

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

ADDRESS (number and street) 720 E Wisconsin Ave
Check if different than previously reported. (ACC) Milwaukee WI 53202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00197095 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [01] / [01] / [2022] through [01] / [31] / [2022]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Hinze, Michelle, A., ,
Type or Print Name of Treasurer

Signature of Treasurer Hinze, Michelle, A., , [Electronically Filed] Date [02] / [10] / [2022]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		<input type="text" value="520091.99"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="520091.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="33776.44"/>	<input type="text" value="33776.44"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="553868.43"/>	<input type="text" value="553868.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="86100.00"/>	<input type="text" value="86100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="467768.43"/>	<input type="text" value="467768.43"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20774.00	20774.00
(ii) Unitemized	13002.44	13002.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	33776.44	33776.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	33776.44	33776.44
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	33776.44	33776.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	33776.44	33776.44

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	73000.00	73000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	13100.00	13100.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	86100.00	86100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	86100.00	86100.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	33776.44	33776.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33776.44	33776.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Abbass, Steven, Fay, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Woodhull Ct
 City Northport State NY Zip Code 11768-2844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-62
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Abell, Rick, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 Princeton Reach Way
 City Granite Bay State CA Zip Code 95746-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-43
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Beer, Mitchell, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3387 Hampton Ct
 City Thousand Oaks State CA Zip Code 91362-1130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-18
 Amount of Each Receipt this Period 125.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Botcher, Sandra, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 704 Saint Johns Dr
 City Delafield State WI Zip Code 53018-1502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 322.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-367
 Amount of Each Receipt this Period 161.00
 Memo Item

B. Byrne, Michael, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 395 La Casa Via
 City Walnut Creek State CA Zip Code 94598-4842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-11
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Byrne, Michael, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 395 La Casa Via
 City Walnut Creek State CA Zip Code 94598-4842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-11
 Amount of Each Receipt this Period 208.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	577.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Carter, Michael, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7322 N Mohawk Rd
 City Fox Point State WI Zip Code 53217-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Cfo/Cro
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-363
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Carter, Michael, G, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7322 N Mohawk Rd
 City Fox Point State WI Zip Code 53217-3454
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Cfo/Cro
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-584
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Cruse, Tait, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Belclaire Dr
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-17
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Cruse, Tait, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2961 Belclaire Dr
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-17
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Cunningham, Brian, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Driver Ln
 City Littleton State CO Zip Code 80123-6663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-10
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Cunningham, Brian, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Driver Ln
 City Littleton State CO Zip Code 80123-6663
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-10
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Dodd, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7078 E Genesee St
 City Fayetteville State NY Zip Code 13066-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-14
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Dodd, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7078 E Genesee St
 City Fayetteville State NY Zip Code 13066-1123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-14
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Dugal, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Falcon Dr
 City Mandeville State LA Zip Code 70471-2952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-15
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 11 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Dugal, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Falcon Dr
 City Mandeville State LA Zip Code 70471-2952
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-15
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Erhard, Keith, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 Timberwood Ct
 City W Des Moines State IA Zip Code 50265-5447
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-5
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Ertz, John, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18235 Shaker Blvd
 City Shaker Hts State OH Zip Code 44120-1754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 15 / 2022
Transaction ID : 2022011519215-4
 Amount of Each Receipt this Period
 208.00
 Memo Item

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

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

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

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

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

A. Ertz, John, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18235 Shaker Blvd
 City Shaker Hts State OH Zip Code 44120-1754
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-4
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Fleisner, Corey, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4740 Waterstone Ct
 City Appleton State WI Zip Code 54914-8571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-53
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Franczyk, Lance, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 420 S Main St Apt 1003
 City Tulsa State OK Zip Code 74103-3911
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-28
 Amount of Each Receipt this Period
 125.00
 Memo Item

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

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

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

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

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

A. Frieling, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Homestead Rd
 City Wellesley State MA Zip Code 02482-6923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-3
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Frieling, Robert, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Homestead Rd
 City Wellesley State MA Zip Code 02482-6923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-3
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Gerend, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5421 N Idlewild Ave
 City Whitefish Bay State WI Zip Code 53217-5331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Distribution Offic
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-517
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

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

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

A. Gerend, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5421 N Idlewild Ave
 City Whitefish Bay State WI Zip Code 53217-5331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Distribution Offic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-411
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Goes, Thomas, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1526 Harston Ave
 City Orlando State FL Zip Code 32814-6700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-51
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Gokhale, Aditi, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 W Devon St
 City Milwaukee State WI Zip Code 53217-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Strategy Officer,
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-328
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

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

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

A. Gokhale, Aditi, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 122 W Devon St
 City Milwaukee State WI Zip Code 53217-4338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Strategy Officer,
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-577
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Goris, Tom, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4735 Wellington Dr
 City Long Grove State IL Zip Code 60047-5223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-12
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Goris, Tom, , , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4735 Wellington Dr
 City Long Grove State IL Zip Code 60047-5223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-12
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

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

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

A. Grabner, Todd, Matthew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2065 E Canyon Gate Rd
 City Park City State UT Zip Code 84098-4977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 2022011519215-67
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Grabner, Todd, Matthew, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2065 E Canyon Gate Rd
 City Park City State UT Zip Code 84098-4977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-67
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Grogan, John, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7860 N Club Cir
 City Fox Point State WI Zip Code 53217-2939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Insurance Officer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 20220113194510-395
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

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

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

A. Grogan, John, M, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7860 N Club Cir

City Fox Point	State WI	Zip Code 53217-2939
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NML	Occupation (for Individual) Evp & Chief Insurance Officer
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2022

Transaction ID : 2022013119458-316

Amount of Each Receipt this Period
208.00

Memo Item

B. Gross, Stephen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 Twin Springs Ln

City Saint Louis	State MO	Zip Code 63124-1139
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	15	/	2022

Transaction ID : 2022011519215-29

Amount of Each Receipt this Period
208.00

Memo Item

C. Gross, Stephen, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 Twin Springs Ln

City Saint Louis	State MO	Zip Code 63124-1139
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	31	/	2022

Transaction ID : 2022013119136-29

Amount of Each Receipt this Period
208.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Guinan, Stephen, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Horseshoe Ln
 City Paoli State PA Zip Code 19301-1909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-23
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Hempstead, Gerard, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 W Walling Dr
 City Creve Coeur State MO Zip Code 63141-7371
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-41
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Heurung, Mark, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3315 Graham Hill Rd
 City Orono State MN Zip Code 55356-5501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2022
Transaction ID : 2022011519215-22
 Amount of Each Receipt this Period
 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Heurung, Mark, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3315 Graham Hill Rd
 City Orono State MN Zip Code 55356-5501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-22
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Holleran, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47 Ketch Rd
 City Morristown State NJ Zip Code 07960-2660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-1
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Holter, Steve, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1626 Lake Shore Dr
 City Lake Geneva State WI Zip Code 53147-9706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-32
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

A. Holter, Steve, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1626 Lake Shore Dr
 City Lake Geneva State WI Zip Code 53147-9706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-32
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Iodice, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1930 Old Court Rd
 City Ruxton State MD Zip Code 21204-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2022
Transaction ID : 2022011519215-7
 Amount of Each Receipt this Period
 208.00
 Memo Item

C. Iodice, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1930 Old Court Rd
 City Ruxton State MD Zip Code 21204-1849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-7
 Amount of Each Receipt this Period
 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Joelson, Ronald, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Sand Spring Rd
 City Morristown State NJ Zip Code 07960-6758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & President Nmimc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-320
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Joelson, Ronald, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23 Sand Spring Rd
 City Morristown State NJ Zip Code 07960-6758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & President Nmimc
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-548
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Jones, Todd, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W252N4956 Aberdeen Dr
 City Pewaukee State WI Zip Code 53072-1351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Vice President And Controller
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 214.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-389
 Amount of Each Receipt this Period 107.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	523.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Kelley, Shawn, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7812 Remington Rd
 City Montgomery State OH Zip Code 45242-7130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-48
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Kiecker, David, Daniel, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11696 Approach Blvd
 City Fishers State IN Zip Code 46037-4146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-57
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Kiecker, David, Daniel, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11696 Approach Blvd
 City Fishers State IN Zip Code 46037-4146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-57
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Kramer, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 665 S Euclid Ave
 City Elmhurst State IL Zip Code 60126-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-50
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Kramer, Ryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 665 S Euclid Ave
 City Elmhurst State IL Zip Code 60126-4337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-50
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Lawhon, M, Kevin, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 Vanderbilt Beach Rd Ste 108
 City Naples State FL Zip Code 34109-2654
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-37
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lawhon, M, Kevin, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2022
Mailing Address 2430 Vanderbilt Beach Rd Ste 108		Transaction ID : 2022013119136-37
City Naples	State FL	Zip Code 34109-2654
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lueder, Matthew, James, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2022
Mailing Address 2000 W Green Brook Rd		Transaction ID : 2022013119136-55
City River Hills	State WI	Zip Code 53217-1530
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Lueken, Jeffrey, J, ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 01 / 31 / 2022
Mailing Address 1213 E Goodrich Ln		Transaction ID : 2022013119458-319
City Fox Point	State WI	Zip Code 53217-2946
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 168.00
Name of Employer (for Individual) NML	Occupation (for Individual) Vp & Chief Investment Officer	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 336.00	

SUBTOTAL of Receipts This Page (optional).....▶	501.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Mahaffey, Cory, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13764 Knaus Rd
 City Lake Oswego State OR Zip Code 97034-2175
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-47
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Manista, Raymond, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 W Seeboth St
 City Milwaukee State WI Zip Code 53204-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Legal/Compliance O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-565
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Manista, Raymond, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 W Seeboth St
 City Milwaukee State WI Zip Code 53204-4322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Legal/Compliance O
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-457
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. McQuade, Corey, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 S Berkley Ave

City Elmhurst	State IL	Zip Code 60126-3228
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 416.00

Date of Receipt
 01 / 15 / 2022
Transaction ID : 2022011519215-59

Amount of Each Receipt this Period
 208.00

Memo Item

B. McQuade, Corey, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 190 S Berkley Ave

City Elmhurst	State IL	Zip Code 60126-3228
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 416.00

Date of Receipt
 01 / 31 / 2022
Transaction ID : 2022013119136-59

Amount of Each Receipt this Period
 208.00

Memo Item

C. Meeks, Jim, Edward, , JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 264 Cloister Green Ln

City Memphis	State TN	Zip Code 38120-2357
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 01 / 31 / 2022
Transaction ID : 2022013119136-6

Amount of Each Receipt this Period
 125.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Miller, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Fenwick Rd
 City Winchester State MA Zip Code 01890-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-68
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Miller, Aaron, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16 Fenwick Rd
 City Winchester State MA Zip Code 01890-3815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-68
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Miller, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 Frew St Apt 1H
 City Pittsburgh State PA Zip Code 15213-3829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-21
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Miller, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5023 Frew St
 Apt 1H
 City Pittsburgh State PA Zip Code 15213-3829
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-21
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Mitchell, Christian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 E Carlisle Ave
 City Whitefish Bay State WI Zip Code 53217-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Customer Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-582
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Mitchell, Christian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 E Carlisle Ave
 City Whitefish Bay State WI Zip Code 53217-4832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Customer Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-470
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

A. Mulroy, Timothy, Michael, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Indian Pipe
 City Dove Canyon State CA Zip Code 92679-4206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-66
 Amount of Each Receipt this Period 125.00
 Memo Item

B. O Connell, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 W Woodmere Rd
 City Tampa State FL Zip Code 33609-3632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 2022011519215-65
 Amount of Each Receipt this Period 208.00
 Memo Item

C. O Connell, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4807 W Woodmere Rd
 City Tampa State FL Zip Code 33609-3632
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 416.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-65
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

A. Plocher, Matthew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4324 Chevy Chase Dr
 City La Canada State CA Zip Code 91011-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-31
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Plocher, Matthew, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4324 Chevy Chase Dr
 City La Canada State CA Zip Code 91011-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-31
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Pruett, Charles, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8530 Saundersville Rd
 City Mount Juliet State TN Zip Code 37122-5094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-33
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Pruet, Charles, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8530 Saundersville Rd
 City Mount Juliet State TN Zip Code 37122-5094
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-33
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Radke, Steven, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 N Prospect Ave
 City Milwaukee State WI Zip Code 53202-4000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Vp Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-513
 Amount of Each Receipt this Period 108.00
 Memo Item

C. Reeter, Jeff, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Williamsburg Ln
 City Houston State TX Zip Code 77024-5144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-49
 Amount of Each Receipt this Period 130.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	446.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Rhodes, Adam, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2038 Rosemont PI
 City Vestavia State AL Zip Code 35243-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 2022011519215-39
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Rhodes, Adam, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2038 Rosemont PI
 City Vestavia State AL Zip Code 35243-1767
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-39
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Richardson, Wesley, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Open Gate Whitaker Hill
 City Huntington State WV Zip Code 25701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-69
 Amount of Each Receipt this Period 125.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Rivers, J, Daniel, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 River Ridge Cv

City Prospect	State KY	Zip Code 40059-8038
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2022

Transaction ID : 2022011519215-9

Amount of Each Receipt this Period
208.00

Memo Item

B. Rivers, J, Daniel, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3601 River Ridge Cv

City Prospect	State KY	Zip Code 40059-8038
------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2022

Transaction ID : 2022013119136-9

Amount of Each Receipt this Period
208.00

Memo Item

C. Robertson, Don, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1046 E Thorne Ln

City Fox Point	State WI	Zip Code 53217-3646
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NML	Occupation (for Individual) Evp & Chief Hr Officer
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2022

Transaction ID : 20220113194510-314

Amount of Each Receipt this Period
208.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Robertson, Don, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1046 E Thorne Ln
 City Fox Point State WI Zip Code 53217-3646
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Evp & Chief Hr Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119458-524
 Amount of Each Receipt this Period
 208.00
 Memo Item

B. Ruhl, John, H, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Skyfield Dr
 City Princeton State NJ Zip Code 08540-7403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2022
Transaction ID : 2022013119136-56
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Russo, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 Deep Valley Rd
 City New Canaan State CT Zip Code 06840-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 15 / 2022
Transaction ID : 2022011519215-40
 Amount of Each Receipt this Period
 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Russo, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 Deep Valley Rd
 City New Canaan State CT Zip Code 06840-2804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-40
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Sample, Neal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 E Fairmount Ave
 City Whitefish Bay State WI Zip Code 53217-6056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Chief Information Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-287
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Sample, Neal, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1414 E Fairmount Ave
 City Whitefish Bay State WI Zip Code 53217-6056
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Chief Information Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-570
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Schlifske, John, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 Greenway Ter
 City Elm Grove State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Chairman President & Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-438
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Schlifske, John, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 Greenway Ter
 City Elm Grove State WI Zip Code 53122-1611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Chairman President & Ceo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-329
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Schneider, Sarah, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4380 N Wildwood Ave
 City Shorewood State WI Zip Code 53211-1436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Vp Distrib SRvcs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119458-402
 Amount of Each Receipt this Period 101.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	517.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Seiden, Adam, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 Hollow Tree Ridge Rd
 City Darien State CT Zip Code 06820-2420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 2022011519215-54
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Seiden, Adam, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 600 Hollow Tree Ridge Rd
 City Darien State CT Zip Code 06820-2420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 31 / 2022**
Transaction ID : 2022013119136-54
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Striano, Peter, F, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3433 NE 31st Ave
 City Lighthouse Point State FL Zip Code 33064-8541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00

Date of Receipt **01 / 15 / 2022**
Transaction ID : 2022011519215-35
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Striano, Peter, F, , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3433 NE 31st Ave

City Lighthouse Point	State FL	Zip Code 33064-8541
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2022

Transaction ID : 2022013119136-35

Amount of Each Receipt this Period
208.00

Memo Item

B. Theodore, Scott, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8066 Paradiso Ct

City Littleton	State CO	Zip Code 80125-1833
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2022

Transaction ID : 2022011519215-16

Amount of Each Receipt this Period
208.00

Memo Item

C. Theodore, Scott, P, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8066 Paradiso Ct

City Littleton	State CO	Zip Code 80125-1833
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) General Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2022

Transaction ID : 2022013119136-16

Amount of Each Receipt this Period
208.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 47
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Tronco, Alex, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Shaker Bay Rd
 City Latham State NY Zip Code 12110-1255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-46
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Tronco, Alex, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 Shaker Bay Rd
 City Latham State NY Zip Code 12110-1255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-46
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Tucker, Leo, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7915 Jones Branch Dr Apt 116
 City Mc Lean State VA Zip Code 22102-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-30
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 40 OF 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Tucker, Leo, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7915 Jones Branch Dr
 Apt 116
 City Mc Lean State VA Zip Code 22102-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-30
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Van Der Hyde, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 849 Sabot Hill Rd
 City Manakin Sabot State VA Zip Code 23103-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-8
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Van Der Hyde, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 849 Sabot Hill Rd
 City Manakin Sabot State VA Zip Code 23103-3009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-8
 Amount of Each Receipt this Period 208.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 47
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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

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

A. Worrell, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 Beretania Cir
 City Charlotte State NC Zip Code 28211-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 2022011519215-45
 Amount of Each Receipt this Period 208.00
 Memo Item

B. Worrell, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2423 Beretania Cir
 City Charlotte State NC Zip Code 28211-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 416.00

Date of Receipt 01 / 31 / 2022
Transaction ID : 2022013119136-45
 Amount of Each Receipt this Period 208.00
 Memo Item

C. Zale, Thomas, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2818 E Menlo Blvd
 City Shorewood State WI Zip Code 53211-2652
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NML Occupation (for Individual) Vp Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 402.00

Date of Receipt 01 / 15 / 2022
Transaction ID : 20220113194510-323
 Amount of Each Receipt this Period 201.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	617.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 42 OF 47
(check only one)

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

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Zale, Thomas, D, ,

Mailing Address 2818 E Menlo Blvd

City Shorewood	State WI	Zip Code 53211-2652
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NML	Occupation (for Individual) Vp Real Estate
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
402.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		31		2022

Transaction ID : 2022013119458-567

Amount of Each Receipt this Period
201.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	201.00
TOTAL This Period (last page this line number only).....▶	20774.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

Full Name (Last, First, Middle Initial)

A. Abraham Lincoln PAC

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 26 / 2022

Mailing Address 824 S Milledge Ave
Ste 101

City Athens State GA Zip Code 30605

FEC Identification Number

C	C00631051
Transaction ID : AFC5C04626.	
Amount of Each Disbursement this Period	
1000.00	

Purpose of Disbursement
2022 Contribution

011
Category/ Type

Candidate Name

Abraham Lincoln PAC

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) **Contribution**

Memo Item

Full Name (Last, First, Middle Initial)

B. Adrian Smith For Congress

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 26 / 2022

Mailing Address 1126 Avenue A
Ste 6

City Scottsbluff State NE Zip Code 69361-3563

FEC Identification Number

C	C00412890
Transaction ID : 452D9815116	
Amount of Each Disbursement this Period	
1000.00	

Purpose of Disbursement
2022 Primary

011
Category/ Type

Candidate Name

Smith, Adrian, Michael, ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

Memo Item

State: NE District: 03

Full Name (Last, First, Middle Initial)

C. Brian Higgins For Congress

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 26 / 2022

Mailing Address PO Box 28

City Buffalo State NY Zip Code 14220

FEC Identification Number

C	C00401034
Transaction ID : 179F3B7D49	
Amount of Each Disbursement this Period	
1000.00	

Purpose of Disbursement
2022 Primary

011
Category/ Type

Candidate Name

Higgins, Brian, M., ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) **Contribution**

Memo Item

State: NY District: 26

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

Full Name (Last, First, Middle Initial)

A. DCCC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	2

Mailing Address 430 S Capitol St SE
FI 2

City Washington State DC Zip Code 20003-4024

FEC Identification Number

C C00000935

Transaction ID : 73768AA2F5I

Amount of Each Disbursement this Period

15000.00

Memo Item

Purpose of Disbursement
2022 Contribution

011
Category/
Type

Candidate Name

DCCC

Office Sought: House Senate President

Disbursement For: 2022
 Primary General
 Other (specify) Contribution

State: District:

Full Name (Last, First, Middle Initial)

B. DSCC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	2

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

FEC Identification Number

C C00042366

Transaction ID : 16F47FEC73F

Amount of Each Disbursement this Period

15000.00

Memo Item

Purpose of Disbursement
2022 Contribution

011
Category/
Type

Candidate Name

DSCC

Office Sought: House Senate President

Disbursement For: 2022
 Primary General
 Other (specify) Contribution

State: District:

Full Name (Last, First, Middle Initial)

C. Giving Willingly Empowering Nationally (GWEN) PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	2	2

Mailing Address PO Box 33079

City Washington State DC Zip Code 20033

FEC Identification Number

C C00431478

Transaction ID : 51920DA370

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement
2022 Contribution

011
Category/
Type

Candidate Name

Giving Willingly Empowering Nationally (GWEN) PAC

Office Sought: House Senate President

Disbursement For: 2022
 Primary General
 Other (specify) Contribution

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

35000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

Full Name (Last, First, Middle Initial)

A. Judy Chu For Congress

Mailing Address 16633 Ventura Blvd
Ste 1008

City Encino State CA Zip Code 91436

Purpose of Disbursement
2022 Primary

011
Category/
Type

Candidate Name
Chu, Judy, May, ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 28

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2022

FEC Identification Number

C C00458125

Transaction ID : 92B63F54AC!
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LaHood for Congress

Mailing Address PO Box 10735

City Peoria State IL Zip Code 61612

Purpose of Disbursement
2022 General

011
Category/
Type

Candidate Name
LaHood, Darin, M., ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IL District: 16

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2022

FEC Identification Number

C C00575050

Transaction ID : 0969E19CD3E
Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 1st St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2022 Contribution

011
Category/
Type

Candidate Name
NRCC

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼ Contribution
State: District:

Date of Disbursement

MM / DD / YYYY
01 / 26 / 2022

FEC Identification Number

C C00075820

Transaction ID : 9C062EE370
Amount of Each Disbursement this Period

15000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

20000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

Full Name (Last, First, Middle Initial)

A. NRSC

Mailing Address 425 2nd St NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
2022 Contribution

011
Category/ Type

Candidate Name
NRSC

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2022

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input checked="" type="checkbox"/>	Other (specify) ▼		

Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2022

FEC Identification Number

C	C00027466
---	-----------

Transaction ID : E1A12C0A96

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

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

15000.00

73000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Co. Federal PAC (Northwestern Mutual Federal PAC)

Full Name (Last, First, Middle Initial)

A. ACLHIC PAC

Mailing Address 1201 K Street, Suite 1820

City
Sacramento

State
CA

Zip Code
95814-3918

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 26 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : 8B057F6E00I

Amount of Each Disbursement this Period

[REDACTED] 8100.00

Memo Item

Full Name (Last, First, Middle Initial)

B. LICONY PAC

Mailing Address 111 Washington Avenue, Suite 300

City
Albany

State
NY

Zip Code
12210

Purpose of Disbursement
Nonfederal Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 26 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : EF29612F35E

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[REDACTED]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

[REDACTED] 13100.00

[REDACTED] 13100.00