City	State	Zip Code		Trans	acti	on ID :	201604	1519	748-26	6	
	Mandeville	LA	70471-2952	_	Amount	of	Each R	eceipt	:his P	eriod		
	FEC ID number of contributing federal political committee.	С					7	,	_	208.0	0	
	Name of Employer	Occupation			Mer	mo li	tem					
	Self-Employed	General Ins	surance Agent									
	Receipt For: Primary General	Aggregate	Year-to-Date V									
	Other (specify)		1664.00									
F	UBTOTAL of Receipts This Page (optional)			-			7	7	+	624.0	0	

FOR LINE NUMBER:

PAGE 23 OF

			Use separate schedule(s)		(check only one)						
	ED RECEIPTS		for each category of the Detailed Summary Page		11a 13	11	1b	11c 15	12	17	
	nation copied from such Reports and St mercial purposes, other than using the				for the p	ourpos	se of s	oliciting	contribut	tions	
	of COMMITTEE (In Full) Northwestern Mutual Life In	surance	Company Federal PAC	C							
Full Nai	me (Last, First, Middle Initial) en Dugal				Date of	Rece	ipt				
Mailing	Mailing Address 9 Falcon Dr						D D D 30	/ Y	2016	Y	
City Mander	ville	State LA	Zip Code 70471-2952				n ID : 20		2016 919750-2 is Period	6	
	number of contributing political committee.	С						1	208.0	00	
Self-Em Receipt			urance Agent Year-to-Date ▼ 1664.00		Men	no Iter	n				
B. John	Full Name (Last, First, Middle Initial) John E. Dunn Mailing Address 4656 N Wilshire Rd				Date of		ipt	/ Y	YY	Y	
City Whitefis	sh Bay	State WI	04 15 2016 Transaction ID : 2016041319749-593 Amount of Each Receipt this Period								
	number of contributing political committee.	С		55.00					00		
NML	of Employer	Occupation VP & Ipas C	insl	Memo Item							
	For: rimary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 440.00								
	me (Last, First, Middle Initial)				Date of	Rece	ipt				
Mailing	Address 4656 N Wilshire Rd				м м 04	/	30	/ Y	2016	Y	
City Whitefi	sh Bay	State WI	Zip Code 53211-1260						719749-5 is Period	93	
	number of contributing political committee.	C				- 7			55.0	00	
NML	of Employer	Occupation VP & Ipas (Cnsl		Men	no Iter	m				
	rimary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 440.00								
SUBTOTA	AL of Receipts This Page (optional)		••••••	.		7		7	318.0	00	
TOTAL T	his Period (last page this line number o	only)	••••••								

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 24 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 s for commercial purposes, other than using th			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PAC	2					
Α.		Date of Receipt							
	Mailing Address 3722 W Grace Ave	01-11-	7. 0.1	04 0 D D / Y Y Y Y 04 30 2016					
	City Mequon	State WI	Zip Code 53092-2760	Transaction ID : 2016042719749-817 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		27.00					
	Name of Employer NML Receipt For:	Occupation Mang Dir P	riv Plcmts	Memo Item					
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 216.00						
в.	Full Name (Last, First, Middle Initial) Keith A. Erhard	Date of Receipt							
	Mailing Address 4807 Timberwood Ct	04 15 / Y Y Y Y 04 15							
	City West Des Moines	State IA	Zip Code 50265-5447	Transaction ID : 2016041519748-14 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.00					
	Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00						
с.	Full Name (Last, First, Middle Initial) Keith A. Erhard			Date of Receipt					
	Mailing Address 4807 Timberwood Ct			04 30 2016					
	City West Des Moines	State IA	Zip Code 50265-5447	Transaction ID : 2016042919750-14 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		42.00					
	Name of Employer	Occupation	1	Memo Item					
	Self-Employed	General Ins	surance Agent						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00	1					
_			g						
s	UBTOTAL of Receipts This Page (optional)		•	111.00					
Т	OTAL This Period (last page this line number	only)	••••••						

SCHEDULE A	(FEC Form	3X)
ITEMIZED REC	EIPTS	

(check only one)

PAGE 25 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
	ny information copied from such Reports and Si for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance C	Company Federal PA	2			
Α.		Date of Receipt					
	Mailing Address 18235 Shaker Blvd	Ctoto	Zin Code	04 / D D / Y Y Y Y 04 15 2016			
	City Shaker Heights	State OH	Zip Code 44120-1754	Transaction ID : 2016041519748-13 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		150.00			
	Name of Employer Self-Employed	Occupation General Insur	rance Agent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1200.00				
в.	Full Name (Last, First, Middle Initial) John C. Ertz	Date of Receipt					
	Mailing Address 18235 Shaker Blvd	04 / D D / Y Y Y Y Y 04 30 2016					
	City Shaker Heights	State OH	Zip Code 44120-1754	Transaction ID : 2016042919750-13 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		150.00			
	Name of Employer Self-Employed	Occupation General Insur	ance Agent	Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1200.00				
с.	Full Name (Last, First, Middle Initial)			Date of Receipt			
	Mailing Address 114 Lake Ridge Dr			04 15 2016			
	City Madison	State MS	Zip Code 39110-8291	Transaction ID : 2016041519748-39 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		42.00			
	Name of Employer Self-Employed	Occupation General Insu	rance Agent	Memo Item			
	Receipt For: Primary Other (specify) ▼		ear-to-Date ▼ 336.00				
s	UBTOTAL of Receipts This Page (optional)			342.00			
Т	OTAL This Period (last page this line number of	only)					

FOR LINE NUMBER:

PAGE 26 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports or for commercial purposes, other than us	and Statements ma sing the name and a	y not be sold or used by any p ddress of any political committee	13 14 15 16 1 erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual I											
Full Name (Last, First, Middle Initial) A. Lee M. Fortenberry			Date of Receipt								
Mailing Address 114 Lake Ridge Dr			04 30 _ 2016 _								
City Madison	State MS	Zip Code 39110-8291	Transaction ID : 2016042919750-39 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00]								
Full Name (Last, First, Middle Initial) B. Lance P. Franczyk			Date of Receipt								
Mailing Address 2224 E 24th St	0	7. 0.1	04 / D D / Y Y Y Y 04 15 2016								
City Tulsa	State OK	Zip Code 74114-2912	Transaction ID : 2016041519748-40 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		75.00								
Name of Employer Self-Employed	Occupation General Inst	urance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00									
Full Name (Last, First, Middle Initial) C. Lance P. Franczyk			Date of Receipt								
Mailing Address 2224 E 24th St	01-1-	The Oracle	04 / D D / Y Y Y Y 2016								
City Tulsa	State OK	Zip Code 74114-2912	Transaction ID : 2016042919750-40 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		75.00								
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	1								
SUBTOTAL of Receipts This Page (optic	onal)		192.00								
TOTAL This Period (last page this line n	umber only)										

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

FOR LINE NUMBER:

PAGE 27 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page								
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	I ay not be sold or used by any p address of any political committe	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 Life	Insurance	Company Federal PA	C							
Full Name (Last, First, Middle Initial) A. Robert T. Frieling			Date of Receipt							
Mailing Address 4 Windy Hill Ln			04 15 2016							
City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2016041519748-12 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		125.00							
Name of Employer Self-Employed Receipt For: Primary General		surance Agent Year-to-Date ▼	Memo Item							
Other (specify) ▼ Full Name (Last, First, Middle Initial)	L	1000.00								
B. Robert T. Frieling Mailing Address 4 Windy Hill Ln			Date of Receipt							
City Wayland	State MA	Zip Code 01778-2613	Transaction ID : 2016042919750-12 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		125.00							
Name of Employer Self-Employed	Occupation General Ins	n surance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]							
Full Name (Last, First, Middle Initial) C. Chris K. Gawart			Date of Receipt							
Mailing Address 1610 N Prospect Ave			M M / D D / Y Y Y Y 04 15 2016							
City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2016041319749-601 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	ů l									
Name of Employer NML	Occupation VP & Tax (Memo Item							
Primary General Other (specify)										
SUBTOTAL of Receipts This Page (optional)			285.00							
TOTAL This Period (last page this line numb	er only)									

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

(check only one)

PAGE 28 OF

ITEMIZED RECEIPTS			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	ny information copied from such Reports and S for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	nsurance	Company Federal PAC	2						
Α.	Full Name (Last, First, Middle Initial) Chris K. Gawart			Date of Receipt						
	Mailing Address 1610 N Prospect Ave			04 30 2016						
	City Milwaukee	State WI	Zip Code 53202-6702	Transaction ID : 2016042719749-601 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		35.00						
	Name of Employer	Occupation VP & Tax C		Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 280.00							
В.	Full Name (Last, First, Middle Initial) Timothy J. Gerend			Date of Receipt						
	Mailing Address 5421 N Idlewild Ave			04 15 2016						
	City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID : 2016041319749-587 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	ů – Elektrik – Elektri								
	Name of Employer NML	Occupation Svp Distribu	n ution Growth & Dev	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 992.00							
С.	Full Name (Last, First, Middle Initial) Timothy J. Gerend			Date of Receipt						
	Mailing Address 5421 N Idlewild Ave			04 30 2016						
	City Whitefish Bay	State WI	Zip Code 53217-5331	Transaction ID : 2016042719749-587 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		124.00 Memo Item						
	Name of Employer	Name of Employer Occupation								
	NML Receipt For:		ution Growth & Dev	_						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 992.00							
s	UBTOTAL of Receipts This Page (optional)		•	283.00						
т	OTAL This Period (last page this line number	only)	••••••							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 29 OF

			Detailed Summary Page		X 11a		11b	11c		12						
					13		14	15		16	17					
	y information copied from such Reports and for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full)															
	The Northwestern Mutual Life	nsurance	Company Federal PA	C												
Α.	Full Name (Last, First, Middle Initial) Walter M. Givler				Date of	Re	ceipt									
	Mailing Address 2036 N Prospect Ave				04 15 / Y Y Y Y Y 04 15 2016											
	City Milwaukee	State WI	Zip Code 53202-1260					2016041			31					
			00202 1200	_	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				_	·	7	_	42.0	0					
	Name of Employer	Occupation			Mer	no I	tem									
	NML	VP Solvenc	y Policy													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		336.00													
В.	Full Name (Last, First, Middle Initial) Walter M. Givler			Date of	Re	ceipt										
	Mailing Address 2036 N Prospect Ave				м м 04	/	D D 30	/ Y) 16	Y					
	City	State	Zip Code		Transaction ID : 2016042719749-581											
	Milwaukee	WI	53202-1260		Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.					42.00											
	Name of Employer	Occupation		_	Mer	mo l	tem									
	NML	VP Solvenc	y Policy													
	Receipt For:	Aggregate	Year-to-Date 🔻													
	Primary General Other (specify)		336.00													
С.	Full Name (Last, First, Middle Initial) Mitchell B. Glover				Date of	Re	ceipt									
	Mailing Address 6700 Old Darby Trl NE				м м 04	/	D D 15	/ Y		ү)16	Y					
	City Ada	State MI	Zip Code 49301-8360					2016041 eceipt th			1					
	FEC ID number of contributing federal political committee.	C					7		_	208.0	0					
	Name of Employer	Occupation		_	Mer	no l	tem									
	Self-Employed	General Ins	surance Agent													
	Receipt For:	Aggregate	Year-to-Date ▼													
Primary General																
	Other (specify)	1														
s	UBTOTAL of Receipts This Page (optional)			•			,		_	292.0	0					
т	OTAL This Period (last page this line number	only)	••••••	•			7	7	2							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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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	<u> </u>		
	ny information copied from such Reports and Si					purp			ng cor				
or	for commercial purposes, other than using the	name and a	ddress of any political committee	to s	solicit con	ntribu	itions f	rom suc	ch co	mmitte	e.		
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PAC	2									
Α.	Full Name (Last, First, Middle Initial) Mitchell B. Glover				Date of	Rec	eipt						
	Mailing Address 6700 Old Darby Trl NE				м м 04	/	о о 30			016	Y		
	City	State	Zip Code					201604					
	Ada	MI	49301-8360	_	Amount	of E	Each R	eceipt t	his P	eriod			
	FEC ID number of contributing federal political committee.	С						,	_	208.0	0		
	Name of Employer	Occupation			Mer	no lte	em						
	Self-Employed	General Ins	urance Agent										
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<u>с</u> .	Full Name (Last, First, Middle Initial) Thomas J. Goes				Date of	Rec	eipt						
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<u></u>	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I																
/ A.	Full Name (Last, First, Middle Initial) Kimberley Goode				Date of	f Red	ceipt										
	Mailing Address 2485 W Fairy Chasm Rd # R				04 15 _ 2016 _												
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c.	Full Name (Last, First, Middle Initial) Patrick K. Gores				Date of	f Red	ceipt										
	Mailing Address 2702 28th Ave S				м м 04	/	D D 15	/ Y	у у 2016	Y							
	City	State ND	Zip Code						519748-5								
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В.	Full Name (Last, First, Middle Initial) Tom Goris Jr.				Date of	Re	eceip	pt				
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Full Name (Last, First, Middle Initial) A. John M. Grogan			Date o	f Receipt							
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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			Use separate schedule(s)		(check only one)										
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	NAME OF COMMITTEE (In Full)														
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в.	Full Name (Last, First, Middle Initial) Paul J. Hanson)ate of	f Recei	ipt								
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— c.	Full Name (Last, First, Middle Initial) Gerard M. Hempstead				Date of	f Recei	ipt								
	Mailing Address 49 W Walling Dr				м м 04	/	D D D 15	/ Y	20 ⁻	ү 16	Y				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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	EMIZED RECEIPTS		Detailed Summary Page		11a		111	b	11c	12	_	
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	y information copied from such Reports and Si for commercial purposes, other than using the											
\backslash	NAME OF COMMITTEE (In Full)			~								
\sum	The Northwestern Mutual Life In	isurance	Company Federal PA	<u> </u>								
Α.	Full Name (Last, First, Middle Initial) Gerard M. Hempstead				Date of	Re	eceip	pt				
	Mailing Address 49 W Walling Dr				м м 04	1	D	30	/ Y	у у 2016	Y	
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в.	Full Name (Last, First, Middle Initial) Mark J. Heurung				Date of	Re	eceip	pt				
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с.	Full Name (Last, First, Middle Initial) Mark J. Heurung				Date of	Re	eceip	pt				
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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			Use separate schedule(s)		(check only one)							
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	NAME OF COMMITTEE (In Full)		_	_								
	The Northwestern Mutual Life Ir	nsurance	Company Federal PAC)								
<u>/</u>	Full Name (Last, First, Middle Initial)											
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	Mailing Address 2045 Elm Tree Rd				м м 04	/ D 15	D / Y)16	Y		
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в.	Full Name (Last, First, Middle Initial) Gary M. Hewitt				Date of	Receipt						
	Mailing Address 2045 Elm Tree Rd				M M	/ D	D / Y	Y	Y	ŕ		
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C.	Steve H. Holter			_	Date of		_					
	Mailing Address 11390 N Creekside Ct				04	/ 15		201	16	Y		
	City	State	Zip Code		Transa	action ID	201604	15197	748-44			
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 39 OF

			Use separate schedule(s)		(check only one)							
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	ny information copied from such Reports and S for commercial purposes, other than using the								ng cor			
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	The Northwestern Mutual Life Ir	surance	Company Federal PAC	2								
Α.	Full Name (Last, First, Middle Initial) Steve H. Holter				Date of	Re	ceipt					
	Mailing Address 11390 N Creekside Ct				м м 04	/	30	/) 016	Y	
	City Mequon	State WI	Zip Code 53092-4377	-	Trans Amount			201604 eceint t			ļ	
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	Name of Employer	Occupation		-	Mer	mo li	tem					
	Self-Employed	General Ins	urance Agent									
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1664.00									
в.	Full Name (Last, First, Middle Initial) Scott Iodice				Date of	Re	ceipt					
	Mailing Address 1930 Old Court Rd				M M	/	15	/) 16	Y	
	City	State	Zip Code			acti		201604 ⁻				
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	Name of Employer Self-Employed	Occupation General Ins	urance Agent		Mei	mo l	tem					
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<u></u> с.	Full Name (Last, First, Middle Initial) Scott Iodice				Date of	Re	ceipt					
	Mailing Address 1930 Old Court Rd				м м 04	/	30	/	_ 20)16	Y	
	City	State	Zip Code		Trans	acti	ion ID :	201604	2919	750-17	,	
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 40 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 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 II	nsurance	Company Federal PAC						
Α.	Full Name (Last, First, Middle Initial) Nicholas E. Jahnke			Date of Receipt					
	Mailing Address 23702 Champe Ford Rd			04 15 2016					
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID : 2016041319749-864 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		29.00					
	Name of Employer NML	Occupation Regional D		Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 232.00						
в.	Full Name (Last, First, Middle Initial) Nicholas E. Jahnke	Date of Receipt							
	Mailing Address 23702 Champe Ford Rd			04 30 2016					
	City Middleburg	State VA	Zip Code 20117-2940	Transaction ID : 2016042719749-864 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		29.00					
	Name of Employer NML	Occupation Regional D		— Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 232.00						
С.	Full Name (Last, First, Middle Initial) Meg E. Jansky			Date of Receipt					
	Mailing Address 4611 N Wildwood Ave			04 15 2016					
	City Whitefish Bay	State WI	Zip Code 53211-1123	Transaction ID : 2016041319749-893 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		44.00					
	Name of Employer	Occupatior		— Memo Item					
	NML Receipt For:	VP Field In	-						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00						
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SCHEDULE A	(FEC Form	3X)
ITEMIZED REC	EIPTS	

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ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)						
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or for commercial purposes, othe	er than using the name and a		erson for the purpose of soliciting contributions to solicit contributions from such committee.						
NAME OF COMMITTEE (In F The Northwestern N		Company Federal PA	C						
Full Name (Last, First, Middle A. Meg E. Jansky			Date of Receipt						
Mailing Address 4611 N Wild	wood Ave		M M / D D / Y Y Y Y Y 04 30 2016						
City Whitefish Bay	State WI	Zip Code 53211-1123	Transaction ID : 2016042719749-893 Amount of Each Receipt this Period						
FEC ID number of contributin federal political committee.	g		44.00						
Name of Employer NML	Occupation VP Field Int		— Memo Item						
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Full Name (Last, First, Middle B. Ronald P. Joelson	Initial)		Date of Receipt						
Mailing Address 825 N Prospe # U		7.0.1	04 / D D / Y Y Y Y Y 04 15 2016						
City Milwaukee	State WI	Zip Code 53202-3979	Transaction ID : 2016041319749-493 Amount of Each Receipt this Period						
FEC ID number of contributin federal political committee.	^g C		208.00						
Name of Employer NML	Occupation EVP & CIO		Memo Item						
Receipt For:		Year-to-Date ▼							
Other (specify)		1664.00							
Full Name (Last, First, Middle C. Ronald P. Joelson	Initial)		Date of Receipt						
Mailing Address 825 N Prosp # U	ect Ave		04 30 2016						
City Milwaukee	State WI	Zip Code 53202-3979	Transaction ID : 2016042719749-493 Amount of Each Receipt this Period						
FEC ID number of contributin federal political committee.	^g C		208.00						
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SCHEDULE A	(FEC	Form	3X)
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TEMIZED RECEIPTS		category of the Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life	e Insurance Compar	ny Federal PA	C
Full Name (Last, First, Middle Initial) A. Todd M. Jones			Date of Receipt
Mailing Address W252N4956 Aberdeen D			04 15 2016
City Pewaukee	State Zip Coo WI 53072-		Transaction ID : 2016041319749-743 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		94.00
Name of Employer NML	Occupation Vice President-Cntrl		Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	752.00]
Full Name (Last, First, Middle Initial) B. Todd M. Jones			Date of Receipt
Mailing Address W252N4956 Aberdeen Dr			04 30 2016
City Pewaukee	State Zip Coo WI 53072-		Transaction ID : 2016042719749-743 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		94.00
Name of Employer NML	Occupation Vice President-Cntrl		Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	752.00	1
Full Name (Last, First, Middle Initial) C. Shawn F. Kelley			Date of Receipt
Mailing Address 7812 Remington Rd			M M / D D / Y Y Y Y 04 15 2016
City Montgomery	State Zip Coo OH 45242-		Transaction ID : 2016041519748-58 Amount of Each Receipt this Period
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Name of Employer	Occupation		Memo Item
Self-Employed	General Insurance Ager	nt	
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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			Detailed Summary Page		11a 13		11b	11c 15	12	ſ	17
	y information copied from such Reports and S for commercial purposes, other than using the				or the		pose of s	oliciting	contr	ibutic	ons
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	isurance	Company Federal PA	С							
A.	Full Name (Last, First, Middle Initial) Shawn F. Kelley						ceipt				_
	Mailing Address 7812 Remington Rd				м м 04	1	30	/ Y	2010		ſ
	City	State	Zip Code			acti	ion ID : 2	016042			
	Montgomery	OH	45242-7130	A	mount	of	Each Re	ceipt th	is Per	iod	
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	Self-Employed	General Ins	urance Agent								
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00											
в.	Full Name (Last, First, Middle Initial) Troy B. Kemelgor				Date of	Re	ceipt				
	Mailing Address 7495 Bridlespur Ln			™ M 04	/	D D D 15	/ Y	2016			
	City	State	Zip Code				on ID : 2				
		OH 43015-8613 Amount of Each Receipt this Per					iod				
	FEC ID number of contributing federal political committee.								42.00)	
	Name of Employer Self-Employed	Occupation General Ins	urance Agent		Me	mo I	tem				
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 336.00]								
с.	Full Name (Last, First, Middle Initial) Troy B. Kemelgor				Date of	Re	ceipt				
	Mailing Address 7495 Bridlespur Ln				м м 04	/	D D 30	/ Y	2016		ſ
	City Delaware	State OH	Zip Code 43015-8613				ion ID : 2				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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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	\square	12	<u> </u>	
	y information copied from such Reports and S								g con			
or	for commercial purposes, other than using the	name and a	ddress of any political committee	tos	Solicit con	tributio	ns tr	om suc	n cor	mmitte	e.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC	2								
Α.	Full Name (Last, First, Middle Initial) David Daniel Kiecker				Date of	Receip	ot					
	Mailing Address 11696 Approach Blvd				м м 04	/ D	D 15	/ Y) 16	Y	
	City	State	Zip Code					201604 ⁻			i	
	Fishers	IN	46037-4146	_	Amount	of Eac	h Re	eceipt t	nis Pe	eriod		
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	Name of Employer	Occupation			Men	no Item						
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	FEC ID number of contributing federal political committee.	С				7		,		208.0	0	
	Name of Employer	Occupation			Mer	no Item						
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General Other (specify) ▼		1664.00									
— c.	Full Name (Last, First, Middle Initial) William S. Koch				Date of	Receip	ot					
	Mailing Address 4645 Swilcan Bridge Ln S				м м 04	/ D	15	/ Y	20	й 16	Y	
	City	State	Zip Code		Trans	action	ID : 1	201604	15197	748-9		
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	Self-Employed	General Ins	surance Agent									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use se for eac Detaile
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PAGE 45 OF

ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check only one)						
			Detailed Summary Page		- H	14	15	12		17
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	e name and a	ddress of any political committee	e to solicit	he pr conti	urpose o ributions	f soliciting from suc	g contril h comm	butio nittee	ns !.
\bigvee	The Northwestern Mutual Life in	Isulance	Company rederal PA							
Α.	Full Name (Last, First, Middle Initial) William S. Koch			Date	e of I	Receipt				
	Mailing Address 4645 Swilcan Bridge Ln S			M	M	/	D / Y	2016		1
	City	State	Zip Code)4 ansa	30 ction ID	, : 2016042	2016 2 919750		
	Jacksonville	FL	32224-5621	Amo	ount a	of Each I	Receipt tl	nis Perio	bd	
	FEC ID number of contributing federal political committee.	С				7		12	5.00	
	Name of Employer	Occupation			Mem	o ltem				
	Self-Employed	General Ins	urance Agent							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		1000.00							
в.	Full Name (Last, First, Middle Initial) Steven H. Kosnick			Date	e of I	Receipt				
	Mailing Address 5799 Windsona Cir			M (04	/ D 15	D / Y	2016	Y]
	City Fitchburg	State WI	Zip Code 53711-5839				2016041			
	FEC ID number of contributing federal political committee.	С	33711-3639		ount d	of Each I	Receipt tl		oa 2.00	
	Name of Employer Self-Employed	Occupation General Ins	urance Agent		Mem	o ltem				
	Receipt For:	Aggregate	Year-to-Date ▼							
	Other (specify)		, 336.00	1						
<u>с</u> .	Full Name (Last, First, Middle Initial) Steven H. Kosnick			Date	e of I	Receipt				
	Mailing Address 5799 Windsona Cir				04	/ D 30		2016	Y]
	City Fitchburg	State WI	Zip Code 53711-5839				: 201604			
	FEC ID number of contributing federal political committee.	С				or Each I	Receipt tl		2.00	
	Name of Employer	Occupation		- 1	Mem	o ltem				
	Self-Employed	General Ins	surance Agent							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00]						
\vdash	CUBTOTAL of Receipts This Page (optional)				=	7		20	9.00	-

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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PAGE 46 OF

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PAGE 47 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 12 & 12c & 12c & 12c \\ \hline 12 & 12c & 12c \\ \hline 12 & 12c & 12c & 12c \\ \hline 12$						
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and		l ay not be sold or used by any po ddress of any political committee	13 14 15 16 erson 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 (Last, First, Middle Initial) A. M. Kevin Lawhon			Date of Receipt						
Mailing Address 2430 Vanderbilt Beach Rd Unit 108-349			M = M / D = D / Y = Y = Y = Y 04 30 _ 2016 _						
City Naples	State FL	Zip Code 34109-2654	Transaction ID : 2016042919750-47 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		83.33						
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		surance Agent Year-to-Date ▼ 666.64	Memo Item						
Full Name (Last, First, Middle Initial) B. Robert D. Lowrey Mailing Address 1108 W Goldthread Cir			Date of Receipt						
City Sioux Falls	State SD	Zip Code 57108-2824	04 15 2016 Transaction ID : 2016041519748-8 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee. Name of Employer	Occupation		42.00						
Self-Employed Receipt For: Primary General		urance Agent Year-to-Date ▼	1						
Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Robert D. Lowrey Mailing Address 1108 W Goldthread Cir		336.00	Date of Receipt						
City Sioux Falls	State SD	Zip Code 57108-2824	Transaction ID : 2016042919750-8 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		42.00						
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		surance Agent Year-to-Date ▼ 336.00	Memo Item						
SUBTOTAL of Receipts This Page (optional)			167.33						

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

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PAGE 48 OF

		Detailed Summary Page		11a		11b	11c	12	□	
Any information copied from such Reports a	nd Statements may n	ot be sold or used by any r	person f	13 or the	DUrr	14 Dose of	15 soliciting	16 1 contribu	tions	
or for commercial purposes, other than using	the name and addre	ess of any political committe	e to sol	icit cor	ntrib	utions f	rom sucl	n commit	tee.	
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ightarrow The Northwestern Mutual Lif	e insurance Co	ompany Federal PA	C							
Full Name (Last, First, Middle Initial)										
A. Matthew James Lueder		Date of Receipt								
Mailing Address 2359 N Wahl Ave				0 <u>4</u>	/	15	/ Y	2016	Y	
City	State	Zip Code			acti		2016041	519748-6	64	
Milwaukee	WI	53211-4513	A	Amount	t of	Each R	eceipt th	is Period		
FEC ID number of contributing federal political committee.				,	7	125.	00			
Name of Employer	Occupation		- 1	Mei	mo li	tem				
Self-Employed	General Insura	nce Agent								
Receipt For: Primary General	Aggregate Yea	ar-to-Date ▼								
Other (specify) ▼		1000.00								
Full Name (Last, First, Middle Initial) B. Matthew James Lueder				Date of	Re	ceipt				
Mailing Address 2359 N Wahl Ave		04 30 2016								
City	State	Zip Code		Trans	acti	on ID :	2016042	919750-6	64	
Milwaukee	WI	53211-4513	A	Amount	t of	Each R	eceipt th	is Period		
FEC ID number of contributing federal political committee.	С		125.00				00			
Name of Employer	Occupation			Me	mo l	tem				
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Receipt For:	Aggregate Yea	ar-to-Date ▼	_							
Other (specify) ▼	,	1000.00								
Full Name (Last, First, Middle Initial) C. Jeffrey J. Lueken				Date of	Re	ceipt				
Mailing Address 1213 E Goodrich Ln				м м 04	/	15	/ Y	у у 2016	Y	
City Fox Point	State WI	Zip Code 53217-2946						319749-8		
		55217-2940	^	Amount	t of	Each R	eceipt th	is Period	_	
FEC ID number of contributing federal political committee.	С			168.00						
Name of Employer	Occupation			Memo Item						
NML Receipt For:	Svp Securities		_							
Primary General	Aggregate Yea	ar-to-Date ▼	_ _							
Other (specify)		1344.00								
SUBTOTAL of Receipts This Page (optiona	l)							418.	00	
TOTAL This Period (last page this line num										

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 49 OF

		Detailed Summary Page		11a		11b	11c	12	
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Any information copied from such Reports an or for commercial purposes, other than using	d Statements ma the name and a	ay not be sold or used by any p address of any political committee	erson f e to sol	or the licit cor	purp ntrib	oose of utions	r soliciting from suc	j contribut h committ	ions ee.
NAME OF COMMITTEE (In Full)									
The Northwestern Mutual Life	e Insurance	Company Federal PA	С						
Full Name (Last, First, Middle Initial)				Date of	Be	ceipt			
Mailing Address 1213 E Goodrich Ln				м м 04	_	30		2016	Y
City	State	Zip Code		-	acti			2010 2719749-8	31
Fox Point	WI	53217-2946						nis Period	-
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Name of Employer	Occupation	I		Mer	mo li	tem			
NML	Svp Securit	ies							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼	1344.00]							
Full Name (Last, First, Middle Initial) . Stephanie A. Lyons				Date of	Re	ceipt			
Mailing Address 809 E Sylvan Ave	04 15 / Y Y Y Y 04 15								
City	State	Zip Code		Trans	acti	on ID :	2016041	319749-6	85
Whitefish Bay	WI	53217-5353	/	Amount	t of	Each F	Receipt th	nis Period	
FEC ID number of contributing federal political committee.						52.0	00		
Name of Employer NML	Occupation VP - Era	I		Mei	mo l'	tem			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.00]						
Full Name (Last, First, Middle Initial) Stephanie A. Lyons	·			Date of	Re	ceipt			
Mailing Address 809 E Sylvan Ave				м м 04	/	D 30		y y 2016	Y
City	State	Zip Code		Trans	acti	ion ID :	: 2016042	2719749-6	85
Whitefish Bay	WI	53217-5353	/	Amount	t of	Each F	Receipt th	nis Period	
FEC ID number of contributing federal political committee.	С					9		52.0	00
Name of Employer	Occupation	1	-	Mei	mo li	tem			
NML	VP - Era								
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		416.00]						
SUBTOTAL of Receipts This Page (optional))			_		7		272.(00
FOTAL This Period (last page this line numb	per only)					7			

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 50 OF

17			Use separate schedule(s)		(check only one)								
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	[X 11a		11b	11c		12			
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	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	surance	Company Federal PAC	2									
Α.	Full Name (Last, First, Middle Initial) Cory A. Mahaffey				Date of	Ree	ceipt						
	Mailing Address 13764 Knaus Rd										Y		
	City	State	Zip Code	04 15 2016 Transaction ID : 2016041519748-57									
	Lake Oswego	OR	97034-2175	_	Amount	of	Each R	eceipt t	this P	eriod			
FEC ID number of contributing federal political committee.							,			42.0	0		
	Name of Employer	Occupation			Mer	no lt	em						
	Self-Employed	General Ins	urance Agent										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Other (specify)		336.00										
			J J A										
В.	Full Name (Last, First, Middle Initial) Cory A. Mahaffey				Date of	Ree	ceipt						
	Mailing Address 13764 Knaus Rd				M M	/	30		y y _ 20	Y 16	Y		
	City	State	Zip Code			actio		201604					
	Lake Oswego	OR	97034-2175	_	Amount	of	Each R	eceipt t	this P	eriod			
	FEC ID number of contributing federal political committee.	С		42.00									
	Name of Employer	Occupation			Mei	mo lt	em						
	Self-Employed	General Ins	urance Agent										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼										
	Other (specify) ▼		, 336.00										
с.	Full Name (Last, First, Middle Initial) Raymond J. Manista				Date of	Ree	ceipt						
	Mailing Address 7236 N Crossway Rd				м м 04	/	15		20 r) 16	Y		
	City	State	Zip Code		Trans	acti	on ID :	201604	1319	749-53	32		
	Fox Point	WI	53217-3519		Amount	of	Each R	eceipt t	his P	eriod			
	FEC ID number of contributing federal political committee.	С					,	,		208.0	0		
	Name of Employer	Occupation			Mer	no lt	em						
	NML	Svp Gen Cr	nsl & Sec										
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	.									
	Other (specify) ▼		1664.00										
	UBTOTAL of Receipts This Page (optional)		· · ·	<u> </u>			y y	- 7	+	292.0	0		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 51 OF

		Detailed Summary Page		11a 13		11b 14	11c 15	12	17				
Any information copied from such Reports or for commercial purposes, other than us				or the		pose of s	soliciting	contribu	tions				
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	-												
Full Name (Last, First, Middle Initial) A. Raymond J. Manista				Date of	Re	eceipt							
Mailing Address 7236 N Crossway Rd				м м 04		30		ү ү 2016					
City Fox Point	State WI	Zip Code 53217-3519	Transaction ID : 2016042719749-532 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		208.00										
Name of Employer NML	Occupation Svp Gen C		Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00]										
Full Name (Last, First, Middle Initial) 5. Steven C. Mannebach				Date of	Re	eceipt							
Mailing Address 101 Colorado St # 260	04 / Y Y Y Y 04 15 2016												
City Austin	State TX	Zip Code 78701-4103	Transaction ID : 2016041319749-638 Amount of Each Receipt this Period 77.00										
FEC ID number of contributing federal political committee.	C												
Name of Employer NML	Occupation Managing F		Memo Item										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 616.00]										
Full Name (Last, First, Middle Initial) C. Steven C. Mannebach				Date of	Re	eceipt							
Mailing Address 101 Colorado St # 260	2			м м 04	/	D D 30	/ Y	ү ү 2016	Y				
City Austin	State TX	Zip Code 78701-4103	A					719749-6 is Period	38				
FEC ID number of contributing federal political committee.	C			77.00									
Name of Employer NML	Occupatior Managing			– Memo Item									
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 616.00]										
SUBTOTAL of Receipts This Page (optio	nal)							362.	00				
TOTAL This Period (last page this line nu						,							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 52 OF

17			Use separate schedule(s)		(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a	11b	11c		12			
Ar	ny information copied from such Reports and S	tatements ma	av not be sold or used by any ne		13 for the r	14	15 solicitin		16 htributi	17 005		
	for commercial purposes, other than using the											
\backslash	NAME OF COMMITTEE (In Full)			`								
	The Northwestern Mutual Life Ir	isurance	Company Federal PAC	Ĵ								
<u> </u>	Full Name (Last, First, Middle Initial)											
Α.				_	Date of	Receipt	_		Y			
	Mailing Address 11 Mountview Rd			04 15								
	City	State	Zip Code		Transa		016 748-2					
	Wellesley	MA	02481-2757	_	Amount	of Each F	Receipt tl	his Pe	eriod			
	FEC ID number of contributing federal political committee.	С							208.0	0		
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	Name of Employer	Occupation										
	Self-Employed Receipt For:		Surance Agent	_								
	Primary General	Aggregate	Year-to-Date ▼	d.								
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	Mailing Address 11 Mountview Rd				M M	·) / Y	Y	Y	Y		
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	City Wellesley	State MA	Zip Code 02481-2757	_		of Each F						
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	federal political committee.	С					- J	_	208.00	0		
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	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify)		1664.00									
			, , ,									
_	Full Name (Last, First, Middle Initial)											
C.	Brian W. McClure			_	Date of		_			_		
	Mailing Address 1402 Wyndemere Point Dr				04	/ 15		20	16	Y		
	City	State	Zip Code		Transa	action ID	201604	15197	748-62	2		
	Champaign	IL	61822-3349	_	Amount	of Each F	Receipt tl	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С							42.00	0		
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	Name of Employer	Occupation										
	Self-Employed Receipt For:		surance Agent Year-to-Date ▼	_								
	Primary General	Ayyreyale		d.								
	Other (specify)		336.00									
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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		11a 13	11k	o [11c 15	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	nsurance	Company Federal PA	С								
Α.	Full Name (Last, First, Middle Initial) Brian W. McClure			Da	ate of	Receip	ot					
	Mailing Address 1402 Wyndemere Point Dr				м м 04	/ D	30	/ Y	ү ү 2016	_		
	City Champaign	State IL	Zip Code 61822-3349		Transaction ID : 2016042919750-62 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С								.00		
	Name of Employer Self-Employed Receipt For: Primary General		surance Agent Year-to-Date ▼		Mer	no ltem						
	Primary General Other (specify) ▼		336.00									
в.	Full Name (Last, First, Middle Initial) Mark J. McLennon			Di	ate of	Receip	ot					
	Mailing Address 2571 N 86th St				04 / D / Y Y Y Y 2016							
	City Wauwatosa	State WI	Zip Code 53226-1921					2016041				
	FEC ID number of contributing federal political committee.						Amount of Each Receipt this Period 39.00					
	Name of Employer NML	Occupation VP lps Bus		Memo Item								
	Receipt For: Primary General Other (specify) ▼	pt For: Aggregate Year-to-Date ▼ Primary General										
<u>с</u> .	Full Name (Last, First, Middle Initial) Mark J. McLennon			D	ate of	Receip	ot					
	Mailing Address 2571 N 86th St			Π	м м 04	/ D	30	/ Y	2016	Y		
	City Wauwatosa	State WI	Zip Code 53226-1921		Trans		ID : :	2016042 eceipt th	719749-			
	FEC ID number of contributing federal political committee.	С						, ,	39	.00		
	Name of Employer	- L	Mer	no ltem	1							
	NML											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		312.00									
s	UBTOTAL of Receipts This Page (optional)								120	.00		
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	;	

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IТ	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck only	one)					_
11	EIVILED RECEIPIS		for each category of the Detailed Summary Page		11a	11b	11c		12		
_					13	14	15		16	17	
	ny information copied from such Reports and S for commercial purposes, other than using the										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)			~							
	The Northwestern Mutual Life Ir	isurance	Company Federal PAC	;							
<u>/</u>	Full Name (Last, First, Middle Initial)										_
Α.				[Date of	Receipt					
	Mailing Address 264 Cloister Green Ln			M = M / D = D / Y = 04 15 -							
	City	State	Zip Code	04 15 2016 Transaction ID : 2016041519748-16							
	Memphis	TN	38120-2357	A	Amount	of Each	Receipt t	his Pe	eriod		
	FEC ID number of contributing	С		11				-	125.0	0	
	federal political committee.	U			-		7	_	120.0	0	
	Name of Employer	Occupation		1	Men	no ltem					
	Self-Employed	General Ins	urance Agent								
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General Other (specify)		1000.00	1							
			7 7 7	4							
	Full Name (Last, First, Middle Initial)										-
В.	Jim Edwards Meeks Jr.				Date of	Receipt					
	Mailing Address 264 Cloister Green Ln				м м 04	/ D 30	D / Y)	20 ²	16	Y	
	City	State	Zip Code			action ID					
	Memphis	TN	38120-2357	A	Amount	of Each	Receipt t	his Pe	eriod		
	FEC ID number of contributing federal political committee.	С				7	7		125.0	0	
	Name of Employer	Occupation	 	-	Mer	no ltem					
	Self-Employed	General Ins	urance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		1000.00	1							
	Other (specify) v		1000.00								
c.	Full Name (Last, First, Middle Initial) Arthur J. Mees, Jr.				Date of	Receipt					
9.	Mailing Address 5347 N Hollywood Ave				M M		D / Y	Y	Y	Y	
					04	1:	5	201	16		
	City	State WI	Zip Code			action ID				005	
	Whitefish Bay	VVI	53217-5324	_ /	Amount	of Each	Receipt t	nis Pe	eriod		
	FEC ID number of contributing federal political committee.	С							32.0	0	
	Name of Employer	Occupation		- [Mer	no Item					
	NML	Regional VI									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3		1							
	Other (specify)	256.00									
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

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177			Use separate schedule(s)	(che	(check only one)							
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a	11b	11c		12			
		<u></u>			13	14	15		16	17		
	y information copied from such Reports and a for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full)											
\rangle	The Northwestern Mutual Life I	nsurance	Company Federal PAC	С								
Α.	Full Name (Last, First, Middle Initial) Arthur J. Mees, Jr.				Date of	Receipt						
	Mailing Address 5347 N Hollywood Ave			M = M / D = D / Y = Y = Y = Y								
	City	State	Zip Code	-		16 7 49-10	05					
	Whitefish Bay	WI	53217-5324	A		of Each						
	FEC ID number of contributing federal political committee.	C							32.0	0		
	Name of Employer	Occupation	1	-	Mer	no ltem						
	NML	Regional VI	P									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		256.00									
			7 7									
B	Full Name (Last, First, Middle Initial) Ben Miller			1	Date of	Receipt						
	Mailing Address 11315 E Winchcomb Dr				M M	· ·	D / Y	Y	Y	Y		
					04	1	5	20	16			
	City Scottsdale	State AZ	Zip Code 85255-1638			action ID						
	FEC ID number of contributing		00200-1000	_ ^	Amount	of Each	Receipt t	nis Pe	erioa			
	federal political committee.	С		125.00								
	Name of Employer Self-Employed	Occupation			Me	no item						
	Receipt For:		urance Agent									
	Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)	L	1000.00	4								
с.	Full Name (Last, First, Middle Initial) Ben Miller				Date of	Receipt						
	Mailing Address 11315 E Winchcomb Dr				м м 04		0 / 1	_ 20	Y 16	Y		
	City	State	Zip Code		Trans	action ID	: 201604	29197	750-51			
	Scottsdale	AZ	85255-1638	/	Amount	of Each	Receipt t	his Pe	eriod			
	FEC ID number of contributing federal political committee.	С							125.0	0		
	Name of Employer	Occupation			— Memo Item							
	Self-Employed	General Ins	surance Agent									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	_								
	Other (specify)		1000.00									
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number					y			282.00	0		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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IT	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page		< 11a	11b	11c		12			
_					13	14	15		16	17		
	ny information copied from such Reports and St for commercial purposes, other than using the											
$\left \right $	NAME OF COMMITTEE (In Full)			_								
\bigvee	The Northwestern Mutual Life In	isurance	Company Federal PAC	0								
Α.	Full Name (Last, First, Middle Initial) Kevin E. Miller				Data of	Receipt						
А.	Mailing Address 214 Schenley Rd						D / Y	Y	Y	Y		
		a			04	15			016			
	City Pittsburgh	State PA	Zip Code 15217-1171			action ID						
		_		_	Amount	of Each	Receipt ti	nis Pe	əriod	_		
	FEC ID number of contributing federal political committee.	С			<u> </u>				208.00	0		
	Name of Employer	Occupation			Mer	no ltem						
	Self-Employed	General Ins	urance Agent									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		1664.00									
			J J									
В.	Full Name (Last, First, Middle Initial) Kevin E. Miller				Date of	Receipt						
	Mailing Address 214 Schenley Rd				м м 04	/ D 30	D / Y	_201	16	Y		
	City	State	Zip Code			action ID						
	Pittsburgh	PA	15217-1171		Amount	of Each	Receipt t	his Pe	eriod			
	FEC ID number of contributing federal political committee.	С					7		208.00	0		
	Name of Employer	Occupation	I		Mei	mo ltem						
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		, 1664.00									
_	Full Name (Last, First, Middle Initial) Christian Mitchell				Data of	Receipt						
σ.	Mailing Address 640 E Carlisle Ave			\neg	M M		D / Y	Y	Y	Y		
					04	1:		201	16			
	City Whitefish Bay	State WI	Zip Code 53217-4832			action ID				0		
			35217-4052		Amount	of Each	Receipt t	nis Pe	əriod	_		
	FEC ID number of contributing federal political committee.	C			L.				50.00	0		
	Name of Employer	Occupation			Mer	no ltem						
	NML	Pres & CEC	D Wealth Mgmt									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify)		400.00									
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	UBTOTAL of Receipts This Page (optional)								466.00	0		
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т	OTAL This Period (last page this line number of	only)	••••••	•	L	, , , , , , , , , , , , , , , , , , , ,						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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			Detailed Summary Page		< 11a		11		11c	12	-	
Δn	y information copied from such Reports and Si	tatements ma	y not be sold or used by any n	erson	13 for the		14 14		15 oliciting	16 1 contrib		17 15
	for commercial purposes, other than using the											
$\overline{)}$	NAME OF COMMITTEE (In Full)											
$\Big/$	The Northwestern Mutual Life In	isurance	Company Federal PA	C								
Α.	Full Name (Last, First, Middle Initial) Christian Mitchell				Date of	Re	ecei	ipt				
	Mailing Address 640 E Carlisle Ave				м м 04	/		30	/ Y	2016		
	City	State WI	Zip Code							2719749		
	Whitefish Bay	VVI	53217-4832	_	Amount	t of	Ea	ich Re	ceipt th	nis Perio	bd	
	FEC ID number of contributing federal political committee.	C				_	7		ŋ	5	0.00	
	Name of Employer	Occupation			Mei	mo l	ltem	n				
	NML	Pres & CEC	D Wealth Mgmt									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		400.00									
	Full Name (Last, First, Middle Initial) Karen A. Molloy				Date of	Re	ecei	ipt				
	Mailing Address 2004 N 85th St				м м 04	/		15	/ Y	_ 2016	Y	1
	City	State	Zip Code		Trans	acti	ion		016041	319749	-816	
	Wauwatosa	WI	53226-2846		Amount	t of	Ea	ich Re	ceipt th	nis Perio	bd	
	FEC ID number of contributing federal political committee.	С					,		y	3	6.00	
	Name of Employer	Occupation	 	_	Me	mo l	lten	n				
	NML	VP Treasur	er									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		288.00									
<u>с.</u>	Full Name (Last, First, Middle Initial) Karen A. Molloy				Date of	Re	ecei	ipt				
	Mailing Address 2004 N 85th St				м м 04	/	I	D D 30	/ Y	2016	Y	1
	City	State WI	Zip Code							2719749		i
	Wauwatosa	VVI	53226-2846	_	Amount	t of	Ea	ich Re	ceipt th	nis Perio	bd	
	FEC ID number of contributing federal political committee.	С					7		ŋ	3	6.00	
	Name of Employer	Occupation	I	\neg	Me	mo l	lten	n				
	NML	VP Treasur	er									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		288.00	11								
	Other (specify)		200.00									
s	UBTOTAL of Receipts This Page (optional)			•			1			12	2.00	
т	OTAL This Period (last page this line number of	only)		_ ►								

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

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	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)							
			Detailed Summary Page		× 11a 13		11b 14	11c	$\left \right $	12 16	17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	y not be sold or used by any pe ddress of any political committee	erson to s	for the	purpo	ose o	f solicitin	g cor	ntributio	ons
$\overline{)}$	NAME OF COMMITTEE (In Full)										
$\Big)$	The Northwestern Mutual Life In	surance	Company Federal PAC	2							
Α.	Full Name (Last, First, Middle Initial) Timothy Michael Mulroy				Date of	Rec	eipt				
	Mailing Address 29 Lexington Way				м м 04	/	D 15	D / Y		016	ſ
	City Trabuco Canyon	State CA	Zip Code 92679-4734					201604 Receipt t			
	FEC ID number of contributing federal political committee.	С				, ,				42.00)
	Name of Employer	Occupation			Mei	mo lte	em				
	Self-Employed	General Ins	urance Agent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)		336.00								
			/J/J								
в.	Full Name (Last, First, Middle Initial) Timothy Michael Mulroy				Date of	Rec	eipt				
	Mailing Address 29 Lexington Way				M M	1	30		_ 20	16	
	City	State	Zip Code		Trans	actio	on ID :	2016042			_
	Trabuco Canyon	CA	92679-4734	_	Amount	t of E	Each F	Receipt t	his P	eriod	
	FEC ID number of contributing federal political committee.	С				. ,	,			42.00)
	Name of Employer Self-Employed	Occupation			Me	mo lte	em				
	Receipt For:		urance Agent	_							
	Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		336.00								
с.	Full Name (Last, First, Middle Initial)				Date of	Rec	eipt				
-	Mailing Address 1140 Lone Tree Rd				04	/	•	D / Y	20	16	
	City	State	Zip Code			actic		: 201604			13
	Elm Grove	WI	53122-2019		Amount	t of E	Each F	Receipt t	his P	eriod	
	FEC ID number of contributing federal political committee.	С				. ,	,			32.00)
	Name of Employer	Occupation			Me	mo lte	em				
	NML	Dir Distribu	ion Finance	_							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		256.00								
					_	_	_		-		_
s	UBTOTAL of Receipts This Page (optional)		•••••	-	Ļ	,			-	116.00)
т	OTAL This Period (last page this line number o	nly)	••••••	•		,	_				

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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							
			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 (Last, First, Middle Initial) A. Jeremy D. Newman			Date of Receipt							
Mailing Address 1140 Lone Tree Rd										
City Elm Grove	State WI	Zip Code 53122-2019	04 30 2016 Transaction ID : 2016042719749-1013 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		32.00							
Name of Employer NML	Occupation Dir Distribu	tion Finance	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 256.00]							
Full Name (Last, First, Middle Initial) B. Kevin O Connell			Date of Receipt							
Mailing Address 4807 W Woodmere Rd			04 15 / Y Y Y Y Y							
City Tampa	State FL	Zip Code 33609-3632	Transaction ID : 2016041519748-68 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		125.00							
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]							
Full Name (Last, First, Middle Initial) C. Kevin O Connell			Date of Receipt							
Mailing Address 4807 W Woodmere Rd			M M / D D / Y Y Y Y Y 04 30 2016							
City Tampa	State FL	Zip Code 33609-3632	Transaction ID : 2016042919750-68 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		125.00							
Name of Employer Self-Employed	Occupation General Ins	surance Agent	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]							
SUBTOTAL of Receipts This Page (optio	nal)		282.00							
TOTAL This Period (last page this line no	umber only)									

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PAGE 60 OF

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements mang the name and a	l ay not be sold or used by any p ddress of any political committe	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	fe Insurance	Company Federal PA	С								
Full Name (Last, First, Middle Initial) A. Gregory C. Oberland			Date of Receipt								
Mailing Address 4514 N Lake Dr			04 15 _ 2016 _								
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID : 2016041319749-553 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		208.00								
Name of Employer NML	Occupation President		Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00]								
Full Name (Last, First, Middle Initial) B. Gregory C. Oberland			Date of Receipt								
Mailing Address 4514 N Lake Dr			04 30 2016								
City Whitefish Bay	State WI	Zip Code 53211-1252	Transaction ID : 2016042719749-553 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		208.00								
Name of Employer NML	Occupation President		Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00]								
Full Name (Last, First, Middle Initial) C. Brian G. Petrando			Date of Receipt								
Mailing Address 9533 Marbella Dr	01-1-	7. 0.4	04 / D D / Y Y Y Y 2016								
City Fort Worth	State TX	Zip Code 76126-1935	Transaction ID : 2016041519748-21 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		42.00								
Name of Employer Self-Employed	Occupation General Ins	surance Agent	Memo Item								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 336.00]								
SUBTOTAL of Receipts This Page (option	al)		458.00								
TOTAL This Period (last page this line nut	mber only)										

FOR LINE NUMBER:

PAGE 61 OF

	-	Use separate schedule(s)	(check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c } \hline X & 11a & 11b & 11c & 12 \\ \hline 10 & 11b & 11c & 12 \\ \hline 10 & 11b & 11c & 12 \\ \hline 10 & 11c & 11c \\ \hline 10 & 11c \\ \hline 10 & 11c \\ \hline 10 & 11c $
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and a	L ay not be sold or used by any p ddress of any political committee	13 14 15 16 1 erson 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 (Last, First, Middle Initial) A. Brian G. Petrando			Date of Receipt
Mailing Address 9533 Marbella Dr			M M / D D / Y Y Y Y Y 04 30 2016
City Fort Worth	State TX	Zip Code 76126-1935	Transaction ID : 2016042919750-21 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		42.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify)		urance Agent Year-to-Date ▼ 336.00	Memo Item
Full Name (Last, First, Middle Initial) B. Matthew J. Plocher Mailing Address 4324 Chevy Chase Dr			Date of Receipt
City La Canada	State CA	Zip Code 91011-3203	04 15 2016 Transaction ID : 2016041519748-43 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) C. Matthew J. Plocher			Date of Receipt
Mailing Address 4324 Chevy Chase Dr	State	Zip Code	04 / D D / Y Y Y Y 30 2016
La Canada	CA	91011-3203	Transaction ID : 2016042919750-43 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify)		surance Agent Year-to-Date ▼ 1000.00	Memo Item
		,	292.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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16	INIZED RECEIPTS		Detailed Summary Page		11a		11	lb [11c	12			
			, ,		13		14		15	16		17	
or	/ information copied from such Reports and S for commercial purposes, other than using the												
\setminus	NAME OF COMMITTEE (In Full)			~									
/	The Northwestern Mutual Life Ir	nsurance	Company Federal PA	3									
۱.	Full Name (Last, First, Middle Initial) Michael E. Pritzl			Date of Receipt									
	Mailing Address 572 Cottonwood Ln				м м 04		L	D D 15	/ Y	2016]	
	City	State	Zip Code		Trans	acti	ion	ID : 2	2016041	1319749	-890		
	Grafton	WI	53024-9591	A	mount	t of	Ea	ich R	eceipt th	his Peric	bd		
	FEC ID number of contributing federal political committee.	С					7			3	1.00	_	
	Name of Employer	Occupation	l	- I.	Me	mo l	lter	n					
	NML	VP Managii	ng Director Relations										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		248.00										
	Full Name (Last, First, Middle Initial) Michael E. Pritzl				Date of	f Re	ece	ipt					
	Mailing Address 572 Cottonwood Ln				м м 04	/	_	D D D 30	/ Y	2016	Y	1	
	City	State	Zip Code		Trans	acti	ion	ID : 2	2016042	2719749	-890		
	Grafton	WI	53024-9591	A	mount	t of	Ea	ich R	eceipt th	his Peric	bd		
	FEC ID number of contributing federal political committee.	С					5			3	1.00	<u> </u>	
	Name of Employer	Occupation	l	- [Me	mo l	lter	n					
	NML	VP Managir	ng Director Relations										
	Receipt For:		Year-to-Date ▼										
	Primary General Other (specify) ▼		248.00										
	Full Name (Last, First, Middle Initial) Charles R. Pruett				Date of	f Re	ece	ipt					
	Mailing Address 1019 Stonewall Dr				м м 04	/	[D D 15	/ Y	2016	Y]	
	City	State	Zip Code		Trans	sacti	ior	ID :	201604 [,]	1519748	-45		
	Nashville	TN	37220-1022	A	mount	t of	Ea	ich R	eceipt th	his Peric	bd		
	FEC ID number of contributing federal political committee.	С					7			20	8.00	_	
	Name of Employer	Occupation	1	- [Me	mol	lter	n					
	Self-Employed	General Ins	surance Agent										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General	20 0 1											
	Other (specify)		1664.00										
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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

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		Detailed Summary Page	X 11a		11b	11c 15	12	17
Any information copied from such Reports an or for commercial purposes, other than using			erson for the	e purpo	ose of s	soliciting	contribu	tions
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life							Commu	
Full Name (Last, First, Middle Initial) A. Charles R. Pruett			Date	of Rece	eipt			
Mailing Address 1019 Stonewall Dr			M 04		D D D	/ Y	ү ү 2016	Y
City	State TN	Zip Code 37220-1022					919750-4	5
Nashville		37220-1022	Amou	nt of E	ach Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С			7			208.	00
Name of Employer	Occupation			emo lte	em			
Self-Employed	General Ins	urance Agent						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00	1					
Full Name (Last, First, Middle Initial) B. Steven M. Radke			Date	of Rece	eipt			
Mailing Address 111 W Ravine Ct			04		15	/ Y	y y 2016	Y
City	State	Zip Code	Tran	sactio	n ID : 2	0160413	319749-7	56
Thiensville	WI	53092-5861	Amou	nt of E	ach Re	eceipt thi	s Period	
FEC ID number of contributing federal political committee.	С					,	53.	00
Name of Employer NML	Occupation VP Govt Re			lemo lte	em			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 424.00]					
Full Name (Last, First, Middle Initial) C. Steven M. Radke	·		Date	of Rece	eipt			
Mailing Address 111 W Ravine Ct			04		D D D	/ Y	y y 2016	Y
City Thiensville	State WI	Zip Code 53092-5861					719749-7	'56
FEC ID number of contributing federal political committee.	C	55092-5601	Amou	nt of E	ach Re	ceipt thi	s Period 53.	00
			M	lemo lte	em.	,		
Name of Employer	Occupation VP Govt Re							
NML Receipt For:								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 424.00]					
SUBTOTAL of Receipts This Page (optional)						5	314.(00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIRTS

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a		-	1b	11c		12	
Δn	y information copied from such Reports and St	atements ma	ly not be sold or used by any pr		13 for the		14 mos		15 solicitir		16 Intribu	17 tions
or	for commercial purposes, other than using the	name and a	ddress of any political committee	to so	olicit co	ntrib	outi	ions fr	om su		ommitt	ee.
	NAME OF COMMITTEE (In Full)			_								
	The Northwestern Mutual Life In	nsurance	Company Federal PA	5		_	_	_				
۹.				Date o	f Re	ce	ipt					
	Mailing Address 7 Williamsburg Ln				м м 04	1		15] ′ [2016	Y
	City	State	Zip Code		Trans	acti	ior	ו ID : ג	201604	1519	9748-5	9
	Houston	ТХ	77024-5144	_	Amoun	t of	Ea	ach Re	eceipt	this I	Period	
	FEC ID number of contributing federal political committee.	С				_	7	_	- 7	_	125.	00
	Name of Employer	Occupation		\neg	Me	mo l	lter	m				
	Self-Employed	General Ins	urance Agent									
	Receipt For:		Year-to-Date ▼									
	Primary General			11								
	Other (specify)		1000.00									
— В.	Full Name (Last, First, Middle Initial) Jeff D. Reeter				Date o	f Re	ce	ipt				
	Mailing Address 7 Williamsburg Ln				04		_	30	/		016	Y
	City	State	Zip Code	\neg		acti	ion		201604			9
	Houston	ТХ	77024-5144		Amoun							
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	Name of Employer	Occupation		\neg	Me	emo l	lter	m				
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	Primary General Other (specify) v		1000.00									
	Full Name (Last, First, Middle Initial) David R. Remstad			+	Date o	f Re	ce	ipt				
-	Mailing Address 2634 N Lake Dr				04		_	15	/		016	Y
	City	State	Zip Code			sacti	ior		201604			97
	Milwaukee	WI	53211-3837	\square	Amoun	t of	Ea	ach Re	eceipt	this I	Period	
	FEC ID number of contributing federal political committee.	С				_	,				105.	00
	Name of Employer	Occupation		\neg	Me	mo l	lter	m				
	NML	Svp & Chief										
	Receipt For:		Year-to-Date ▼	\neg								
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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									
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and a	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) The Northwestern Mutual Life I												
Full Name (Last, First, Middle Initial) A. David R. Remstad			Date of Receipt									
Mailing Address 2634 N Lake Dr			M M / D D / Y Y Y Y Y 04 30 _ 2016 _									
City Milwaukee	State WI	Zip Code 53211-3837	Transaction ID : 2016042719749-697 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		105.00									
Name of Employer NML Receipt For: Primary General Other (specify)	Occupation Svp & Chier Aggregate		Memo Item									
Full Name (Last, First, Middle Initial) B. Adam T. Rhoades Mailing Address 2038 Rosemont Pl			Date of Receipt									
City Vestavia	State AL	Zip Code 35243-1767	04 15 2016 Transaction ID : 2016041519748-48 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		208.00									
Name of Employer Self-Employed	Occupation General Ins	urance Agent										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1664.00										
Full Name (Last, First, Middle Initial) C. Adam T. Rhoades			Date of Receipt									
Mailing Address 2038 Rosemont PI	State	Zip Code	04 30 2016 Transaction ID : 2016042919750-48									
Vestavia	AL	35243-1767	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		208.00									
Name of Employer Self-Employed Receipt For: Primary General Other (specify)		urance Agent Year-to-Date ▼ 1664.00										
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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PAGE 66 OF

ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (n Full) The Northwestern Mutual Life Insurance Company Federal PAC Full Name (Last, First, Middle Initial) Wesley H. Richardson Mailing Address 73 Oakwood Rd City Huntington Full Name (Last, First, Middle Initial) Wu 25701-4148 FEC ID number of contributing federal political committee. Name of Employed Full Name (Last, First, Middle Initial) Wesley H. Richardson Mailing Address 73 Oakwood Rd City Full Name (Last, First, Middle Initial) Wu 25701-4148 FEC ID number of contributing C C C C C C C C C C C C C C C C C C C				Detailed Summary Page		11a] 11k	b	11c	12				
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 67 OF

			Use separate schedule(s)		(check only one)							
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page		X 11a	11b	11c		12			
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\square	NAME OF COMMITTEE (In Full)			_								
	The Northwestern Mutual Life In	isurance	Company Federal PAC	3								
Α.	Full Name (Last, First, Middle Initial) J. Daniel Rivers				Date of	Receipt						
	Mailing Address 3601 River Ridge Cv				04	/ D 30	D / Y)16	Y		
	City	State	Zip Code			action ID)		
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	FEC ID number of contributing federal political committee.	С				7	7		208.0	0		
	Name of Employer	Occupation			Mer	no ltem						
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		1664.00	11.								
	Other (specify)		1 1 1	4								
_	Full Name (Last, First, Middle Initial)											
В.	Bethany M. Rodenhuis			_	Date of	Receipt						
	Mailing Address 3900 N Lake Dr				м м 04	/ D	D / Y	20	16 1	Y		
	City	State	Zip Code			action ID				2		
	Shorewood	WI	53211-2448	-	Amount	of Each	Receipt th	his P	eriod			
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	Name of Employer	Occupation	 		Mer	no ltem						
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	Receipt For:	Aggregate	Year-to-Date V									
	Primary General Other (specify) ▼		1064.00									
<u>с</u>	Full Name (Last, First, Middle Initial) Bethany M. Rodenhuis				Date of	Receipt						
	Mailing Address 3900 N Lake Dr				04	· ·	D / Y	20	16	Y		
	City	State	Zip Code			action ID			1. A	92		
	Shorewood	WI	53211-2448			of Each						
	FEC ID number of contributing federal political committee.	С				7			133.0	0		
	Name of Employer	Occupation			Mer	no Item						
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	Primary General		1064.00	11.								
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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	X 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life I	nsurance	Company Federal PAC	2
Α.	Full Name (Last, First, Middle Initial) Tammy M. Roou			Date of Receipt
	Mailing Address N99W14710 Amber Dr			04 15 2016
	City Germantown	State WI	Zip Code 53022-6611	Transaction ID : 2016041319749-748 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer NML Receipt For:		n Risk Officer Year-to-Date ▼	— Memo Item
	Primary General Other (specify)		480.00	
в.	Full Name (Last, First, Middle Initial) Tammy M. Roou			Date of Receipt
	Mailing Address N99W14710 Amber Dr			04 30 2016
	City Germantown	State WI	Zip Code 53022-6611	Transaction ID : 2016042719749-748 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		60.00
	Name of Employer NML	Occupation VP & Chief	n Risk Officer	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	
С.	Full Name (Last, First, Middle Initial) Matt Russo			Date of Receipt
	Mailing Address 139 Deep Valley Rd			04 15 2016
	City New Canaan	State CT	Zip Code 06840-2804	Transaction ID : 2016041519748-50 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		125.00
	Name of Employer	Occupation	1	Memo Item
	Self-Employed	General Ins	surance Agent	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
\vdash	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			

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) X 11a 11b 13 14	PAGE 69 OF 1				
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such common NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insurance Company Federal PAC							

	Name (Last, First, Middle Initial) att Russo		Date of Receipt
Mail	ing Address 139 Deep Valley Rd	04 30 2016	
City		State Zip Code	Transaction ID : 2016042919750-50
Nev	w Canaan	CT 06840-2804	Amount of Each Receipt this Period
	D number of contributing ral political committee.	C	125.00
Nam	ne of Employer	Occupation	Memo Item
	-Employed	General Insurance Agent	
Rec	eipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
. <u>R</u> .	Name (Last, First, Middle Initial) Philip Sarnecki		Date of Receipt
	ing Address 18240 Melrose Dr		04 15 2016
City		State Zip Code	Transaction ID : 2016041519748-30
Buc	yrus	KS 66013-9081	Amount of Each Receipt this Period
	D number of contributing bral political committee.	C	83.33
Nam	ne of Employer	Occupation	Memo Item
Self	Employed	General Insurance Agent	
Rec	eipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	666.64	
	Name (Last, First, Middle Initial) Philip Sarnecki		Date of Receipt
Mail	ing Address 18240 Melrose Dr		04 30 _2016 _
City		State Zip Code	Transaction ID : 2016042919750-30
Buc	cyrus	KS 66013-9081	Amount of Each Receipt this Period
	D number of contributing political committee.	C	83.33
Nam	ne of Employer	Occupation	Memo Item
Self	-Employed	General Insurance Agent	
	eipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	666.64	
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 70 OF

••			Detailed Summary Page		< 11a		11b	11c	12	Г	_		
۸.	w information conied from each Departs and	Statamanta	Not be sold or used by arrite		13		14	15 coliciting	16		17		
or	ny information copied from such Reports and for commercial purposes, other than using the	ne name and a	ay not be sold or used by any p address of any political committee	erson e to so	olicit co	ntribu	utions fi	rom such	contrib	ittee			
	NAME OF COMMITTEE (In Full)												
	The Northwestern Mutual Life	Insurance	Company Federal PA	С									
А.	Full Name (Last, First, Middle Initial) Joseph M. Savino				Date of	f Rec	ceint						
	Mailing Address 8 Benedek Rd				M M	_		/ Y	Y Y	Y	1		
		0 1 1			04		15		2016				
	City Princeton	State NJ	Zip Code 08540-2227				-	2016041					
	FEC ID number of contributing	_		_	Amoun	tore	ach R	eceipt thi	s Perio	a	-		
	federal political committee.	С			L.		,	7		8.00			
	Name of Employer	Occupatior	1		Me	mo lt	em						
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	Other (specify)		1664.00										
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	Full Name (Last, First, Middle Initial) Joseph M. Savino				Dot-	(D							
в.	Mailing Address 8 Benedek Rd					Date of Receipt							
	Maining Marcos o Benedek Ru				04 30 2016								
	City State Zip Code					Transaction ID : 2016042919750-1							
	Princeton NJ 08540-2227						Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.								208	3.00			
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	Name of Employer Self-Employed	Occupation				ino it	.cm						
	Receipt For:		urance Agent Year-to-Date ▼	_									
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_	Full Name (Last, First, Middle Initial)	1			Data	(
C.	Timothy G. Schaefer Mailing Address 1013 E Lexington Blvd			_	Date of	_			Y Y	V			
					04	Ĺ	15	7 1	2016				
	City	State WI	Zip Code		Trans	sactio	on ID :	2016041	319749	-788	;		
	Whitefish Bay	VVI	53217-5381	_	Amoun	t of E	Each R	eceipt thi	s Perio	d			
	FEC ID number of contributing federal political committee.	С					,		208	3.00			
	Name of Employer	Occupation		_	Me	mo lt	em						
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	Receipt For:		Year-to-Date ▼										
	Primary General		1664.00	11									
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 71 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 13 14	11c 12 15 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	nsurance	Company Federal PA	2			
Α.	Full Name (Last, First, Middle Initial) Timothy G. Schaefer			Date of Receipt			
	Mailing Address 1013 E Lexington Blvd				D / Y Y Y Y 30 2016		
	City Whitefish Bay	State WI	Zip Code 53217-5381		D : 2016042719749-788		
	FEC ID number of contributing federal political committee.	С			208.00		
	Name of Employer NML Receipt For:	Occupation EVP Ent O Aggregate		— Memo Item			
	Primary General Other (specify) ▼		1664.00				
В.	Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt	:		
	Mailing Address 1500 Greenway Ter	04 15 2016					
	City Elm Grove	State WI	Zip Code 53122-1611		D : 2016041319749-714		
	FEC ID number of contributing federal political committee.	С			208.00		
	Name of Employer NML	Occupation Chairman 8		Memo Item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00				
с.	Full Name (Last, First, Middle Initial) John E. Schlifske			Date of Receipt			
	Mailing Address 1500 Greenway Ter				30 / Y Y Y Y 2016		
	City Elm Grove	State WI	Zip Code 53122-1611		D : 2016042719749-714 n Receipt this Period		
	FEC ID number of contributing federal political committee.	С			208.00		
	Name of Employer	Occupation		Memo Item			
	NML Receipt For:	Chairman 8		_			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00				
s	UBTOTAL of Receipts This Page (optional)		•		624.00		
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SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 OF (check only one) X 11a 11b 11c 12
	the name and a	ddress of any political committe	13 14 15 16 person for the purpose of soliciting contribution ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Kathleen H. Schluter Mailing Address 5057 N Palisades Rd			Date of Receipt
City Whitefish Bay	State WI	Zip Code 53217-5756	04 15 2016 Transaction ID : 2016041319749-715 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		40.00 Memo Item
NML Receipt For: Primary General Other (specify) ▼	Aggregate	cy Year-to-Date ▼ 320.00]
Full Name (Last, First, Middle Initial) A. Kathleen H. Schluter Mailing Address 5057 N Palisades Rd			Date of Receipt
City Whitefish Bay	State WI	Zip Code 53217-5756	04 30 2016 Transaction ID : 2016042719749-715 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer NML	Occupation VP Tax Poli		Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) C. Calvin R. Schmidt			Date of Receipt
Mailing Address W205 Allen Rd			04 15 2016
City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID : 2016041319749-732 Amount of Each Receipt this Period
FEC ID number of contributing	С		90.00

Occupation

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Aggregate Year-to-Date V

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170.00

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Memo Item

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17

federal political committee.

Other (specify)

General

Name of Employer

Primary

NML

Receipt For:

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER:

PAGE 73 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c	12						
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements mand the name and a	ay not be sold or used by any p ddress of any political committer	13 14 15 erson for the purpose of solicities to solicit contributions from su	ng contributions nch committee.						
NAME OF COMMITTEE (In Full) The Northwestern Mutual Li	-									
Full Name (Last, First, Middle Initial) A. Calvin R. Schmidt			Date of Receipt							
Mailing Address W205 Allen Rd			M M / D D / 04 30	2016						
City Oconomowoc	State WI	Zip Code 53066-9048	Transaction ID : 201604 Amount of Each Receipt	42719749-732						
FEC ID number of contributing federal political committee.	С			90.00						
Name of Employer	Occupation Svp Int Cus		Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 720.00								
Full Name (Last, First, Middle Initial) B. Rodd Schneider			Date of Receipt							
Mailing Address 1415 E Fairy Chasm Rd # R			04 / D D / Y Y Y Y 04 15 2016							
City Bayside	State WI	Zip Code 53217-1433	Transaction ID : 201604 Amount of Each Receipt							
FEC ID number of contributing federal political committee.	С			44.00						
Name of Employer NML	Occupation VP Litig & D		Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 352.00								
Full Name (Last, First, Middle Initial) C. Rodd Schneider			Date of Receipt							
Mailing Address 1415 E Fairy Chasm Rd # R			M M / D D / 04 30	2016						
City Bayside	State WI	Zip Code 53217-1433	Transaction ID : 201604 Amount of Each Receipt							
FEC ID number of contributing federal political committee.	C			44.00						
Name of Employer NML	Occupation VP Litig & D	Dist Counsel	Memo Item							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 352.00								
SUBTOTAL of Receipts This Page (option	al)			178.00						
TOTAL This Period (last page this line nu	mber only)									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

PAGE 74 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 St for commercial purposes, other than using the										
	The Northwestern Mutual Life In	surance	Company Federal PA	C							
Α.	Full Name (Last, First, Middle Initial) Sarah R. Schneider Mailing Address 4380 N Wildwood Ave			Date of Receipt							
	City	State	Zip Code	04 15 2016 Transaction ID : 2016041319749-708							
	Shorewood	WI	53211-1436	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		36.00							
	Name of Employer	Occupatior	n								
	NML	VP-New Bu	usiness								
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General Other (specify) ▼		288.00								
B.	Full Name (Last, First, Middle Initial)			Date of Receipt							
	Mailing Address 4380 N Wildwood Ave	04 30 _2016 _									
	City	State	Zip Code	Transaction ID : 2016042719749-708							
	Shorewood	WI	53211-1436	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		36.00							
	Name of Employer	Occupatior	n	Memo Item							
	NML	VP-New Bu	usiness								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 288.00								
<u> </u>	Full Name (Last, First, Middle Initial) Sarah E. Schott			Date of Receipt							
	Mailing Address 5712 N Kent Ave			04 15 2016							
	City Whitefish Bay	State WI	Zip Code 53217-4724	Transaction ID : 2016041319749-680							
	FEC ID number of contributing	_		Amount of Each Receipt this Period							
	federal political committee.	С		55.00							
	Name of Employer	Occupation		Memo Item							
	NML	VP Complia	ance/Bp								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00								
s	UBTOTAL of Receipts This Page (optional)		•••••	127.00							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 75 OF

••			Detailed Summary Page		11a	11b	11c	12	Г	<u> </u>					
Ar	y information copied from such Reports ar	nd Statements m	l ay not be sold or used by any r	erson f	13 or the	14 purpose	of soliciting	16 contrib		17 0ns					
	for commercial purposes, other than using														
\backslash	NAME OF COMMITTEE (In Full)			~											
	The Northwestern Mutual Life	e Insurance	Company Federal PA	C											
Α.	Full Name (Last, First, Middle Initial) Sarah E. Schott				Data of	Receipt									
А.	Mailing Address 5712 N Kent Ave			- '		· ·		V							
					04 30 2016 Transaction ID : 2016042719749-680										
	City	State	Zip Code												
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	FEC ID number of contributing federal political committee.	C			55.00										
	Name of Employer	Occupation	1	-	— Memo Item										
	NML	VP Complia	ance/Bp												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify) ▼		440.00	1											
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_	Full Name (Last, First, Middle Initial) Adam David Seiden				Data of Respiret										
Ъ.	Mailing Address 44 Sunset Rd					Date of Receipt									
			04 15 2016												
	City		Transaction ID : 2016041519748-63												
	Darien	СТ	06820-3527	Amount of Each Receipt this Period											
	FEC ID number of contributing	С						20	8.00)					
	federal political committee.														
	Name of Employer	Occupation	1		Memo Item										
	Self-Employed	General Ins	urance Agent												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify)		1664.00	11											
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с.	Full Name (Last, First, Middle Initial) Adam David Seiden				Date of	Beceint									
•	Mailing Address 44 Sunset Rd				Date of Receipt										
	City	State	Zip Code	- '			D : 2016042	2016 2919750		- L					
	Darien	СТ	06820-3527				Receipt th								
	FEC ID number of contributing	С						20	8.00	,					
	federal political committee.	C				J J		20	0.00	_					
	Name of Employer		Memo Item												
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	Primary General Other (specify) ▼		1664.00	11											
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

PAGE 76 OF

ITEMIZED R		-	Use separate schedule(s)		(check only one)								
			for each category of the Detailed Summary Page		11a 13		11b	11c	12	17			
			y not be sold or used by any p ddress of any political committe		for the	purpo	ose of s		contribu	utions			
	MITTEE (In Full) western Mutual Life	e Insurance	Company Federal PA	С									
Full Name (Las A. Brad P. Seit	t, First, Middle Initial) zinger				Date of	Rec	eipt						
Mailing Address	920 Pine Needle Trl				м м 04	1	D D D	/ Y	2016	Y			
City Oakland Twp		State MI	Zip Code 48306-1034		Trans		on ID : 2		519748-: is Perioc				
FEC ID number federal political	0	С				. ,		9	208	.00			
Name of Emplo Self-Employed Receipt For: Primary	yer General		urance Agent Year-to-Date ▼		Mer	mo lte	em						
Eull Name (Las	ecify) ▼ t, First, Middle Initial)	L	1664.00	1									
B. Brad P. Seit				I	Date of	Rec	eipt						
	Mailing Address 920 Pine Needle Trl					04 / D D / Y Y Y Y Y 30 2016							
City Oakland Twp		State MI	Zip Code 48306-1034				919750-3						
FEC ID number federal political	0	С				Amount of Each Receipt this Period							
Name of Emplo Self-Employed	yer		Occupation General Insurance Agent				em						
Receipt For: Primary Other (spo	General ecify) ▼	Aggregate	Year-to-Date ▼ 1664.00										
c. David W. S					Date of	Rec	eipt						
Mailing Address	5 311 E Erie St Unit 4	State	Zip Code		04	/	15		2016	_			
Milwaukee		WI	53202-6040						319749-9 is Perioc				
FEC ID number federal political	0	C				. ,			85	.00			
		Occupation Svp Life & A	ccupation vp Life & Ann Products				em						
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SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTO

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PAGE 77 OF

	-	Use separate schedule(s)	(check only one)								
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NAME OF COMMITTEE (In Full)		in the second seco									
The Northwestern Mutual L	ife Insurance	Company Federal PA	C								
Full Name (Last, First, Middle Initial) A. David W. Simbro			Date of Receipt								
Mailing Address 311 E Erie St			M = M / D = D / Y = Y = Y = Y								
Unit 4	State	Zip Code	04 30 2016 Transaction ID : 2016042719749-989								
Milwaukee	WI	53202-6040	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		85.00								
Name of Employer	Occupation	1	Memo Item								
NML	Svp Life & /	Ann Products									
	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		680.00	1								
		<i>y</i>	·								
Full Name (Last, First, Middle Initial) B. Steve P. Sperka	I		Date of Receipt								
Mailing Address S67W17735 Copper Oa	ks Ct		04 15 / Y Y Y Y								
City	State	Zip Code	Transaction ID : 2016041319749-735								
Muskego	WI	53150-7503	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		97.00								
Name of Employer NML	Occupation		Memo Item								
Receipt For:	VP Field Re										
Primary General	Aggregate	Year-to-Date ▼									
Other (specify)		, 776.00									
Full Name (Last, First, Middle Initial) C. Steve P. Sperka			Date of Receipt								
Mailing Address S67W17735 Copper Oa	aks Ct		M = M / D = D / Y = Y = Y = Y 04 30 2016								
City Muskego	State WI	Zip Code 53150-7503	Transaction ID : 2016042719749-735 Amount of Each Receipt this Period								
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Name of Employer	Occupation	1	Memo Item								
NML	VP Field Re	ewards									
Receipt For:	Aggregate	Year-to-Date ▼									
Other (specify)		776.00]								
SUBTOTAL of Receipts This Page (optior	ıal)		279.00								
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SCHEDULE A	(FEC	Form	3X)
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PAGE 78 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)										
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	NAME OF COMMITTEE (In Full)						-							
	The Northwestern Mutual Life In	surance	Company Federal PAC	2										
Α.					Date of	Receipt								
	Mailing Address 6311 N Lake Dr				M = M / D = D / Y = Y = Y Y 04 15 2016 2016 Transaction ID : 2016041319749-811									
	City	State	Zip Code											
	Whitefish Bay	WI	53217-4343	_	Amount	of Each	Receipt t	his Pe	eriod					
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	Name of Employer	Occupation			Mer	no Item								
	NML	VP Investm	ent Services											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		616.00											
			7 7 7											
_	Full Name (Last, First, Middle Initial) David G. Stoeffel													
в.	Mailing Address 6311 N Lake Dr			_	Date of	Receipt								
	Maining Address 6311 N Lake Dr					04 30 _2016 _								
	City	State	Zip Code		Transa	action ID				1				
	Whitefish Bay	WI	53217-4343		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>	- 7 - 1			77.00	0				
	Name of Employer	Occupation			Memo Item									
	NML	VP Investm												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		, 616.00											
с.	Full Name (Last, First, Middle Initial) Stephen R. Stone				Date of	Receipt								
	Mailing Address 2511 N 95th St				м м 04	/ D 30	D / Y)	20	16	Y				
	City	State	Zip Code		Trans	action ID	: 201604	27197	749-63	3				
	Wauwatosa	WI	53226-1749		Amount	of Each	Receipt t	his Pe	eriod					
	FEC ID number of contributing federal political committee.	С				7	7		28.00	0				
	Name of Employer	Occupation			Mer	no ltem								
	NML	Erm Directo	or											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		224.00											
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SCHEDULE A	(FEC For	m 3X)
ITEMIZED REC	EIPTS	

PAGE 79 OF

			Use separate schedule(s)		(check only one)										
11	EMIZED RECEIPTS	for each category of the Detailed Summary Page			X 11a	\vdash	11b	11c		12					
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	ny information copied from such Reports and Si for commercial purposes, other than using the														
	NAME OF COMMITTEE (In Full)														
	The Northwestern Mutual Life In	isurance	Company Federal PAC	2											
Α.	Full Name (Last, First, Middle Initial) Peter F. Striano III				Date of	Rec	eipt								
	Mailing Address 11050 NW 78th Pl				04 15 _ 2016 _										
	City	State	Zip Code			actic		201604			;				
	Parkland	FL	33076-4723	_	Amount	of E	Each R	eceipt t	his P	eriod					
	FEC ID number of contributing federal political committee.	С					,	,		125.0	0				
	Name of Employer	Occupation	 		Mer	no lte	em								
	Self-Employed	General Ins	urance Agent												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify)		1000.00												
			/J /J /*												
В.	Full Name (Last, First, Middle Initial) Peter F. Striano III				Date of	Rec	eipt								
	Mailing Address 11050 NW 78th PI				04 30 2016										
	City	State	Zip Code		Trans	actio	on ID : :	201604	29197	750-46					
	Parkland	FL	FL 33076-4723				Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С			<u> </u>			,		125.0	0				
	Name of Employer	Occupation				Memo Item									
	Self-Employed	General Ins	urance Agent												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼												
	Other (specify) ▼		1000.00												
<u>с</u> .	Full Name (Last, First, Middle Initial) Steven J. Stribling				Date of	Rec	eipt								
	Mailing Address 11830 W Whitaker Ave				м м 04	/	D D 15	/ _	_ 20	16	Y				
	City	State	Zip Code		Trans	actio	on ID :	201604	1319	749-10	02				
	Greenfield	WI	53228-2455	_	Amount	of E	Each R	eceipt t	his P	eriod					
	FEC ID number of contributing federal political committee.	С						,		30.0	0				
	Name of Employer	Occupation			Memo Item										
		VP Disabilit	y Income												
	Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼			240.00												
	UBTOTAL of Receipts This Page (optional)		· ·	- -				· · ·		280.0	D				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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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						
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	ny information copied from such Reports and S for commercial purposes, other than using the															
\setminus	NAME OF COMMITTEE (In Full)															
	The Northwestern Mutual Life I	nsurance	Company Federal PA	С												
Α.	Full Name (Last, First, Middle Initial) Steven J. Stribling				Date o	f Red	ceipt									
	Mailing Address 11830 W Whitaker Ave															
	City	State	Zip Code	04 30 2016 Transaction ID : 2016042719749-1002												
	Greenfield	WI	53228-2455	_				Receipt			.02					
	FEC ID number of contributing federal political committee.	С					,			30.0	0					
	Name of Employer	Occupation	I		Me	mo lt	em									
	NML	VP Disabilit	y Income													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Other (specify)		240.00	11												
В.	Full Name (Last, First, Middle Initial) Brenda J. Stugelmeyer				Date o	f Red	ceipt									
	Mailing Address 6970 W Fox Haven Ct				04	/	15)16	Y					
	City	State	Zip Code			actio					5					
Franklin WI			53132-7402		Transaction ID : 2016041319749-815 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С					,	- 7		39.0	0					
	Name of Employer	Occupation	1		Me	mo lt	em									
	NML	VP & Real B	Estate Counsel													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Other (specify)		, 312.00													
	Full Name (Last, First, Middle Initial) Brenda J. Stugelmeyer				Date o	f Rec	reint									
.	Mailing Address 6970 W Fox Haven Ct				M M	_		D /	Y Y	Y	Y					
					04		30		20	016						
	City Franklin	State WI	Zip Code 53132-7402					: 201604			5					
	FEC ID number of contributing	_			Amoun		Each F	Receipt	unis P	enoa	-					
	federal political committee.	С			<u> </u>		7			39.0	0					
	Name of Employer	Occupation		_	– Memo Item											
	NML	VP & Real	Estate Counsel													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General		312.00	11												
	Other (specify)	<u> </u>	7 7 7													
s	UBTOTAL of Receipts This Page (optional)			<u> </u>	<u> </u>					108.0	0					
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ד	OTAL This Period (last page this line number	only)		•	1		,									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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			Detailed Summary Page		< 11a 13		11k		11c	12	17			
An	y information copied from such Reports and S	tatements ma	ay not be sold or used by any pe	erson	for the	pur	rpose	e of s	oliciting	contrib	utions			
or	for commercial purposes, other than using the	ddress of any political committee	e to so	olicit co	ontrik	outio	ns fro	om such	1 commi	ttee.				
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PA	С										
A .	Full Name (Last, First, Middle Initial) Christopher P. Swain				Date o	of Re	eceip	ot						
	Mailing Address 10927 N Wyngate Trce				04	/	D	15	/ Y	у у 2016	Y			
	City	State	Zip Code		Trans	sact	tion	ID : 2	016041	319749-	765			
	Mequon	WI	53092-5862	_	Amoun	nt of	Eac	ch Re	ceipt th	is Perio	b			
	FEC ID number of contributing federal political committee.	С					3			35	.00			
	Name of Employer	Occupation			Me	emo	ltem	l						
	NML	VP Msa Inv	estments											
	Receipt For:	Aggregate	Year-to-Date 🔻											
	Primary General Other (specify) ▼		280.00											
	Full Name (Last, First, Middle Initial) Christopher P. Swain				Date o	of Re	eceip	ot						
	Mailing Address 10927 N Wyngate Trce				04 30 2016									
	City	State	Zip Code		Transaction ID : 2016042719749-765									
	Mequon	WI	53092-5862		Amoun	nt of	Eac	ch Re	ceipt th	is Perio	b			
	FEC ID number of contributing federal political committee.	С			35.00									
	Name of Employer	Occupation		Memo Item										
	NML	VP Msa Inv	estments											
	Receipt For:	Aggregate	Year-to-Date 🔻	r-to-Date ▼										
	Primary General Other (specify) ▼		280.00											
c.	Full Name (Last, First, Middle Initial) Michael F. Tews				Date o	of Re	eceip	ot						
	Mailing Address 609 S 249th Cir				04	/	D	15	/ Y	у у 2016	Y			
	City Waterloo	State NE	Zip Code 68069-4432	-						519748-				
			00003-4432	_	Amoun	nt of	Eac	ch Re	ceipt th	is Perio	b			
	FEC ID number of contributing federal political committee.	С			Ľ.		7			125	.00			
	Name of Employer	Occupation			Me	emo	ltem	I						
	Self-Employed	General Ins	surance Agent											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		1000.00											
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			7		- 7	195	.00			
т	OTAL This Period (last page this line number	only)		•			,							

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	X 11a 11b 11c 12 13 14 15 16 17									
				rson for the purpose of soliciting contributions to solicit contributions from such committee.									
	COMMITTEE (In Full) orthwestern Mutual Life In												
A. Michael	(Last, First, Middle Initial) F. Tews dress 609 S 249th Cir	Date of Receipt											
City		State	Zip Code	04 30 2016 Transaction ID : 2016042919750-15									
Waterloo		NE	68069-4432	Amount of Each Receipt this Period									
	umber of contributing litical committee.	С		125.00									
Name of E	Employer	Occupation	1	Memo Item									
Self-Emplo		General Ins	surance Agent	_									
Receipt Fo		Aggregate	Year-to-Date ▼										
	er (specify) ▼		1000.00										
	(Last, First, Middle Initial) . Theodore			Date of Receipt									
	dress 12505 Ventana Mesa Cir			04 / Y Y Y Y Y 04 15 2016									
City Castle Pin	65	State CO	Zip Code 80108-9148	Transaction ID : 2016041519748-27									
FEC ID nu	umber of contributing litical committee.	C		Amount of Each Receipt this Period									
Name of E Self-Emplo		Occupation General Ins	surance Agent	Memo Item									
Receipt Fo		Aggregate	Year-to-Date ▼ 1664.00										
	(Last, First, Middle Initial) P. Theodore			Date of Receipt									
	dress 12505 Ventana Mesa Cir			04 / Y Y Y Y Y 2016									
City Castle Pir	nes	State CO	Zip Code 80108-9148	Transaction ID : 2016042919750-27 Amount of Each Receipt this Period									
	umber of contributing litical committee.	С		208.00									
Name of E	Employer	Occupation	1	Memo Item									
Self-Emplo		General Ins	surance Agent										
Receipt Fo		Aggregate	Year-to-Date ▼										
Othe	ary General er (specify) v		1664.00										
SUBTOTAL	of Receipts This Page (optional)		•••••	541.00									
TOTAL This	Period (last page this line number of	only)	•••••										

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

(check only one)

PAGE 83 OF

		Detailed Summary Page		11a 13		11b 14	11c	12	17						
Any information copied from such Reports				for the		pose of	soliciting	g contribu	tions						
or for commercial purposes, other than usi															
NAME OF COMMITTEE (In Full) The Northwestern Mutual L	ife Insurance	Company Federal PA	С												
Full Name (Last, First, Middle Initial)															
A. Michael S. Treptow			[Date of	Re	ceipt									
Mailing Address 8207 N Gray Log Ln				м м 04	/	D D D 15	/ Y	2016	Y						
City	State	Zip Code			acti		2016041	319749-8	327						
Fox Point	WI	53217-2863	/	Amount	of	Each R	eceipt th	nis Period							
FEC ID number of contributing federal political committee.	С					,		35.	00						
Name of Employer	Occupation	1	-	Mer	mo l	tem									
NML	Dir Inv Plg	& Ast Mgr Per													
Receipt For:	Aggregate	Year-to-Date ▼													
Other (appoint) General		280.00	1												
Other (specify)		280.00	┛║												
Full Name (Last, First, Middle Initial)	1														
B. Michael S. Treptow				Date of	Re	· · ·									
Mailing Address 8207 N Gray Log Ln				04 30 2016											
City	State	Zip Code						719749-8							
Fox Point	WI	53217-2863	/	Amount	of	Each R	eceipt th	nis Period							
FEC ID number of contributing federal political committee.	C					,	3	35.	00						
Name of Employer	Occupation	1		Mei	mo l	tem									
NML	Dir Inv Plg	& Ast Mgr Per													
	Aggregate	Year-to-Date ▼													
Other (specify)		280.00]												
Full Name (Last, First, Middle Initial) C. Alex J. Tronco	I			Date of	Re	ceipt									
Mailing Address 11 Stoneridge Dr				м м 04	/	15	/ Y	2016	Y						
City	State	Zip Code		Trans	act	ion ID :	2016041	519748-	56						
Loudonville	NY	12211-2625	/	Amount	of	Each R	eceipt th	nis Period							
FEC ID number of contributing federal political committee.	С							125.	00						
Name of Employer	Occupation	1	-	Mer	mo l	tem									
Self-Employed	General Ins	surance Agent													
Receipt For:	Aggregate	Year-to-Date ▼													
Other (specify)		1000.00	ור												
Other (specify)		1000.00	J _												
SUBTOTAL of Receipts This Page (option	nal)					3	7	195.	00						
TOTAL This Period (last page this line nu	mber only)					,									

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	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			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC								
Α.	Full Name (Last, First, Middle Initial) Alex J. Tronco Mailing Address 11 Stoneridge Dr			Date of Receipt							
	City	State	Zip Code	04302016							
	Loudonville	NY	12211-2625	Transaction ID : 2016042919750-56 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		125.00							
	Name of Employer	Occupation	1	— Memo Item							
	Self-Employed	General Ins	surance Agent								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
В.	Full Name (Last, First, Middle Initial) Leo C. Tucker			Date of Receipt							
	Mailing Address 605 Potomac River Rd			04 15 2016							
	City Mc Lean	State VA	Zip Code 22102-1402	Transaction ID : 2016041519748-42 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee. Name of Employer Occupating Self-Employed General I				125.00							
			urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
с.	Full Name (Last, First, Middle Initial)			Date of Receipt							
	Mailing Address 605 Potomac River Rd			04 30 Y Y Y Y Y 04 30 2016							
	City Mc Lean	State VA	Zip Code 22102-1402	Transaction ID : 2016042919750-42 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		125.00							
	Name of Employer	Occupation	1	Memo Item							
	Self-Employed	General Ins	surance Agent								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼	L	1000.00								
s	UBTOTAL of Receipts This Page (optional)			375.00							
т	OTAL This Period (last page this line number of	only)	•								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

(check only one)

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	EIMIZED RECEIPTS		for each category of the Detailed Summary Page		11a] 11	lb	11c	1	2				
			, ,		13		14		15		6	17			
An or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson f e to so	or the licit cor	purp ntrib	pos outio	se of s ons fro	soliciting om suc	g cont h com	ributi mitte	ons e.			
\backslash	NAME OF COMMITTEE (In Full)		<u> </u>	~											
/	The Northwestern Mutual Life Ir	surance	Company Federal PA	<u> </u>											
۹.	Full Name (Last, First, Middle Initial) John Van Der Hyde				Date of	Re	ecei	ipt							
	Mailing Address 849 Sabot Hill Rd				м м 04	/		D D 15	/ Y	y 201		Y			
	City	State	Zip Code	Transaction ID : 2016041519748-18											
	Manakin Sabot	VA	23103-3009	/	Amount	of	Ea	ach Re	ceipt th	nis Pe	riod				
	FEC ID number of contributing federal political committee.	С			208.00										
	Name of Employer	Occupation			Mer	mo l	lten	n							
	Self-Employed	General Ins	urance Agent												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Other (specify)	Primary General Aggregate real-to-Date V													
в.	Full Name (Last, First, Middle Initial) John Van Der Hyde				Date of	Re	ecei	ipt							
	Mailing Address 849 Sabot Hill Rd				м м 04	/	_	30	/ Y	201		Y			
	City	State	Zip Code		Trans	acti	ion	ID : 2	016042						
	Manakin Sabot	VA	23103-3009		Amount	of	Ea	ach Re	ceipt th	nis Pe	riod				
	FEC ID number of contributing federal political committee.	С		208.00											
	Name of Employer Self-Employed	Occupation General Ins	urance Agent		Memo Item										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00												
с.	Full Name (Last, First, Middle Initial) Alison F. Watson				Date of	Re	ecei	ipt							
	Mailing Address 420 Independence Ave SE				м м 04	/		D D 15	/ Y	y 201		Y			
	City	State	Zip Code		Trans	acti	ion	1 ID : 2	016041	131974	49-96	8			
	Washington	DC	20003-1046	/	Amount	of	Ea	ach Re	ceipt th	nis Pe	riod				
	FEC ID number of contributing federal political committee.	contributing							7		50.0	0			
	Name of Employer	Occupation		-	Mei	mol	lten	n							
	NML	Dir Fed Rel	ations												
	Receipt For:	Aggregate	Year-to-Date ▼												
	Primary General Other (specify)		400.00												
s	UBTOTAL of Receipts This Page (optional)						-			4	66.0	0			
Т	OTAL This Period (last page this line number	only)													

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

(check only one)

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	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	person for the purpose of soliciting contributions be to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) The Northwestern Mutual Lif	e Insurance Company Federal PA	νC							
Full Name (Last, First, Middle Initial) A. Alison F. Watson		Date of Receipt							
Mailing Address 420 Independence Ave S		04 30 2016							
City Washington	State Zip Code DC 20003-1046	Transaction ID : 2016042719749-968							
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period								
Name of Employer	Occupation Dir Fed Relations	Memo Item							
Receipt For: Primary General	Aggregate Year-to-Date ▼	-							
Other (specify)	400.00								
Full Name (Last, First, Middle Initial) B. Jeffrey B. Williams		Date of Receipt							
Mailing Address 2004 N 72nd St		04 / Y Y Y Y Y 2016							
City Wauwatosa	State Zip Code WI 53213-1828	Transaction ID : 2016041319749-542							
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period							
Name of Employer NML	Occupation VP Nmis-Nmwmc Chief Compl Off	Memo Item							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 304.00]							
Full Name (Last, First, Middle Initial) C. Jeffrey B. Williams		Date of Receipt							
Mailing Address 2004 N 72nd St		M = M / D = D / Y = Y = Y = Y Y Q <thq< th=""> Q <thq< th=""> <thq< th=""></thq<></thq<></thq<>							
City Wauwatosa	StateZip CodeWI53213-1828	Transaction ID : 2016042719749-542 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	38.00								
Name of Employer	Occupation	Memo Item							
NML	VP Nmis-Nmwmc Chief Compl Off								
	Aggregate Year-to-Date ▼								
Primary General Other (specify) ▼	304.00								
SUBTOTAL of Receipts This Page (optiona	l)	126.00							
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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			Detailed Summary Page		11a		11	1b	110	; [12			
					13		14		15		16	17		
or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson f e to sol	or the licit cor	purp ntrib	po: buti	se of ions fi	solici rom s	ting uch	contribu committ	tions ee.		
\rangle	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	isurance	Company Federal PA	С										
	Full Name (Last, First, Middle Initial) Kamilah D. Williams-Kemp			[Date of	Re	ece	eipt						
	Mailing Address 8645 N Dean Cir				м м 04	/	ľ	D D	/	Y	у у 2016	Y		
	City	State	Zip Code		Trans	acti	ior	n ID : 1	20160)413	819749-7	46		
	River Hills	WI	53217-2038	/	Amount	t of	Ea	ach R	eceip	t this	s Period			
	FEC ID number of contributing federal political committee.	С				_	7		. ,		40.	00		
	Name of Employer	Occupation			Mei	mo l	Iter	m						
	NML	VP Ltc												
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify)		320.00											
	Full Name (Last, First, Middle Initial) Kamilah D. Williams-Kemp				Date of	Re	ece	eipt						
	Mailing Address 8645 N Dean Cir		04 30 / Y Y Y Y											
	City	State	Zip Code		Trans	acti	ion		20160)427	19749-7	46		
	River Hills	WI	53217-2038	/	Amount	t of	Ea	ach R	eceip	t this	s Period			
	FEC ID number of contributing federal political committee.	С					,		. ,		40.	00		
	Name of Employer NML	Occupation VP Ltc			Me	mo l	lter	m						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 320.00											
	Full Name (Last, First, Middle Initial) Richard Worrell				Date of	Re	ece	eipt						
	Mailing Address 2423 Beretania Cir				м м 04	1	ľ	D D 15	/	Y	y y 2016	Y		
	City Charlotte	State NC	Zip Code 28211-3631								5 19748-5 s Period	5		
	FEC ID number of contributing federal political committee.	С					7		. ,		208.	00		
	Name of Employer		1	Me	mol	lter	m							
	Self-Employed	General Ins	urance Agent											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		1664.00											
s	JBTOTAL of Receipts This Page (optional)			•			7				288.0	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)								
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or	for commercial purposes, other than using the	name and a	ddress of any political committee	to so	olicit co	ntribu	itions 1	from suc	:h cor	mmitte	e.	
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Ir	nsurance	Company Federal PAC	C								
Α.	Full Name (Last, First, Middle Initial) Richard Worrell				Date of	f Rec	eipt					
	Mailing Address 2423 Beretania Cir				м м 04	/	30) 16	Y	
	City Charlotte	State NC	Zip Code 28211-3631					201604 Receipt t			;	
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	, j		208.0	0	
	Name of Employer	Occupation	I		Me	mo lte	em					
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		1664.00									
	Other (specify)		1864.00									
в.	Full Name (Last, First, Middle Initial) John William Wright II				Date of	f Rec	eipt					
	Mailing Address 510 King Rd NW				0 <u>4</u>	/	D I I) / Y	_ 20	16	Y	
	City	State	Zip Code			actio		201604 ⁻		-		
	Atlanta	GA	30342-4011					Receipt t				
	FEC ID number of contributing federal political committee.	С				. ,	_		_	41.6	7	
	Name of Employer	Occupation	I		Me	emo lte	em					
	Self-Employed	General Ins	urance Agent									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		, 333.36									
<u>с</u> .	Full Name (Last, First, Middle Initial) John William Wright II				Date of	f Rec	eipt					
	Mailing Address 510 King Rd NW				м м 04	/	30		_ 20) 16	Y	
	City	State	Zip Code		Trans	sactio	on ID :	201604	2919	750-32	2	
	Atlanta	GA	30342-4011		Amoun	t of E	Each F	leceipt t	his P	eriod		
	FEC ID number of contributing federal political committee.	С					,			41.6	7	
	Name of Employer	Occupation			Me	mo lte	em					
	Self-Employed	General Ins	surance Agent									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Other (specify)		333.36									
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER:

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TEMIZED RECEIPTS		Detailed Summary Page		11a		11	b	11c	12				
Any information partial framework D	and Otatamanta			13		14		15	16	17			
Any information copied from such Reports or for commercial purposes, other than us													
NAME OF COMMITTEE (In Full)													
The Northwestern Mutual I	_ife Insurance	Company Federal PA	С			_							
Full Name (Last, First, Middle Initial) Conrad C. York				Date of	Re	ecei	ipt						
Mailing Address PO Box 511100				м м 04	/		15	/ Y	ү ү 2016	Y			
City	State	Zip Code		Trans	acti	ion	ID : 2	2016041	319749-7	'17			
Milwaukee	WI	53203-0191	A	mount	of	Ea	ch Re	eceipt th	nis Period				
FEC ID number of contributing federal political committee.	C				_	,		7	101.	00			
Name of Employer	Occupation	1	- [Mer	mo li	lten	n						
NML	VP Marketi	ng											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		808.00]										
Full Name (Last, First, Middle Initial) B. Conrad C. York	1			Date of	Re	ecei	ipt						
Mailing Address PO Box 511100			04 30 / Y Y Y Y 2016										
City	State	Zip Code		Trans	acti	ion	ID : 2	2016042	719749-7	17			
Milwaukee	WI	53203-0191	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.			101.00										
Name of Employer NML	Occupation VP Marketin			Mei	mo l	lten	n						
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 808.00]										
Full Name (Last, First, Middle Initial) C. Catherine M. Young	1			Date of	Re	ecei	ipt						
Mailing Address 929 N Astor Street Un	it			м м 04	/		15	/ Y	2016	Y			
City	State WI	Zip Code							319749-				
Milwaukee	VVI	53202	A	mount	of	Ea	ch Re	eceipt th	nis Period				
FEC ID number of contributing federal political committee.	C				_	7		7	40.	00			
Name of Employer	Occupation	1		Mer	mo l	lten	n						
NML	Ast Gn Cn	& Ast Sec/Re											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		320.00]										
SUBTOTAL of Receipts This Page (optic	nal)					7		3	242.	00			
TOTAL This Period (last page this line n	umber only)					7							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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ITEMIZED 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 S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life II	nsurance	Company Federal PAC	2							
Α.	Full Name (Last, First, Middle Initial) Catherine M. Young			Date of Receipt							
	Mailing Address 929 N Astor Street Unit			04 30 _ 2016							
	City Milwaukee	State WI	Zip Code 53202	Transaction ID : 2016042719749-1016 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		40.00							
	Name of Employer NML Receipt For:	Occupation Ast Gn Cn	a & Ast Sec/Re	Memo Item							
	Primary General Other (specify)										
в.	Full Name (Last, First, Middle Initial) T. Scott Zach			Date of Receipt							
	Mailing Address 6630 Country Creek Ln			04 15 2016							
	City Cedar Rapids	Zip Code 52403-7023	Transaction ID : 2016041519748-49 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		125.00							
	Name of Employer Self-Employed	Occupation General Ins	urance Agent	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00								
С.	Full Name (Last, First, Middle Initial) T. Scott Zach			Date of Receipt							
	Mailing Address 6630 Country Creek Ln			04 30 2016							
	City Cedar Rapids	State IA	Zip Code 52403-7023	Transaction ID : 2016042919750-49 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		125.00							
	Name of Employer	Occupation	1	Memo Item							
	Self-Employed	General Ins	surance Agent								
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00								
s	UBTOTAL of Receipts This Page (optional)		▶	290.00							
т	OTAL This Period (last page this line number	only)	••••••								

SCHEDULE A	(FEC Form 3X)	
ITEMIZED REC	EIPTS	

(check only one)

PAGE 91 OF

			Detailed Summary Page		< 11a		11b	11c	12						
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or for commercial p	ay not be sold or used by any p ddress of any political committee														
NAME OF COMI		ife Insurance	Company Federal PA	С											
Full Name (Last, A. Thomas D. Z	First, Middle Initial)				Data a	E Do	agint								
	2818 E Menlo Blvd			_	Date of Receipt										
Walling / lacross					04 15 _ 2016 _										
City		State	Zip Code	Transaction ID : 2016041319749-737											
Shorewood		WI	53211-2652		Amount of Each Receipt this Period										
FEC ID number federal political c	U U	С					,			0.00)				
Name of Employ	er	Occupation	1		Me	mo l	tem								
NML		VP Real Es	tate												
Receipt For:		Aggregate	Year-to-Date V												
Other (spec	General cify) ▼	1040.00													
Full Name (Last, B. Thomas D. Z	First, Middle Initial)				Date of	f Re	eceipt								
Mailing Address 2818 E Menlo Blvd						04 30 2016									
City		Transaction ID : 2016042719749-737													
Shorewood		WI	53211-2652		Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.					130.00										
Name of Employ NML	er	Occupation VP Real Es			Me	mo l	ltem								
Receipt For:		Aggregate	Year-to-Date ▼												
Other (spec	General cify) ▼		1040.00]											
Full Name (Last, C. Rick T. Zeh	First, Middle Initial) Ner				Date of	f Re	eceipt								
Mailing Address	203 W Ravine Baye Rd				м м 04	/	15		2016	Y					
City Bayside		State WI	Zip Code 53217-1334					2016041 Receipt th			5				
FEC ID number federal political c	0	С			41.00										
Name of Employ	_	Memo Item													
NML VP Research & Special Projects															
Receipt For:		Aggregate	Year-to-Date ▼												
Primary	General		328.00	11											
Other (spe	city) 🔻		320.00												
SUBTOTAL of Rec	ceipts This Page (option	al)					,		30	1.00)				
TOTAL This Period	d (last page this line nu	mber only)		•											

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 92 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	1 1a		11b	11c	12					
				13		14	15	16	17				
Any information copied from such Re or for commercial purposes, other th													
NAME OF COMMITTEE (In Full)													
The Northwestern Mut	ual Life Insurance	Company Federal PA	С										
Full Name (Last, First, Middle Init A. Rick T. Zehner	ial)			Date o	f Re	eceipt							
Mailing Address 203 W Ravine Ba	aye Rd			04 30 _ 2016 _									
City	State	Zip Code		Transaction ID : 2016042719749-905									
Bayside	WI	53217-1334		Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C					7	7	41.	00				
Name of Employer	Occupation			Me	mol	ltem							
NML	VP Researc	ch & Special Projects											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General Other (specify) ▼		328.00											
Full Name (Last, First, Middle Init B. Todd O. Zinkgraf	ial)	, ,		Date o	f Re	eceipt							
Mailing Address 118 Ferris Dr				04	/	15		2016	Y				
City	State	Zip Code		Transaction ID : 2016041319749-935									
North Prairie	WI	53153-9455						nis Period					
FEC ID number of contributing federal political committee.			<u> </u>		7		81.	00					
Name of Employer NML	Occupation VP Ent Solu			Me	emo	ltem							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 648.00]										
Full Name (Last, First, Middle Init C. Todd O. Zinkgraf	ial)			Date o	f Re	eceipt							
Mailing Address 118 Ferris Dr				м м 04	/	30		ү ү 2016	Y				
City North Prairie	State WI	Zip Code 53153-9455						2 719749-9 nis Period					
FEC ID number of contributing federal political committee.	C			81.00									
Name of Employer	Occupation	I		Me	mol	ltem							
NML	VP Ent Sol	utions											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General			11.										
Other (specify)		648.00											
SUBTOTAL of Receipts This Page	(optional)					7		203.	00				
TOTAL This Period (last page this	line number only)					7							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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PAGE 93 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c		12		
Ar	y information copied from such Reports and St	atements ma		erson f	13 for the	pur	14 pose o	15 f solicitine		16 htributi	17 ions	,
	for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life In	surance	Company Federal PAC)								
Α.	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo				Date o	f Re	eceipt					
	Mailing Address 104 Wildwood Dr				м м 04	/	D 15) 16	Y	
	City Avon	State CT	Zip Code 06001-4413					: 2016041)	
	FEC ID number of contributing federal political committee.	C			Amoun	tor	Each i	Receipt th		eriod 208.0	0	
	Name of Employer	Occupation	surance Agent		Me	mo l	tem					
	Self-Employed Receipt For:											
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00									
В.	Full Name (Last, First, Middle Initial) Jeffrey Zuzolo				Date o	f Re	eceipt					
	Mailing Address 104 Wildwood Dr				м м 04	/	30		_20	Y 16	Y	
	City	State	Zip Code		Trans	acti	ion ID :	2016042	<u>29197</u>	750-1C)	
	Avon	СТ	06001-4413		Amoun	t of	Each I	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С					,		_	208.0	0	
	Name of Employer Self-Employed	Occupation General Ins	urance Agent		Me	mo	ltem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1664.00									
с.	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt					
	Mailing Address				M M	/	D	D / Y	Y	Y	Y	
	City	State	Zip Code		Amoun	t of	Each F	Receipt th	nis P	eriod	_	
	FEC ID number of contributing federal political committee.	С					7					
	Name of Employer	Occupation	I		Me	mol	tem					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼									
s	UBTOTAL of Receipts This Page (optional)			.						416.0	0	[
т	OTAL This Period (last page this line number o	nly)					,	,	28	3352.3	2	ĺ

S	CHEDULE B (FEC Form 3X)							:			PAC	ΞE	94 (DF 103
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(c		k only 21b	on	e) │22		23		24	_	25	26
		Detailed Summary Page		\vdash	210	-	22 28a		23 28b	\vdash	24 28c	-	25 29	30
	y information copied from such Reports and Stater for commercial purposes, other than using the nan													
\backslash	NAME OF COMMITTEE (In Full)	•												
	The Northwestern Mutual Life Insu	rance Company Fed	eral	IP.	AC									
Α.	Full Name (Last, First, Middle Initial) US Bank					[Date o	f Di	sburse	eme	ent			
							M M	_	D			Y	Y	Y
	Mailing Address 777 E.Wisconsin Ave.					1	04	1	1	4		20	016	
	,	State Zip Code WI 53202					Trans	acti	ion ID	: 6	6 B8191 1	18D	F2C5	C6FFE1
	Milwaukee Purpose of Disbursement	WI 53202			_									
	Service Charge		0	01		A	Amoun	t of	Each	Di	sbursen	nent	this	Period
	Candidate Name		Cate	egoi ype	ry/								238.	85
	Office Sought: House Disburser	ment For:		ype		-i	Me	mo l	tem					
	Senate President	Primary General Other (specify)												
	State: District:													
_	Full Name (Last, First, Middle Initial)													
В.							Date o	t Dis	sburse			V	Y	V
	Mailing Address						M = M	<i>'</i>		D	/ Ч	- Y	Ŷ	Ŷ
	City	State Zip Code												
	Purpose of Disbursement			-					F	D .				Devia
	Candidate Name		Cate		n/	/	Amoun	τοι	Each	וט	sbursen	hent	this	Period
				ype		ų			7		7			
	Office Sought: House Disburser Senate	nent For: Primary General					Me	mo l	tem					
	President	Other (specify)												
	State: District:													
C.	Full Name (Last, First, Middle Initial)					[Date o	f Di	sburse	eme	ent			
	Mailing Address						M M	/	D	D	/ Y	Y	Y	Y
						_							-	
	City	State Zip Code												
	Purpose of Disbursement		-	-										
	Candidate Name		Cate	egoi ype	ry/	ļ	Amoun	t of			sbursen	nent	this:	Period
	Office Sought: House Disburser					j	Me	mo l	tem		7			
	Senate President	Primary General Other (specify)												
	State: District:													
	,											1	220	85
s	UBTOTAL of Disbursements This Page (optional)							÷	7		- 7	÷	238.	00
т	OTAL This Period (last page this line number only)				•				,				238.	85

S	CHEDULE B (FEC Form 3X)			F			UMBER:	,		P	AGE	95 (DF 103
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page			21b 27			23 28b	24		25	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
\backslash	NAME OF COMMITTEE (In Full)												
	The Northwestern Mutual Life Insu	rance C	Company Fec	lera	I P/								
Α.	Full Name (Last, First, Middle Initial) Beatty for Congress						Date of	f Dis					
	Mailing Address 222 East Town Street Suite 2W						04	/	0			016	Y
	Columbus	State OH	Zip Code 43215				Trans	actio	on ID	: 830A8	CEE1	BDD	F30993
	Purpose of Disbursement 2016 General			C)11		Amoun	t of I	Each	Disburse	emen	t this I	Period
	Candidate Name Joyce Beatty				egor ype	y/			,			2000.	00
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	K General				Me	mo lt	em				
	State: OH District: 03 Full Name (Last, First, Middle Initial)												
В.	Becerra for Congress						Date of	f Dis					
	Mailing Address PO Box 71584						04	/	D 1-			016	Y
	City S Los Angeles	State CA	Zip Code 90071				Trans	acti	on ID	: 3E122	FCE	-5D11	854606
	Purpose of Disbursement 2016 Primary			(011		Amoun	t of I	Each	Disburse	emen	t this I	Period
	Candidate Name			Cate	egor	y/						1000.	00
	Xavier Becerra			T	уре		<u>_</u>	-	7		-	1000.	00
		nent For: Primary Other (spe	General				Mer	no lte	em				
C.	Full Name (Last, First, Middle Initial) Boustany for Senate Inc						Date of	f Dis					
	Mailing Address PO Box 80126						04	/	D 19			016	Y
	City Stafayette	State LA	Zip Code 70598-0126				Trans	acti	on ID	: F15E6	1090	BBE1	BB89C8
	Purpose of Disbursement Voided 3/7/16 Disbursement			C)11		Amoun	t of I	Each	Disburse	emen	t this I	Period
	Candidate Name Charles William Boustany Jr.				egor ype	y/						-1000.	00
	Office Sought: House Disburser Senate President State: LA District:	nent For: Primary Other (spe	K General				Me	no lt	em	,			
s	UBTOTAL of Disbursements This Page (optional)					•						2000.	00
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	CHEDULE B (FEC Form 3X)		parate schedule(s)		-			UMBER	:			PA	GE	96 (DF 103
IT	EMIZED DISBURSEMENTS	for each	a category of the I Summary Page	(c		k on 21b 27	· _	one) 22 28a	×	23 28b		24 28c		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	The Northwestern Mutual Life Insu	rance (Company Fe	dera	P										
Α.	Full Name (Last, First, Middle Initial) Boustany for Senate Inc							Date o	of Dis	sburse	ement				
	Mailing Address PO Box 80126							04	/	D 2	20	/ Y		016	Y
	5	State LA	Zip Code 70598-0126					Tran	sact	ion ID): A8	3A99	E9D)F57D	8DEC8C
	Lafayette Purpose of Disbursement 2016 General		70598-0126		11	_	_	A		F aab	Dieb				Devied
	Candidate Name)11			Amour	nt of	Each	DISD	urser	nent	this i	Period
	Charles William Boustany Jr.			Cate	ego ype							7		1000.	00
		nent For: Primary	2016 X General		<u>, , , , , , , , , , , , , , , , , , , </u>			Me	emo l	tem					
	State: LA District:	Other (spe													
	Full Name (Last, First, Middle Initial)														
В.	Carlos Curbelo Congress							Date c							
	Mailing Address 8724 SW 72nd St							04	/	2	26	/ Y		016	Y
	Miami	State FL	Zip Code 33173-3512					Tran	sact	ion ID) : ED	BEF	4DD	2AE4	8A40C57
	Purpose of Disbursement 2016 General			C)11			Amour	nt of	Each	Disb	urser	nent	this I	Period
	Candidate Name			Cate										2000.	00
	Carlos Luis Curbelo			T	ype)				7		7	-	2000.	00
	Office Sought: House Disburser Senate President State: FL District: 26	ment For: Primary Other (spe	K General					Me	mo l	tem					
_	Full Name (Last, First, Middle Initial)							Date o		abure	omon				
0.	Cleaver for Congress									D			V	Y	V
	Mailing Address 4801 Main Street, Suite 1000							04			26			016	
	City Stansas City	State MO	Zip Code 64112					Tran	sact	ion ID): 434	4B1B	1AD	DA3E/	AD4DFA2
	Purpose of Disbursement 2016 General)11			٨٠٠٠		Tash	Diah		~~~t	thic	Deried
	Candidate Name			Cate		nu/		Amour		Each	DISD	urser	nem	. uns i	renou
	Emanuel Cleaver II				ype			L.,						2500.	00
	Senate President	nent For: Primary Other (spe	K General					Me	emo l	tem		,			
	State: MO District: 05							_							
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SC	HEDULE B (FEC Form 3X)			F	DR	LINE	E NI	UMBER	:			PA	AGE	97	OF 103
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(c	hec	k on	· _			1 00	Г			1.05	
			Summary Page		\vdash	21b 27	' -	22 28a	×	23 28b	$\left \right $	24 28c	\vdash	25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
\backslash	NAME OF COMMITTEE (In Full)	_				_									
	The Northwestern Mutual Life Insu	rance Co	ompany Feo	leral	Ρ	AC									
Α.	Full Name (Last, First, Middle Initial) Cole for Congress							Date o	of Dis	sburse	əm	nent			
	Mailing Address PO Box 722256							04	/	D 1	9	/		016	Ŷ
	City	State	Zip Code				_								
	Norman	OK	73070					Tran	sacti	ion ID):	3F5B0	1D52	21034	42AB72
	Purpose of Disbursement 2016 General			0	11			Amour	nt of	Each	D	visburse	ement	t this	Period
	Candidate Name			Cate	eao	rv/				-				1000	00
	Thomas Jeffery Cole				ype	,		<u></u>		7	_			1000	00
	Office Sought: X House Disburser Senate President	nent For: 2 Primary Other (spec	K General					Me	emo l	tem					
	State: OK District: 04														
В.	Full Name (Last, First, Middle Initial) Committee To Re-Elect Linda San	chez						Date o	of Dis	sburse	əm	nent			
	Mailing Address 410 1st St SE Suite 310							04	/	D	D 07	/		016	Ŷ
	Washington	State DC	Zip Code 20003					Tran	sact	ion ID):	2BD5F	3C04	4519F	C62456
	Purpose of Disbursement 2016 Primary			C)11			Amour	nt of	Each	D	isburse	ement	t this	Period
	Candidate Name			Cate										2500	.00
	Linda T. Sanchez Office Sought: Y House Disburser	nent For: 2	040	T	ype		_			7		,			
	Senate X President	Primary Other (spec	General					Me	mo l	tem					
_	State: CA District: 38														
C.	Full Name (Last, First, Middle Initial) David Scott for Congress							Date o	of Dis						
	Mailing Address PO Box 960821							04	/	2	26			016	Y
	City S Riverdale	State GA	Zip Code 30296					Tran	sact	ion ID):	4F43E	83A7	248D	A0C1AB
	Purpose of Disbursement 2016 General	-													
	Candidate Name				11	_		Amour	nt of	Each	D	isburse	emen	t this	Period
	David Albert Scott			Cate	ego ype									2500	00
	Office Sought: House Disburser Senate President	nent For: 2 Primary Other (spec	X General		<u>, </u>			Me	emo l	tem					
_	State: GA District: 13														
s	UBTOTAL of Disbursements This Page (optional)					. 🕨				7		,		6000	.00
Т	OTAL This Period (last page this line number only)					. 🕨				,					

S	CHEDULE B (FEC Form 3X)			F	OR	LINE	E N	UMBER	:			PAC	GE	98 (DF 103
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(c	hec	k on ∃21b	· _			200		24] 2E	
			Summary Page		\vdash	21b 27		22 	×	23 28b	$\left \right $	24 28c	-	25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
\setminus	NAME OF COMMITTEE (In Full)	_				_									
\bigvee	The Northwestern Mutual Life Insu	rance C	Company Fee	dera	I P	PAC									
Δ	Full Name (Last, First, Middle Initial)							Date o	of Die	shured	amoni				
	Dold for Congress								_	D			Y	Y	Y
	Mailing Address PO Box 6312							04)4	L		016	
	5	State	Zip Code					Tran	sacti	ion ID): AF	6C50	D4E	BFFFF	FF8A8F
	Libertyville Purpose of Disbursement	IL	60048				_	man	ouot						
	2016 General			C)11			Amour	nt of	Each	Disb	ursen	nent	t this	Period
	Candidate Name			Cate	ego	ry/							1	2000.	00
	Robert James Dold Jr.				ype					7	_	7	-	2000.	00
	Office Sought: House Disburser	nent For: Primary	2016 X General					Me	emo l	tem					
	President	Other (spe	/ \												
	State: IL District: 10														
_	Full Name (Last, First, Middle Initial)							_							
В.	Friends of Pat Toomey							Date o	_			_			_
	Mailing Address 228 S. Washington St., Suite 115						-	M N	/)4	Y		016	Y
	Alexandria	State VA	Zip Code 22314					Tran	sact	ion ID): 387	71998	B1F0	CB8F	C8A9E8
	Purpose of Disbursement 2016 General)11			Amour	nt of	Fach	Dish	ircon	nont	this	Period
	Candidate Name							/ iniour		Luon	DIOD				Chica
	Patrick Joseph Toomey			Cate T	ype			L.,		7	_	7		1000.	00
			2016					Me	mo l	tem					
	Senate President	Primary Other (spe	General												
	State: PA District:	Other (spe	oliy) V												
_	Full Name (Last, First, Middle Initial)														
C.	Friends of Sherrod Brown							Date c	of Dis	sburse	ement				
	Mailing Address PO Box 15293						-	M N 04	/	D)4	Y		016	Y
	City	State	Zip Code				+								
	Washington	DC	20003					Tran	sact	ion ID): E6	5E20	в54	CC09	D141DC
	Purpose of Disbursement 2018 General)11										
	Candidate Name							Amour	nt of	Each	Disb	ursen	nent	t this	Period
	Sherrod Campbell Brown			Cate T	ego ype									1500.	00
	Office Sought: House Disburser	ment For:						Me	emo l	tem					
	Y Senate President	Primary	General												
	State: OH District:	Other (spe	olly) 🔻												
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s	UBTOTAL of Disbursements This Page (optional)					•				,		7		4500.	00
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S	CHEDULE B (FEC Form 3X)			F	OR I	LINE N	IUMBER	:		F	PAGE	99 (DF 103
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(C	heck	k only (21b 27	one) 22 28a	×	23 28b	24		25 29	26 30b
	y information copied from such Reports and Staten for commercial purposes, other than using the name												
	NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance C	Company Fee	dera	I P/	AC							
A.	Full Name (Last, First, Middle Initial) Giving Willingly Empowering Nation	nally (G	WEN) PAC				Date o	f Dis	burse		Y	Y Y	Y
	Mailing Address PO Box 75357						04		2	6	_2	2016	
	City S Washington Purpose of Disbursement	State DC	Zip Code 20013				Trans	sacti	on ID	: D166	0C4B	A1A60	B2D6FE
	2016 Contribution Candidate Name			C)11		Amoun	t of	Each	Disbur	semer	nt this I	Period
	Giving Willingly Empowering National Office Sought: House Disburser	nent For:	2016		egor ype	ry/	Me	mo lt	tem			5000.	00
	State: District:	Primary Other (spe	ecify) ▼ Contribution										
в.	Full Name (Last, First, Middle Initial) Grassley Committee Inc						Date o	f Dis	burse		Y	YY	Ŷ
	Mailing Address PO Box 1000						04		0			2016	
	Des Moines	State IA	Zip Code 50304-1000				Trans	sacti	on ID	: 0880	AED	D15078	510C21
	Purpose of Disbursement 2016 General Candidate Name			1.00	011		Amoun	t of	Each	Disbur	semer	nt this I	Period
	Charles E. Grassley	nent For:	2016		egor ype	·y/			,			1000.	00
	X Senate	Primary Other (spe	X General				Me	mo lt	em				
с.	Full Name (Last, First, Middle Initial) Hudson for Congress						Date o						1
	Mailing Address PO Box 5053						04	ĺ	04			2016	T
	Concord	State NC	Zip Code 28027-1500				Trans	sacti	on ID	: 2F43	AB84	6C3FD	D6CABD
	Purpose of Disbursement 2016 General Candidate Name			Cat)11 egor	ry/	Amoun	t of	Each	Disbur	semer		
	Richard Lane Hudson Jr. Office Sought: House Senate Disburser President Disburser State: NC District: 08	2016	Т	ype		Me	mo lt	:em			1000.	0	
s	UBTOTAL of Disbursements This Page (optional)					•			, ,			7000.	00
т	OTAL This Period (last page this line number only)								,				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 100 OF 103
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	v one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) The Northwestern Mutual Life Insu	rance Company Feo	deral PAC	
Full Name (Last, First, Middle Initial) A. Kevin McCarthy for Congress			Date of Disbursement
Mailing Address PO Box 12667			04 19 2016
Bakersfield	StateZip CodeCA93389-2667		Transaction ID : DFE2CF6A628D11BC877
Purpose of Disbursement 2016 Primary Candidate Name		011	Amount of Each Disbursement this Period
Kevin Owen McCarthy	nent For: 2016	Category/ Type	2500.00
Office Sought: House Disburser Senate President State: CA District: 23	Primary General Other (specify)		Memo Item
Full Name (Last, First, Middle Initial) B. McHenry for Congress			Date of Disbursement
Mailing Address PO Box 2165			04 20 2016
Gastonia	State Zip Code NC 28053-2165		Transaction ID : E68C66C8AA08BBA728F
Purpose of Disbursement 6/7/16 Primary Candidate Name Patrick Timothy McHenry		011 Category/ Type	Amount of Each Disbursement this Period 2000.00
Office Sought: X House Disburser	nent For: 2016 Primary General Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial) C. Mike Kelly for Congress			Date of Disbursement
Mailing Address PO Box 476			04 / D D / Y Y Y Y 2016
Lyndora	State Zip Code PA 16045		Transaction ID : 8EE5F65A09AA2E9A8D9
Purpose of Disbursement 2016 Primary Candidate Name		011	Amount of Each Disbursement this Period
Senate President	nent For: 2016 Primary General Other (specify) ▼	Category/ Type	2500.00 Memo Item
State: PA District: 03 SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			7000.00

S	CHEDULE B (FEC Form 3X)				<u>אר</u>		MBER				PAGF	101	OF 103
	EMIZED DISBURSEMENTS		rate schedule(s)			k only	ne)						
-			category of the Summary Page			21b 27	22 28a	×	23 28b	24		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan												
	NAME OF COMMITTEE (In Full)												
	The Northwestern Mutual Life Insu	rance Co	ompany Fe	deral	P.	AC							
^	Full Name (Last, First, Middle Initial)						Dette	<u>د م</u>					
А.	Mike Thompson for Congress						Date o	_					
	Mailing Address 5429 Madison Avenue						04	/		D /		2016	Y
	City	State	Zip Code				_						
	Sacramento	CA	95841				Trans	sacti	ion ID	: 2FD8	8BF9	2B287	579ABD
	Purpose of Disbursement 2016 Primary			C	11	٦	Amoun	t of	Each	Disbur	semei	nt this	Period
	Candidate Name			Cate	egoi	ry/						2000.	00
	Michael C. Thompson			T	ype		<u></u>		7			2000.	
	Senate X President	ment For: 2 Primary Other (spec	General				Me	mo l'	tem				
	State: CA District: 05												
в.	Full Name (Last, First, Middle Initial) Moore for Congress						Date o	f Dis	sburse	ement			
	Mailing Address PO Box 16646						м м 04	/		4		2016	Y
	Milwaukee	State WI	Zip Code 53216				Trans	sacti	ion ID	: 07C6	E630	23E83I	F4DF0E
	Purpose of Disbursement 2016 General						مريم	t of	Tach	Diahur		at this	Deried
	Candidate Name			la de la compañía de)11	_	Amoun	τοι	Each	Disbur	seme	nt this	Period
	Gwendolynne Sophia Moore			Cate	egoi /pe	ry/	L					1500.	00
	Office Sought: X House Disburser Senate President	nent For: 2 Primary Other (spec	2016 General		/pc		Me	mo li	tem				
_	State: WI District: 04												
C.	Full Name (Last, First, Middle Initial) Ryan for Congress, Inc.						Date o	f Dis	sburse	ement			
	Mailing Address PO Box 1488						04	/	D 1	D / 3		2016	Y
	City	State	Zip Code				 						
	Janesville	WI	53547-1488				Trans	sacti	ion ID	: 8602	994D	D06012	2B6EFC
	Purpose of Disbursement 2016 General			0	11	٦	Amoun	t of	Each	Disburs	semei	nt this	Period
	Candidate Name			Cate	egoi	ry/						5000	~~
	Paul Davis Ryan Jr.				ype				,			5000.	00
	Office Sought: House Disburser Senate President District: 01	nent For: 2 Primary Other (spec	X General				Me	mo li	tem				
Γ							-				_	8500.	00
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SCHEDULE B (FEC Form	3X)			F	OR	LINE I	NU	MBER	:			PAG	E 102	OF 103
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			Summary Page			21b 27	\vdash	22 28a	×	23 28b		24 28c	25 29	26 30b
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NAME OF COMMITTEE (In Full)						_								
The Northwestern Mutual	Life Insu	rance C	Company Fe	dera	I P	AC								
Full Name (Last, First, Middle Initial)								Data	(D:					
A. Terri Sewell for Congress								Date c	_					
Mailing Address PO Box 1964								04		2	6	Y	2016	Y
City	5	State	Zip Code					Tran	aati		. BUI	1445		FC46EB0
Birmingham		AL	35201					Iran	Saci		. 601	J144F	D0C40	-C40EBU
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Candidate Name				Cat	ego	ry/							1500	00
Terri Andrea Sewell	- D: I			Т	ype	;		<u></u>		7		7	1000	.00
Office Sought: House Senate President State: AL District: 07		nent For: Primary Other (spe	X General					Me	mo l	tem				
Full Name (Last, First, Middle Initial)														
B. Tom Reed for Congress								Date c	_					
Mailing Address PO Box 10847								04	/		D /	Y	2016	Y
City Rochester	S	State NY	Zip Code 14610-0847					Tran	sact	ion ID	: E51	D802	CFA06F	9F38A7
Purpose of Disbursement 2016 General								•		-				Devie
					011			Amour	it of	Each	Disbu	rseme	ent this	Period
Thomas W. Reed II.				Cat T	ego ype								1000	.00
Office Sought: House Senate President State: NY District: 23		nent For: Primary Other (spe	2016 X General ecify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>	,		Me	mo l	tem		,		
Full Name (Last, First, Middle Initial)														
c. Tom Rice for Congress								Date c	_		_			
Mailing Address PO Box 70098								04	/	2	6 0	Ŷ	2016	Y
City		State	Zip Code					-						
Myrtle Beach		SC	29572					Iran	sact	ion ID	: 621	4/BB	FF3154	32D181
Purpose of Disbursement 2016 General				(011			Amour	it of	Each	Disbu	rseme	ent this	Period
Candidate Name				Cat	ego	ry/							0500	00
Tom Rice	- D: I			Т	ype	;				7		7	2500	.00
Office Sought: House Senate President State: SC District: 07	nent For: Primary Other (spe	X General					Me	mo l	tem					
	- (anti							-	-	-		-	5000	00
SUBTOTAL of Disbursements This Pag	e (optional)					• •		-	÷	7	-	7	0000	
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	CHEDULE B (FEC Form 3X)	parate schedule(s)					IMBER:			P	٩GE	103	OF 103	
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan													
$\left \right\rangle$	NAME OF COMMITTEE (In Full)	-	_											
	The Northwestern Mutual Life Insu	rance C	Company Feo	deral	I P	AC								
Α.	Full Name (Last, First, Middle Initial) Vargas for Congress							Date of	Dis	sburse	ment			
	Mailing Address 330 Encinitas Blvd							м м 04	/	D 2			2016	Y
	City S Encinitas	State CA	Zip Code 92024-8705					Trans	acti	on ID	: 97E45	4EEC	DC4AI	DE449CF
	Purpose of Disbursement 2016 Primary			0)11			Amount	of	Each	Disburse	emen	nt this	Period
	Candidate Name			Cate	900	n/			-					_
	Juan Carlos Vargas				ype					7			1500.	00
	Office Sought: House Disburser Senate President State: CA District: 51	nent For: Primary Other (spe	General					Mer	no l	tem				
	Full Name (Last, First, Middle Initial)													
В.	Vern Buchanan for Congress							Date of	Dis					
	Mailing Address PO Box 48928							04	/		D / 6		2016	Y
	City Sarasota	State FL	Zip Code 34230					Trans	acti	ion ID	: C038E	8E50	F8E8A	F86E85
	Purpose of Disbursement 2016 General			C)11	٦		Amount	of	Each	Disburse	emen	nt this	Period
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	Vernon Gale Buchanan				ype					7			1000.	00
	Senate President	ment For: Primary Other (spe	X General					Mer	no li	tem				
	State: FL District: 16													
C.	Full Name (Last, First, Middle Initial)							Date of	Dis					
	Mailing Address							M M	/	D	D /	Y Y	ΥΥ	Y
	City	State	Zip Code											
	Purpose of Disbursement													
	Candidate Name			Cate	ego ype			Amount	t of	Each	Disburse	emen	it this	Period
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General ecify) ▼					Mer	no li	tem	,			
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