

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Northwestern Mutual Life Insurance Federal PAC

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

2. **FEC IDENTIFICATION NUMBER** 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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 11 25 2008 through 12 31 2008

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

Type or Print Name of Treasurer Loretta Mlekoday

Signature of Treasurer Electronically Filed by Loretta Mlekoday Date 01 26 2009

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Northwestern Mutual Life Insurance Federal PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		205438.77
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	169864.11									
(c) Total Receipts (from Line 19)	42466.94	298755.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	212331.05	504194.53								
7. Total Disbursements (from Line 31)	2035.82	293899.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	210295.23	210295.23								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Northwestern Mutual Life Insurance Federal PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	37435.29	214687.57
(i) Itemized (use Schedule A)		
(ii) Unitemized	5029.25	79032.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42464.54	293720.37
(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)	42464.54	293720.37
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2.40	35.39
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 Transfer (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))	42466.94	298755.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42466.94	298755.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	35.82	599.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	35.82	599.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2000.00	282300.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	11000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	2035.82	293899.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2035.82	293899.30

DETAILED SUMMARY PAGE
of Disbursements

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	42464.54	293720.37
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42464.54	293720.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	35.82	599.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	35.82	599.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
John M. Abbott

Mailing Address 609 Laurel Drive

City Thiensville State WI Zip Code 53092-1323

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

Name of Employer NML Occupation Dir Fld Invst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-529-16-0

Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
John M. Abbott

Mailing Address 609 Laurel Drive

City Thiensville State WI Zip Code 53092-1323

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

Name of Employer NML Occupation Dir Fld Invst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-529-10-0

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
John M. Abbott

Mailing Address 609 Laurel Drive

City Thiensville State WI Zip Code 53092-1323

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

Name of Employer NML Occupation Dir Fld Invst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-530-12-0

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 7 / 225
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Jerome R. Baier</p> <p>Mailing Address 19820 Tralee Court</p> <p>City State Zip Code Brookfield WI 53045-2129</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Managing Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1224.00</p>	<p>Date of Receipt MM / DD / YYYY 11 / 30 / 2008</p> <p>Transaction ID: 20081230-719-16-0</p> <p>Amount of Each Receipt this Period 51.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Jerome R. Baier</p> <p>Mailing Address 19820 Tralee Court</p> <p>City State Zip Code Brookfield WI 53045-2129</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Managing Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1224.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 15 / 2008</p> <p>Transaction ID: 20081231-719-10-0</p> <p>Amount of Each Receipt this Period 51.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Jerome R. Baier</p> <p>Mailing Address 19820 Tralee Court</p> <p>City State Zip Code Brookfield WI 53045-2129</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Managing Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1224.00</p>	<p>Date of Receipt MM / DD / YYYY 12 / 31 / 2008</p> <p>Transaction ID: 20090113-720-12-0</p> <p>Amount of Each Receipt this Period 51.00</p>
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SUBTOTAL of Receipts This Page (optional)	153.00
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 / 225
	<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	

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

A.	Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 8700 W Bennington Court		Transaction ID: 20081230-698-16-0
	City Mequon	State WI	Zip Code 53097-3440
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 660.00	

B.	Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 8700 W Bennington Court		Transaction ID: 20081231-698-10-0
	City Mequon	State WI	Zip Code 53097-3440
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 660.00	

C.	Full Name (Last, First, Middle Initial) David A. Barras		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 8700 W Bennington Court		Transaction ID: 20090113-699-12-0
	City Mequon	State WI	Zip Code 53097-3440
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
	Name of Employer NML	Occupation Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 660.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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 9 / 225						
	(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

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

A.	Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 4842 N Bartlett Avenue		Transaction ID: 20081230-841-16-0		
	City Whitefish Bay	State WI	Zip Code 53217-6016	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Pres & CEO Wmc			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00			

B.	Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 4842 N Bartlett Avenue		Transaction ID: 20081231-841-10-0		
	City Whitefish Bay	State WI	Zip Code 53217-6016	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Pres & CEO Wmc			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00			

C.	Full Name (Last, First, Middle Initial) Rebekah B. Barsch		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 4842 N Bartlett Avenue		Transaction ID: 20090113-842-12-0		
	City Whitefish Bay	State WI	Zip Code 53217-6016	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Pres & CEO Wmc			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00			

SUBTOTAL of Receipts This Page (optional)	▶	45.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 225
(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

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

A.

Full Name (Last, First, Middle Initial)
Gary H. Barsness

Mailing Address 1671 Deer Springs Circle

City Bettendorf State IA Zip Code 52722-7148

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1166-16-1

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Gary H. Barsness

Mailing Address 1671 Deer Springs Circle

City Bettendorf State IA Zip Code 52722-7148

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1166-10-1

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Gary H. Barsness

Mailing Address 1671 Deer Springs Circle

City Bettendorf State IA Zip Code 52722-7148

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 744.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1168-12-2

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **126.00**

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 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Douglas P. Bates

Mailing Address 5413 Mount Corcoran Place

City State Zip Code
Burke VA 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-571-16-0

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
Douglas P. Bates

Mailing Address 5413 Mount Corcoran Place

City State Zip Code
Burke VA 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-571-10-0

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Douglas P. Bates

Mailing Address 5413 Mount Corcoran Place

City State Zip Code
Burke VA 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-572-12-0

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **105.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Blaise C. Beaulier

Mailing Address 23300 Dover Line Road

City Waterford State WI Zip Code 53185-4908

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 11 / 30 / 2008
Transaction ID: 20081230-990-16-0
 Amount of Each Receipt this Period: 22.00

B. Full Name (Last, First, Middle Initial)
Blaise C. Beaulier

Mailing Address 23300 Dover Line Road

City Waterford State WI Zip Code 53185-4908

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 12 / 15 / 2008
Transaction ID: 20081231-990-10-0
 Amount of Each Receipt this Period: 22.00

C. Full Name (Last, First, Middle Initial)
Blaise C. Beaulier

Mailing Address 23300 Dover Line Road

City Waterford State WI Zip Code 53185-4908

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt: 12 / 31 / 2008
Transaction ID: 20090113-991-12-0
 Amount of Each Receipt this Period: 22.00

SUBTOTAL of Receipts This Page (optional) ► 66.00

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 13 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Mitchell C. Beer

Mailing Address 3387 Hampton Court

City State Zip Code
Thousand Oaks CA 91362-1130

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1206-16-1

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Mitchell C. Beer

Mailing Address 3387 Hampton Court

City State Zip Code
Thousand Oaks CA 91362-1130

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1205-10-1

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Mitchell C. Beer

Mailing Address 3387 Hampton Court

City State Zip Code
Thousand Oaks CA 91362-1130

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1207-12-2

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **126.00**

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 14 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
John P. Bender

Mailing Address 116 Belden Hill Road

City State Zip Code
Wilton CT 06897-2911

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1209-16-1

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
John P. Bender

Mailing Address 116 Belden Hill Road

City State Zip Code
Wilton CT 06897-2911

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1208-10-1

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
John P. Bender

Mailing Address 116 Belden Hill Road

City State Zip Code
Wilton CT 06897-2911

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1210-12-2

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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 15 / 225
(check only one)

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

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

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

A.

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

Mailing Address 4141 N Murray Avenue

City Shorewood State WI Zip Code 53211-2011

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-566-16-0

Amount of Each Receipt this Period 23.00

B.

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

Mailing Address 4141 N Murray Avenue

City Shorewood State WI Zip Code 53211-2011

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-566-10-0

Amount of Each Receipt this Period 23.00

C.

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

Mailing Address 4141 N Murray Avenue

City Shorewood State WI Zip Code 53211-2011

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-567-12-0

Amount of Each Receipt this Period 23.00

SUBTOTAL of Receipts This Page (optional) ▶ 69.00

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 16 / 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<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)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) Frederick W. Besette	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address N43 W33223 Glen Parc	Transaction ID: 20081231-527-10-0
	City State Zip Code Nashotah WI 53058	Amount of Each Receipt this Period 9.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Asst Gc & Asst Sec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 216.00	

B.	Full Name (Last, First, Middle Initial) Frederick W. Besette	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address N43 W33223 Glen Parc	Transaction ID: 20090113-528-12-0
	City State Zip Code Nashotah WI 53058	Amount of Each Receipt this Period 9.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Asst Gc & Asst Sec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 216.00	

C.	Full Name (Last, First, Middle Initial) Mark S. Bishop	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 1140 Burnet Street	Transaction ID: 20081230-1014-16-0
	City State Zip Code Brookfield WI 53005-6835	Amount of Each Receipt this Period 32.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Rvp Fld Supv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 552.00	

SUBTOTAL of Receipts This Page (optional)	50.00
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 17 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Mark S. Bishop

Mailing Address 1140 Burnet Street

City State Zip Code
Brookfield WI 53005-6835

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 552.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	8

Transaction ID: 20081231-1014-10-0

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)
Mark S. Bishop

Mailing Address 1140 Burnet Street

City State Zip Code
Brookfield WI 53005-6835

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 552.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 20090113-1015-12-0

Amount of Each Receipt this Period

32.00

C.

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

Mailing Address 3520 Dumbarton Drive

City State Zip Code
Atlanta GA 30327-2614

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 462.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	8

Transaction ID: 20081230-1202-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional) ▶

106.00

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 18 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Dwaan C. Black

Mailing Address 3520 Dumbarton Drive

City State Zip Code
Atlanta GA 30327-2614

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

Name of Employer Occupation
NML Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 462.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1201-10-1

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Dwaan C. Black

Mailing Address 3520 Dumbarton Drive

City State Zip Code
Atlanta GA 30327-2614

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

Name of Employer Occupation
NML Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 462.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1203-12-2

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Garrett J. Bleakley

Mailing Address 5460 Chelsea Avenue

City State Zip Code
La Jolla CA 92037-7607

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

Name of Employer Occupation
NML General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1180-16-1

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

109.00

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 19 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Garrett J. Bleakley

Mailing Address 5460 Chelsea Avenue

City State Zip Code
La Jolla CA 92037-7607

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

Name of Employer Occupation
NML General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1179-10-1

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Garrett J. Bleakley

Mailing Address 5460 Chelsea Avenue

City State Zip Code
La Jolla CA 92037-7607

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

Name of Employer Occupation
NML General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1181-12-2

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Debra Blevons Wascher

Mailing Address 165 S Pine Court

City State Zip Code
Appleton WI 54914-8222

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

Name of Employer Occupation
Debra Blevons Agy LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 504.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1231-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

92.00

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 20 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Debra Blevons Wascher		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 165 S Pine Court		Transaction ID: 20081231-1230-10-1
City Appleton	State WI	Zip Code 54914-8222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Debra Blevons Agy LLC	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

B.

Full Name (Last, First, Middle Initial) Debra Blevons Wascher		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 165 S Pine Court		Transaction ID: 20090113-1232-12-2
City Appleton	State WI	Zip Code 54914-8222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Debra Blevons Agy LLC	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

C.

Full Name (Last, First, Middle Initial) John D. Blumberg		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 105 Sherwood Hill Road		Transaction ID: 20081230-1234-16-1
City Brewster	State NY	Zip Code 10509-4919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2880.00	

SUBTOTAL of Receipts This Page (optional)	204.00
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 21 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) John D. Blumberg		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 105 Sherwood Hill Road		Transaction ID: 20081231-1233-10-1
City Brewster	State NY	Zip Code 10509-4919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2880.00	

B.

Full Name (Last, First, Middle Initial) John D. Blumberg		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 105 Sherwood Hill Road		Transaction ID: 20090113-1235-12-2
City Brewster	State NY	Zip Code 10509-4919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 120.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2880.00	

C.

Full Name (Last, First, Middle Initial) Timothy J. Bohannon		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 8677 Alvarado Court		Transaction ID: 20081230-1182-16-1
City Inver Grove	State MN	Zip Code 55077-3121
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00	

SUBTOTAL of Receipts This Page (optional)	▶	448.00
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 22 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Timothy J. Bohannon

Mailing Address 8677 Alvarado Court

City State Zip Code
Inver Grove MN 55077-3121

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1181-10-1

Amount of Each Receipt this Period
208.00

B. Full Name (Last, First, Middle Initial)
Timothy J. Bohannon

Mailing Address 8677 Alvarado Court

City State Zip Code
Inver Grove MN 55077-3121

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1183-12-2

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
David G. Bostick

Mailing Address 5808 Pine Valley Drive

City State Zip Code
Flower Mound TX 75022-6506

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1194-16-1

Amount of Each Receipt this Period
125.00

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: PAGE 23 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
David G. Bostick

Mailing Address 5808 Pine Valley Drive

City State Zip Code
Flower Mound TX 75022-6506

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1193-10-1

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
David G. Bostick

Mailing Address 5808 Pine Valley Drive

City State Zip Code
Flower Mound TX 75022-6506

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1195-12-2

Amount of Each Receipt this Period
125.00

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

Mailing Address 15375 Kata Drive

City State Zip Code
Elm Grove WI 53122-1028

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

Name of Employer NML Occupation VP Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-850-16-0

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► 268.00

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 24 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Sandra L. Botcher

Mailing Address 15375 Kata Drive

City State Zip Code
Elm Grove WI 53122-1028

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

Name of Employer NML Occupation VP Audit

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-850-10-0

Amount of Each Receipt this Period
18.00

B.

Full Name (Last, First, Middle Initial)

Sandra L. Botcher

Mailing Address 15375 Kata Drive

City State Zip Code
Elm Grove WI 53122-1028

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

Name of Employer NML Occupation VP Audit

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-851-12-0

Amount of Each Receipt this Period
18.00

C.

Full Name (Last, First, Middle Initial)

Mark C. Boyle

Mailing Address 720 E Wisconsin Avenue

City State Zip Code
Milwaukee WI 53202-4703

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-864-16-0

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶

61.00

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 25 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Mark C. Boyle

Mailing Address 720 E Wisconsin Avenue

City Milwaukee State WI Zip Code 53202-4703

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-864-10-0

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mark C. Boyle

Mailing Address 720 E Wisconsin Avenue

City Milwaukee State WI Zip Code 53202-4703

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-865-12-0

Amount of Each Receipt this Period 25.00

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

Mailing Address 12877 N Cobblestone

City Mequon State WI Zip Code 53097-1812

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-885-16-0

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ▶ 70.00

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 26 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Jennifer L. Brase
Mailing Address 12877 N Cobblestone

City State Zip Code
Mequon WI 53097-1812

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-885-10-0

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Jennifer L. Brase
Mailing Address 12877 N Cobblestone

City State Zip Code
Mequon WI 53097-1812

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-886-12-0

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Anne T. Brower
Mailing Address 2314 E Edgewood Avenue

City State Zip Code
Shorewood WI 53211-2939

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-555-16-0

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► 52.00

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 27 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Anne T. Brower		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 2314 E Edgewood Avenue		Transaction ID: 20081231-555-10-0
City Shorewood	State WI	Zip Code 53211-2939
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

B.

Full Name (Last, First, Middle Initial) Anne T. Brower		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 2314 E Edgewood Avenue		Transaction ID: 20090113-556-12-0
City Shorewood	State WI	Zip Code 53211-2939
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer NML	Occupation Asst Gc & Asst Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	

C.

Full Name (Last, First, Middle Initial) Pency P. Byhardt		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address W148 N10042 Windsong		Transaction ID: 20081230-1055-16-0
City Germantown	State WI	Zip Code 53022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.00
Name of Employer NML	Occupation VP Field Dev	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

SUBTOTAL of Receipts This Page (optional)	▶	36.00
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 28 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Pency P. Byhardt

Mailing Address W148 N10042 Windsong

City State Zip Code
Germantown WI 53022

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

Name of Employer Occupation
NML VP Field Dev

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1055-10-0

Amount of Each Receipt this Period

12.00

B.

Full Name (Last, First, Middle Initial)
Pency P. Byhardt

Mailing Address W148 N10042 Windsong

City State Zip Code
Germantown WI 53022

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

Name of Employer Occupation
NML VP Field Dev

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1056-12-0

Amount of Each Receipt this Period

12.00

C.

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

Mailing Address 395 La Casa Viaduct

City State Zip Code
Walnut Creek CA 94598-4842

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

Name of Employer Occupation
NML Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 738.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1200-16-1

Amount of Each Receipt this Period

82.00

SUBTOTAL of Receipts This Page (optional)

106.00

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 29 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

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

Mailing Address 395 La Casa Viaduct

City State Zip Code
Walnut Creek CA 94598-4842

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 738.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1199-10-1

Amount of Each Receipt this Period
82.00

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

Mailing Address 395 La Casa Viaduct

City State Zip Code
Walnut Creek CA 94598-4842

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 738.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1201-12-2

Amount of Each Receipt this Period
82.00

C. Full Name (Last, First, Middle Initial)
Ben S. Caputo

Mailing Address 1530 E Fleming Drive

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer NML Occupation Regional Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-757-16-0

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **189.00**

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 30 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Ben S. Caputo

Mailing Address 1530 E Fleming Drive

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer NML Occupation Regional Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-757-10-0

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

Ben S. Caputo

Mailing Address 1530 E Fleming Drive

City State Zip Code
Arlington Heights IL 60004

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

Name of Employer NML Occupation Regional Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-758-12-0

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Michael G. Carter

Mailing Address 7322 N Mohawk Road

City State Zip Code
Fox Point WI 53217-3454

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

Name of Employer NML Occupation VP & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-994-16-0

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ►

125.00

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 31 / 225

(check only one)

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

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

A.

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

Mailing Address 7322 N Mohawk Road

City State Zip Code
Fox Point WI 53217-3454

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

Name of Employer NML Occupation VP & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-994-10-0

Amount of Each Receipt this Period

75.00

B.

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

Mailing Address 7322 N Mohawk Road

City State Zip Code
Fox Point WI 53217-3454

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

Name of Employer NML Occupation VP & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-995-12-0

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Gregory V. Castronovo

Mailing Address 317 Evening Star Lane

City State Zip Code
Bozeman MT 59715-7738

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1216-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional) ▶

192.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 225
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Gregory V. Castronovo		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 317 Evening Star Lane		Transaction ID: 20081231-1215-10-1		
	City Bozeman	State MT	Zip Code 59715-7738	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Special Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00			

B.	Full Name (Last, First, Middle Initial) Gregory V. Castronovo		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 317 Evening Star Lane		Transaction ID: 20090113-1217-12-2		
	City Bozeman	State MT	Zip Code 59715-7738	Amount of Each Receipt this Period 42.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Special Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00			

C.	Full Name (Last, First, Middle Initial) Scott G. Christensen		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 12 High Meadow Lane		Transaction ID: 20081230-1215-16-1		
	City Amherst	State NH	Zip Code 03031-2554	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Christensen Fcl Gp LLC	Occupation Special Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2750.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Scott G. Christensen

Mailing Address 12 High Meadow Lane

City State Zip Code
Amherst NH 03031-2554

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

Name of Employer Occupation
Christensen Fcl Gp LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1214-10-1

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
Scott G. Christensen

Mailing Address 12 High Meadow Lane

City State Zip Code
Amherst NH 03031-2554

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

Name of Employer Occupation
Christensen Fcl Gp LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2750.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1216-12-2

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Eric P. Christophersen

Mailing Address N55 W21701 Adamdale

City State Zip Code
Menomonee Fal WI 53051

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

Name of Employer Occupation
NML VP Compliance/Bp

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-720-16-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

280.00

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 34 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Eric P. Christophersen

Mailing Address N55 W21701 Adamdale

City State Zip Code
Menomonee Fal WI 53051

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

Name of Employer NML Occupation VP Compliance/Bp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-720-10-0

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
Eric P. Christophersen

Mailing Address N55 W21701 Adamdale

City State Zip Code
Menomonee Fal WI 53051

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

Name of Employer NML Occupation VP Compliance/Bp

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-721-12-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
David D. Clark

Mailing Address 1680 Barrington Wood

City State Zip Code
Brookfield WI 53045-2213

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

Name of Employer NML Occupation Svp Real Estate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2928.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-692-16-0

Amount of Each Receipt this Period

161.00

SUBTOTAL of Receipts This Page (optional)

221.00

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 35 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
David D. Clark
 Mailing Address 1680 Barrington Wood
 City State Zip Code
 Brookfield WI 53045-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2928.00
 Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-692-10-0
 Amount of Each Receipt this Period 161.00

B. Full Name (Last, First, Middle Initial)
David D. Clark
 Mailing Address 1680 Barrington Wood
 City State Zip Code
 Brookfield WI 53045-2213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Svp Real Estate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2928.00
 Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-693-12-0
 Amount of Each Receipt this Period 161.00

C. Full Name (Last, First, Middle Initial)
Richard M. Condrey
 Mailing Address 907 Williamson Drive
 City State Zip Code
 Raleigh NC 27608-2307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carolina Condrey Grp Occupation Special Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2496.00
 Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1176-16-1
 Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 530.00
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 36 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Richard M. Condrey
Mailing Address 907 Williamson Drive
City Raleigh State NC Zip Code 27608-2307
FEC ID number of contributing federal political committee. **C**
Name of Employer Carolina Condrey Grp Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2496.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1175-10-1
Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
Richard M. Condrey
Mailing Address 907 Williamson Drive
City Raleigh State NC Zip Code 27608-2307
FEC ID number of contributing federal political committee. **C**
Name of Employer Carolina Condrey Grp Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2496.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1177-12-2
Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Barbara E. Courtney
Mailing Address 4600 N Wilshire Road
City Whitefish Bay State WI Zip Code 53211-1260
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Mut Fund Acctg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-721-16-0
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 426.00
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 37 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)

Barbara E. Courtney

Mailing Address 4600 N Wilshire Road

City State Zip Code
Whitefish Bay WI 53211-1260

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

Name of Employer NML Occupation Dir Mut Fund Acctg

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-721-10-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Barbara E. Courtney

Mailing Address 4600 N Wilshire Road

City State Zip Code
Whitefish Bay WI 53211-1260

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

Name of Employer NML Occupation Dir Mut Fund Acctg

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-722-12-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)

Margaret M. Crawford

Mailing Address 1008 E Lyon Street

City State Zip Code
Milwaukee WI 53202-2126

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

Name of Employer NML Occupation Dir Org Dev

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-731-16-0

Amount of Each Receipt this Period

13.00

SUBTOTAL of Receipts This Page (optional)

33.00

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 38 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Margaret M. Crawford

Mailing Address 1008 E Lyon Street

City	State	Zip Code
Milwaukee	WI	53202-2126

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

Name of Employer NML	Occupation Dir Org Dev
-------------------------	---------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-731-10-0

Amount of Each Receipt this Period
13.00

B.

Full Name (Last, First, Middle Initial)
Margaret M. Crawford

Mailing Address 1008 E Lyon Street

City	State	Zip Code
Milwaukee	WI	53202-2126

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

Name of Employer NML	Occupation Dir Org Dev
-------------------------	---------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-732-12-0

Amount of Each Receipt this Period
13.00

C.

Full Name (Last, First, Middle Initial)
C. T. Cruse

Mailing Address 2961 Belclaire Drive

City	State	Zip Code
Frisco	TX	75034-5969

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

Name of Employer Cruse FncI Group Inc	Occupation Special Agent
--	-----------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2996.04
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1205-16-1

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ▶

234.00

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 39 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
C. T. Cruse
 Mailing Address 2961 Belclaire Drive
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cruse Fncl Group Inc Occupation Special Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2996.04
 Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1204-10-1
 Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
C. T. Cruse
 Mailing Address 2961 Belclaire Drive
 City Frisco State TX Zip Code 75034-5969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cruse Fncl Group Inc Occupation Special Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2996.04
 Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1206-12-2
 Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Brian R. Cunningham
 Mailing Address 6251 S Billings Way
 City Centennial State CO Zip Code 80111-6009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00
 Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1199-16-1
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 466.00
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 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Brian R. Cunningham
Mailing Address 6251 S Billings Way
City Centennial State CO Zip Code 80111-6009
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1198-10-1
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Brian R. Cunningham
Mailing Address 6251 S Billings Way
City Centennial State CO Zip Code 80111-6009
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1200-12-2
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Gloster B. Current
Mailing Address 9521 North Lake Drive
City Bayside State WI Zip Code 53217-1452
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Corp Affairs & Asst To CEO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1128.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-545-16-0
Amount of Each Receipt this Period 64.00

SUBTOTAL of Receipts This Page (optional) ► 164.00
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 41 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Gloster B. Current

Mailing Address 9521 North Lake Drive

City Bayside State WI Zip Code 53217-1452

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

Name of Employer NML Occupation VP Corp Affairs & Asst To CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1128.00

Date of Receipt: 12 / 15 / 2008
Transaction ID: 20081231-545-10-0
 Amount of Each Receipt this Period: 64.00

B. Full Name (Last, First, Middle Initial)
Gloster B. Current

Mailing Address 9521 North Lake Drive

City Bayside State WI Zip Code 53217-1452

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

Name of Employer NML Occupation VP Corp Affairs & Asst To CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1128.00

Date of Receipt: 12 / 31 / 2008
Transaction ID: 20090113-546-12-0
 Amount of Each Receipt this Period: 64.00

C. Full Name (Last, First, Middle Initial)
Jefferson V. De Angelis

Mailing Address 4449 Donges Bay Road

City Mequon State WI Zip Code 53092-4883

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

Name of Employer NML Occupation VP Public Fixed Inc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 11 / 30 / 2008
Transaction ID: 20081230-592-16-0
 Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 148.00

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 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Jefferson V. De Angelis

Mailing Address 4449 Donges Bay Road

City State Zip Code
Mequon WI 53092-4883

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

Name of Employer NML Occupation VP Public Fixed Inc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-592-10-0

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Jefferson V. De Angelis

Mailing Address 4449 Donges Bay Road

City State Zip Code
Mequon WI 53092-4883

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

Name of Employer NML Occupation VP Public Fixed Inc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-593-12-0

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Lew D. Derrickson

Mailing Address 5799 Sunset Lane

City State Zip Code
Indianapolis IN 46228-1447

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

Name of Employer Derrickson Fncl Grp Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1173-16-1

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► 248.00

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 43 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Lew D. Derrickson

Mailing Address 5799 Sunset Lane

City State Zip Code
Indianapolis IN 46228-1447

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

Name of Employer Occupation
Derrickson Fncl Grp Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1173-10-1

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Lew D. Derrickson

Mailing Address 5799 Sunset Lane

City State Zip Code
Indianapolis IN 46228-1447

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

Name of Employer Occupation
Derrickson Fncl Grp Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1175-12-2

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Blane Dexheimer

Mailing Address 350 Sheffield Drive

City State Zip Code
Brookfield WI 53005-7926

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

Name of Employer Occupation
NML Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-570-16-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

426.00

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 44 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Blane Dexheimer

Mailing Address 350 Sheffield Drive

City State Zip Code
Brookfield WI 53005-7926

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-570-10-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Blane Dexheimer

Mailing Address 350 Sheffield Drive

City State Zip Code
Brookfield WI 53005-7926

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-571-12-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
James S. Dobbs

Mailing Address RR 1 Box 51B

City State Zip Code
Ripley WV 25271-9705

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1168-16-1

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 225
	<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)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) James S. Dobbs	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address RR 1 Box 51B	Transaction ID: 20081231-1168-10-1
	City Ripley State WV Zip Code 25271-9705	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) James S. Dobbs	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address RR 1 Box 51B	Transaction ID: 20090113-1170-12-2
	City Ripley State WV Zip Code 25271-9705	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Mark G. Doll	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 8420 N Pelican Lane	Transaction ID: 20081230-863-16-0
	City River Hills State WI Zip Code 53217-2058	Amount of Each Receipt this Period 208.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Svp & CIO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3996.00	

SUBTOTAL of Receipts This Page (optional)	258.00
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 46 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mark G. Doll

Mailing Address 8420 N Pelican Lane

City State Zip Code
River Hills WI 53217-2058

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

Name of Employer NML Occupation Svp & CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3996.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-863-10-0

Amount of Each Receipt this Period
208.00

B. Full Name (Last, First, Middle Initial)
Mark G. Doll

Mailing Address 8420 N Pelican Lane

City State Zip Code
River Hills WI 53217-2058

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

Name of Employer NML Occupation Svp & CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3996.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-864-12-0

Amount of Each Receipt this Period
208.00

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

Mailing Address 9 Falcon Drive

City State Zip Code
Mandeville LA 70471-2952

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2004.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1203-16-1

Amount of Each Receipt this Period
125.00

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: PAGE 47 / 225
(check only one)

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

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

A.

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

Mailing Address 9 Falcon Drive

City State Zip Code
Mandeville LA 70471-2952

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

Name of Employer NML Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2004.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1202-10-1

Amount of Each Receipt this Period
125.00

B.

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

Mailing Address 9 Falcon Drive

City State Zip Code
Mandeville LA 70471-2952

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

Name of Employer NML Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2004.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1204-12-2

Amount of Each Receipt this Period
125.00

C.

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

Mailing Address N71W31034 Lower Club

City State Zip Code
Hartland WI 53029-8716

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

Name of Employer NML Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-649-16-0

Amount of Each Receipt this Period
37.00

SUBTOTAL of Receipts This Page (optional) ► **287.00**

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 48 / 225

(check only one)

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

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

A.

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

Mailing Address N71W31034 Lower Club

City State Zip Code
Hartland WI 53029-8716

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
12 / 15 / 2008

Transaction ID: 20081231-649-10-0

Amount of Each Receipt this Period 37.00

B.

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

Mailing Address N71W31034 Lower Club

City State Zip Code
Hartland WI 53029-8716

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: 20090113-650-12-0

Amount of Each Receipt this Period 37.00

C.

Full Name (Last, First, Middle Initial)
James R. Effner

Mailing Address 2520 Hanford Lane

City State Zip Code
Aurora IL 60502-6969

FEC ID number of contributing federal political committee. C

Name of Employer Effner Fncl Grp Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3600.00

Date of Receipt M M / D D / Y Y Y Y
11 / 30 / 2008

Transaction ID: 20081230-1207-16-1

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) 224.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 49 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
James R. Effner
Mailing Address 2520 Hanford Lane
City Aurora State IL Zip Code 60502-6969
FEC ID number of contributing federal political committee. **C**
Name of Employer Effner Fncl Grp Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3600.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1206-10-1
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
James R. Effner
Mailing Address 2520 Hanford Lane
City Aurora State IL Zip Code 60502-6969
FEC ID number of contributing federal political committee. **C**
Name of Employer Effner Fncl Grp Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3600.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1208-12-2
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Eric J. Ekeroth
Mailing Address 19672 Stanford Hall
City Ashburn State VA Zip Code 20147-5223
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director Field Prod
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-613-16-0
Amount of Each Receipt this Period 10.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 225
	<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)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) Eric J. Ekeroth	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 19672 Stanford Hall	Transaction ID: 20081231-613-10-0
	City State Zip Code Ashburn VA 20147-5223	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Director Field Prod Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) Eric J. Ekeroth	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 19672 Stanford Hall	Transaction ID: 20090113-614-12-0
	City State Zip Code Ashburn VA 20147-5223	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Director Field Prod Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Ralph David Ells	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 9927 N Valley Hill D	Transaction ID: 20081230-909-16-0
	City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 36.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 864.00	

SUBTOTAL of Receipts This Page (optional)	56.00
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 51 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Ralph David Ells
Mailing Address 9927 N Valley Hill D
City Meguon State WI Zip Code 53092
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 864.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-909-10-0
Amount of Each Receipt this Period 36.00

B. Full Name (Last, First, Middle Initial)
Ralph David Ells
Mailing Address 9927 N Valley Hill D
City Meguon State WI Zip Code 53092
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 864.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-910-12-0
Amount of Each Receipt this Period 36.00

C. Full Name (Last, First, Middle Initial)
Keith A. Erhard
Mailing Address 4807 Timberwood Court
City West Des Moines State IA Zip Code 50265-5447
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1192-16-1
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 114.00
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 52 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Keith A. Erhard
Mailing Address 4807 Timberwood Court
City State Zip Code
West Des Moines IA 50265-5447
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8
Transaction ID: 20081231-1191-10-1
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Keith A. Erhard
Mailing Address 4807 Timberwood Court
City State Zip Code
West Des Moines IA 50265-5447
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8
Transaction ID: 20090113-1193-12-2
Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
John C. Ertz
Mailing Address 127 Underhill Rd
City State Zip Code
Mill Valley CA 94941-1461
FEC ID number of contributing federal political committee. **C**
Name of Employer JCE Financial Group Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1344.00
Date of Receipt M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8
Transaction ID: 20081230-1191-16-1
Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional) ► 154.00
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 53 / 225
(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

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

A.

Full Name (Last, First, Middle Initial) John C. Ertz		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 127 Underhill Rd		Transaction ID: 20081231-1190-10-1
City Mill Valley	State CA	Zip Code 94941-1461
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer JCE Financial Group	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	

B.

Full Name (Last, First, Middle Initial) John C. Ertz		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 127 Underhill Rd		Transaction ID: 20090113-1192-12-2
City Mill Valley	State CA	Zip Code 94941-1461
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer JCE Financial Group	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00	

C.

Full Name (Last, First, Middle Initial) Christina H. Fiasca		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 9230 N Fairway Drive		Transaction ID: 20081230-940-16-0
City Bayside	State WI	Zip Code 53217-1317
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NML	Occupation Svp Agency Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1944.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Christina H. Fiasca

Mailing Address 9230 N Fairway Drive

City Bayside State WI Zip Code 53217-1317

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

Name of Employer NML Occupation Svp Agency Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1944.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-940-10-0

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Christina H. Fiasca

Mailing Address 9230 N Fairway Drive

City Bayside State WI Zip Code 53217-1317

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

Name of Employer NML Occupation Svp Agency Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1944.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-941-12-0

Amount of Each Receipt this Period 100.00

C.

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

Mailing Address 1638 Del Dayo Drive

City Carmichael State CA Zip Code 95608-6052

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1197-16-1

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 408.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 225
	<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)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) John E. Fobes	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 1638 Del Dayo Drive	Transaction ID: 20081231-1196-10-1
	City State Zip Code Carmichael CA 95608-6052	Amount of Each Receipt this Period 208.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

B.	Full Name (Last, First, Middle Initial) John E. Fobes	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 1638 Del Dayo Drive	Transaction ID: 20090113-1198-12-2
	City State Zip Code Carmichael CA 95608-6052	Amount of Each Receipt this Period 208.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

C.	Full Name (Last, First, Middle Initial) Donald Forecki	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 208 Laurel Lane	Transaction ID: 20081230-800-16-0
	City State Zip Code South Milwauk WI 53172-1071	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NML	Occupation Dir Inv Ops	
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)	431.00
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 56 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Donald Forecki
Mailing Address 208 Laurel Lane
City South Milwauk State WI Zip Code 53172-1071
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Inv Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-800-10-0
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Donald Forecki
Mailing Address 208 Laurel Lane
City South Milwauk State WI Zip Code 53172-1071
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Inv Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-801-12-0
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Lee M. Fortenberry
Mailing Address 115 Hillside Road
City Mechanicsburg State PA Zip Code 17050-1728
FEC ID number of contributing federal political committee. **C**
Name of Employer NM Harrisburg Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 924.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1217-16-1
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ▶ 72.00
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 57 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Lee M. Fortenberry		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 115 Hillside Road		Transaction ID: 20081231-1216-10-1
City Mechanicsburg	State PA	Zip Code 17050-1728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NM Harrisburg Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00	

B.

Full Name (Last, First, Middle Initial) Lee M. Fortenberry		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 115 Hillside Road		Transaction ID: 20090113-1218-12-2
City Mechanicsburg	State PA	Zip Code 17050-1728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NM Harrisburg Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 924.00	

C.

Full Name (Last, First, Middle Initial) Phillip B. Franczyk		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 11616 S Hudson		Transaction ID: 20081230-1230-16-1
City Tulsa	State OK	Zip Code 74137
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.00	

SUBTOTAL of Receipts This Page (optional)	126.00
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 58 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Phillip B. Franczyk

Mailing Address 11616 S Hudson

City State Zip Code
Tulsa OK 74137

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1229-10-1

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Phillip B. Franczyk

Mailing Address 11616 S Hudson

City State Zip Code
Tulsa OK 74137

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1231-12-2

Amount of Each Receipt this Period
42.00

C. Full Name (Last, First, Middle Initial)
Robert T. Frieling

Mailing Address 5 Gennaro Circle

City State Zip Code
Wayland MA 01778-4436

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1190-16-1

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 209.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Robert T. Frieling

Mailing Address 5 Gennaro Circle

City State Zip Code
Wayland MA 01778-4436

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2675.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1189-10-1

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Robert T. Frieling

Mailing Address 5 Gennaro Circle

City State Zip Code
Wayland MA 01778-4436

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2675.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1191-12-2

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
John M. Fuhrmann

Mailing Address 13925 W Sun Valley D

City State Zip Code
New Berlin WI 53151

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

Name of Employer NML Occupation Mgr Info Sys

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-962-12-0

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional) ► 259.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 225
	<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	

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

A.	Full Name (Last, First, Middle Initial) Sheila M. Gavin	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 5735 N Crestwood Blv	Transaction ID: 20081230-1061-16-0
	City State Zip Code Glendale WI 53209-4309	Amount of Each Receipt this Period 17.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Asst Gc & Asst Sec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00	

B.	Full Name (Last, First, Middle Initial) Sheila M. Gavin	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 5735 N Crestwood Blv	Transaction ID: 20081231-1061-10-0
	City State Zip Code Glendale WI 53209-4309	Amount of Each Receipt this Period 17.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Asst Gc & Asst Sec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.00	

C.	Full Name (Last, First, Middle Initial) Sheila M. Gavin	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 5735 N Crestwood Blv	Transaction ID: 20090113-1062-12-0
	City State Zip Code Glendale WI 53209-4309	Amount of Each Receipt this Period 17.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Asst Gc & Asst Sec 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)	51.00
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 61 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Timothy J. Gerend

Mailing Address 5421 N Idlewild Avenue

City State Zip Code
Whitefish Bay WI 53217-5331

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

Name of Employer NML Occupation VP Field Comp & Plg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-641-16-0

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Timothy J. Gerend

Mailing Address 5421 N Idlewild Avenue

City State Zip Code
Whitefish Bay WI 53217-5331

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

Name of Employer NML Occupation VP Field Comp & Plg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-641-10-0

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Timothy J. Gerend

Mailing Address 5421 N Idlewild Avenue

City State Zip Code
Whitefish Bay WI 53217-5331

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

Name of Employer NML Occupation VP Field Comp & Plg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-642-12-0

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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 62 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Walter M. Givler

Mailing Address 13040 Hawthorne Lane

City State Zip Code
New Berlin WI 53151-8742

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

Name of Employer NML Occupation VP Acctg Policy

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-636-16-0

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Walter M. Givler

Mailing Address 13040 Hawthorne Lane

City State Zip Code
New Berlin WI 53151-8742

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

Name of Employer NML Occupation VP Acctg Policy

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-636-10-0

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Walter M. Givler

Mailing Address 13040 Hawthorne Lane

City State Zip Code
New Berlin WI 53151-8742

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

Name of Employer NML Occupation VP Acctg Policy

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-637-12-0

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)

45.00

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 63 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert P. Glazier

Mailing Address W299 S8578 Highway 83

City Mukwonago State WI Zip Code 53149

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

Name of Employer NML Occupation Dir Act Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-525-16-0

Amount of Each Receipt this Period 10.00

B.

Full Name (Last, First, Middle Initial)
Robert P. Glazier

Mailing Address W299 S8578 Highway 83

City Mukwonago State WI Zip Code 53149

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

Name of Employer NML Occupation Dir Act Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-525-10-0

Amount of Each Receipt this Period 10.00

C.

Full Name (Last, First, Middle Initial)
Robert P. Glazier

Mailing Address W299 S8578 Highway 83

City Mukwonago State WI Zip Code 53149

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

Name of Employer NML Occupation Dir Act Sys

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-526-12-0

Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 225
	<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	

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

A.	Full Name (Last, First, Middle Initial) Mitchell B. Glover		Date of Receipt
	Mailing Address 6700 Old Darby Trail Northeast		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Ada	MI	49301-8360
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081230-1188-16-1
Name of Employer Western MI Group LLC		Occupation Special Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00	42.00

B.	Full Name (Last, First, Middle Initial) Mitchell B. Glover		Date of Receipt
	Mailing Address 6700 Old Darby Trail Northeast		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Ada	MI	49301-8360
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081231-1187-10-1
Name of Employer Western MI Group LLC		Occupation Special Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00	42.00

C.	Full Name (Last, First, Middle Initial) Mitchell B. Glover		Date of Receipt
	Mailing Address 6700 Old Darby Trail Northeast		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Ada	MI	49301-8360
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090113-1189-12-2
Name of Employer Western MI Group LLC		Occupation Special Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00	42.00

SUBTOTAL of Receipts This Page (optional)	126.00
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 65 / 225

(check only one)

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

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

A.

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

Mailing Address 2485 W Fairy Chasm R

City State Zip Code
River Hills WI 53217

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

Name of Employer NML Occupation VP Comm

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 696.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-585-16-0

Amount of Each Receipt this Period

58.00

B.

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

Mailing Address 2485 W Fairy Chasm R

City State Zip Code
River Hills WI 53217

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

Name of Employer NML Occupation VP Comm

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 696.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-585-10-0

Amount of Each Receipt this Period

58.00

C.

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

Mailing Address 2485 W Fairy Chasm R

City State Zip Code
River Hills WI 53217

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

Name of Employer NML Occupation VP Comm

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 696.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-586-12-0

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)

174.00

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 66 / 225
(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

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

A.

Full Name (Last, First, Middle Initial)
Patrick K. Gores

Mailing Address 2702 28th Avenue Southwest

City State Zip Code
Fargo ND 58103-5045

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1179-16-1

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Patrick K. Gores

Mailing Address 2702 28th Avenue Southwest

City State Zip Code
Fargo ND 58103-5045

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1178-10-1

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Patrick K. Gores

Mailing Address 2702 28th Avenue Southwest

City State Zip Code
Fargo ND 58103-5045

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1180-12-2

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 126.00

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 67 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Tom Goris

Mailing Address 8042 Cheverny Drive

City State Zip Code
Mequon WI 53097-2532

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

Name of Employer Occupation
Goris Fncl Grp Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1201-16-1

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
Tom Goris

Mailing Address 8042 Cheverny Drive

City State Zip Code
Mequon WI 53097-2532

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

Name of Employer Occupation
Goris Fncl Grp Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1200-10-1

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Tom Goris

Mailing Address 8042 Cheverny Drive

City State Zip Code
Mequon WI 53097-2532

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

Name of Employer Occupation
Goris Fncl Grp Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1202-12-2

Amount of Each Receipt this Period

125.00

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: PAGE 68 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Karl G. Gouverneur

Mailing Address 12895 N Cobblestone

City State Zip Code
Mequon WI 53097-1812

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

Name of Employer NML Occupation
VP & Chief Tech Architect

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1124-10-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Karl G. Gouverneur

Mailing Address 12895 N Cobblestone

City State Zip Code
Mequon WI 53097-1812

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

Name of Employer NML Occupation
VP & Chief Tech Architect

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1126-12-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Paul A. Gregory

Mailing Address 3595 Candlewood Trail

City State Zip Code
Marietta GA 30066-4574

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

Name of Employer NML Occupation
Director-Field Production

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1112-16-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

50.00

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 69 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Paul A. Gregory

Mailing Address 3595 Candlewood Trail

City State Zip Code
Marietta GA 30066-4574

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

Name of Employer NML Occupation Director-Field Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1112-10-0

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Paul A. Gregory

Mailing Address 3595 Candlewood Trail

City State Zip Code
Marietta GA 30066-4574

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

Name of Employer NML Occupation Director-Field Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1114-12-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
John M. Grogan

Mailing Address 706 W Acacia Road

City State Zip Code
Glendale WI 53217-4008

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1476.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1036-16-0

Amount of Each Receipt this Period
88.00

SUBTOTAL of Receipts This Page (optional) ► **108.00**

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 70 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
John M. Grogan

Mailing Address 706 W Acacia Road

City State Zip Code
Glendale WI 53217-4008

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1476.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1036-10-0

Amount of Each Receipt this Period

88.00

B.

Full Name (Last, First, Middle Initial)
John M. Grogan

Mailing Address 706 W Acacia Road

City State Zip Code
Glendale WI 53217-4008

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1476.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1037-12-0

Amount of Each Receipt this Period

88.00

C.

Full Name (Last, First, Middle Initial)
Jon P. Gruenstern

Mailing Address 2155 Hickory Court

City State Zip Code
Oshkosh WI 54901-2581

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1167-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional) ▶

218.00

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 71 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Jon P. Gruenstern

Mailing Address 2155 Hickory Court

City Oshkosh State WI Zip Code 54901-2581

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 15 / 2008
Transaction ID: 20081231-1167-10-1
 Amount of Each Receipt this Period: 42.00

B. Full Name (Last, First, Middle Initial)
Jon P. Gruenstern

Mailing Address 2155 Hickory Court

City Oshkosh State WI Zip Code 54901-2581

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt: 12 / 31 / 2008
Transaction ID: 20090113-1169-12-2
 Amount of Each Receipt this Period: 42.00

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

Mailing Address W73 N377 Mulberry Avenue

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation VP-New Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 864.00

Date of Receipt: 11 / 30 / 2008
Transaction ID: 20081230-662-16-0
 Amount of Each Receipt this Period: 57.00

SUBTOTAL of Receipts This Page (optional) ► 141.00

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 72 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

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

Mailing Address W73 N377 Mulberry Avenue

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation VP-New Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 864.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-662-10-0

Amount of Each Receipt this Period 57.00

B.

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

Mailing Address W73 N377 Mulberry Avenue

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation VP-New Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 864.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-663-12-0

Amount of Each Receipt this Period 57.00

C.

Full Name (Last, First, Middle Initial)
Stephen T. Guinan

Mailing Address 56 Country Knoll Drive

City Binghamton State NY Zip Code 13901-6109

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1214-16-1

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 156.00

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 73 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen T. Guinan

Mailing Address 56 Country Knoll Drive

City Binghamton State NY Zip Code 13901-6109

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1213-10-1

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Stephen T. Guinan

Mailing Address 56 Country Knoll Drive

City Binghamton State NY Zip Code 13901-6109

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1215-12-2

Amount of Each Receipt this Period 42.00

C.

Full Name (Last, First, Middle Initial)
Milton C. Hall

Mailing Address 3 Meadowbrook Court

City Ballston Spa State NY Zip Code 12020-2243

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1227-16-1

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) 109.00

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 74 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Milton C. Hall

Mailing Address 3 Meadowbrook Court

City State Zip Code
Ballston Spa NY 12020-2243

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

Name of Employer Occupation
NML General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1226-10-1

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
Milton C. Hall

Mailing Address 3 Meadowbrook Court

City State Zip Code
Ballston Spa NY 12020-2243

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

Name of Employer Occupation
NML General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1228-12-2

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
Jason R. Handal

Mailing Address 311 W White Oak Way

City State Zip Code
Mequon WI 53092-6248

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

Name of Employer Occupation
NML Dir Strat Anl & Plng

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-751-10-0

Amount of Each Receipt this Period

9.00

SUBTOTAL of Receipts This Page (optional) ▶

59.00

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 75 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jason R. Handal

Mailing Address 311 W White Oak Way

City State Zip Code
Mequon WI 53092-6248

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

Name of Employer Occupation
NML Dir Strat Anl & Plng

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-752-12-0

Amount of Each Receipt this Period

9.00

B.

Full Name (Last, First, Middle Initial)
Kevin J. Hassan

Mailing Address 804 Montparnasse Place

City State Zip Code
Newtown Sq PA 19073-2623

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

Name of Employer Occupation
Hassan Group LLC Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1189-16-1

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Kevin J. Hassan

Mailing Address 804 Montparnasse Place

City State Zip Code
Newtown Sq PA 19073-2623

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

Name of Employer Occupation
Hassan Group LLC Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1188-10-1

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional) ▶

259.00

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 76 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kevin J. Hassan

Mailing Address 804 Montparnasse Place

City State Zip Code
Newtown Sq PA 19073-2623

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

Name of Employer Occupation
Hassan Group LLC Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1190-12-2

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Wayne F. Heidenreich, MD

Mailing Address 4753 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer Occupation
NML Medical Dir/HR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1038-16-0

Amount of Each Receipt this Period
12.50

C.

Full Name (Last, First, Middle Initial)
Wayne F. Heidenreich, MD

Mailing Address 4753 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer Occupation
NML Medical Dir/HR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1038-10-0

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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 77 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Wayne F. Heidenreich, MD

Mailing Address 4753 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer NML Occupation Medical Dir/HR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1039-12-0

Amount of Each Receipt this Period

12.50

B.

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

Mailing Address 18443 Melissa Circle

City State Zip Code
Eden Prairie MN 55347-1058

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1213-16-1

Amount of Each Receipt this Period

75.00

C.

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

Mailing Address 18443 Melissa Circle

City State Zip Code
Eden Prairie MN 55347-1058

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1212-10-1

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ▶

162.50

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 78 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) Mark J. Heurung		Date of Receipt MM / DD / YYYY 12 / 31 / 2008	
Mailing Address 18443 Melissa Circle		Transaction ID: 20090113-1214-12-2	
City Eden Prairie	State MN	Zip Code 55347-1058	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Special Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

B.

Full Name (Last, First, Middle Initial) Gary M. Hewitt		Date of Receipt MM / DD / YYYY 11 / 30 / 2008	
Mailing Address 2045 Elm Tree Road		Transaction ID: 20081230-932-16-0	
City Elm Grove	State WI	Zip Code 53122-1117	Amount of Each Receipt this Period 79.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Treas & Inv Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1236.00		

C.

Full Name (Last, First, Middle Initial) Gary M. Hewitt		Date of Receipt MM / DD / YYYY 12 / 15 / 2008	
Mailing Address 2045 Elm Tree Road		Transaction ID: 20081231-932-10-0	
City Elm Grove	State WI	Zip Code 53122-1117	Amount of Each Receipt this Period 79.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Treas & Inv Ops		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1236.00		

SUBTOTAL of Receipts This Page (optional)	233.00
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 79 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 2045 Elm Tree Road

City State Zip Code
Elm Grove WI 53122-1117

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

Name of Employer NML Occupation VP Treas & Inv Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1236.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-933-12-0

Amount of Each Receipt this Period
79.00

B. Full Name (Last, First, Middle Initial)
Patricia J. Hillmann

Mailing Address 1227 N 55th Street

City State Zip Code
Milwaukee WI 53208-2519

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

Name of Employer NML Occupation Dir Ann Cust Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-642-10-0

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Patricia J. Hillmann

Mailing Address 1227 N 55th Street

City State Zip Code
Milwaukee WI 53208-2519

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

Name of Employer NML Occupation Dir Ann Cust Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-643-12-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 99.00

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 80 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

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

Mailing Address 425 Lake Bluff Lane

City Grafton State WI Zip Code 53024-9764

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	8

Transaction ID: 20081230-891-16-0

Amount of Each Receipt this Period
15.00

B.

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

Mailing Address 425 Lake Bluff Lane

City Grafton State WI Zip Code 53024-9764

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	8

Transaction ID: 20081231-891-10-0

Amount of Each Receipt this Period
15.00

C.

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

Mailing Address 425 Lake Bluff Lane

City Grafton State WI Zip Code 53024-9764

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 20090113-892-12-0

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **45.00**

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 81 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Steve H. Holter		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 11390 N Creekside Court		Transaction ID: 20081230-1219-16-1
City Mequon	State WI	Zip Code 53092-4377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

B.

Full Name (Last, First, Middle Initial) Steve H. Holter		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 11390 N Creekside Court		Transaction ID: 20081231-1218-10-1
City Mequon	State WI	Zip Code 53092-4377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

C.

Full Name (Last, First, Middle Initial) Steve H. Holter		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 11390 N Creekside Court		Transaction ID: 20090113-1220-12-2
City Mequon	State WI	Zip Code 53092-4377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer The Holter Agency Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

SUBTOTAL of Receipts This Page (optional)	▶	126.00
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 82 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Harry P. Hoopis

Mailing Address 1133 Elmtree Road

City State Zip Code
Lake Forest IL 60045-1413

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3096.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	8

Transaction ID: 20081230-1160-16-1

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)
Harry P. Hoopis

Mailing Address 1133 Elmtree Road

City State Zip Code
Lake Forest IL 60045-1413

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3096.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	8

Transaction ID: 20081231-1160-10-1

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)
Harry P. Hoopis

Mailing Address 1133 Elmtree Road

City State Zip Code
Lake Forest IL 60045-1413

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3096.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 20090113-1162-12-2

Amount of Each Receipt this Period

208.00

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 83 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 5612 Enderly Road

City State Zip Code
Baltimore MD 21212-2939

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1196-16-1

Amount of Each Receipt this Period
125.00

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

Mailing Address 5612 Enderly Road

City State Zip Code
Baltimore MD 21212-2939

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1195-10-1

Amount of Each Receipt this Period
125.00

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

Mailing Address 5612 Enderly Road

City State Zip Code
Baltimore MD 21212-2939

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1197-12-2

Amount of Each Receipt this Period
125.00

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: PAGE 84 / 225
(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

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

A.

Full Name (Last, First, Middle Initial)
Nicholas E. Jahnke

Mailing Address 23702 Champe Ford Road

City Middleburg State VA Zip Code 20117-2940

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

Name of Employer NML Occupation Director-Field Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1788.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-962-16-0

Amount of Each Receipt this Period 76.00

B.

Full Name (Last, First, Middle Initial)
Nicholas E. Jahnke

Mailing Address 23702 Champe Ford Road

City Middleburg State VA Zip Code 20117-2940

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

Name of Employer NML Occupation Director-Field Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1788.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-962-10-0

Amount of Each Receipt this Period 76.00

C.

Full Name (Last, First, Middle Initial)
Nicholas E. Jahnke

Mailing Address 23702 Champe Ford Road

City Middleburg State VA Zip Code 20117-2940

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

Name of Employer NML Occupation Director-Field Production

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1788.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-963-12-0

Amount of Each Receipt this Period 76.00

SUBTOTAL of Receipts This Page (optional) ► 228.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 225
(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
							17

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

A.

Full Name (Last, First, Middle Initial)
Gregory G. Johnson

Mailing Address 507 W Kenilworth Circle

City State Zip Code
Mequon WI 53092-6199

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

Name of Employer NML Occupation Interim VP Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 0b4e72762746f7aa6f4

Amount of Each Receipt this Period
14.00

B.

Full Name (Last, First, Middle Initial)
Gregory G. Johnson

Mailing Address 507 W Kenilworth Circle

City State Zip Code
Mequon WI 53092-6199

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

Name of Employer NML Occupation Interim VP Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: b98a0fb77b0159c34a9

Amount of Each Receipt this Period
14.00

C.

Full Name (Last, First, Middle Initial)
Gregory G. Johnson

Mailing Address 507 W Kenilworth Circle

City State Zip Code
Mequon WI 53092-6199

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

Name of Employer NML Occupation Interim VP Admin

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1102-12-0

Amount of Each Receipt this Period
14.00

SUBTOTAL of Receipts This Page (optional) ► 42.00

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 86 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Daniel J. Kallay

Mailing Address S85W32221 Roberts Court

City State Zip Code
Mukwonago WI 53149-8224

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

Name of Employer NML Occupation Chief Pilot

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-567-16-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Daniel J. Kallay

Mailing Address S85W32221 Roberts Court

City State Zip Code
Mukwonago WI 53149-8224

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

Name of Employer NML Occupation Chief Pilot

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-567-10-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Daniel J. Kallay

Mailing Address S85W32221 Roberts Court

City State Zip Code
Mukwonago WI 53149-8224

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

Name of Employer NML Occupation Chief Pilot

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-568-12-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

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 87 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Adam S. Kaufman

Mailing Address 4 Heidi Lane

City State Zip Code
Mount Sinai NY 11766-1427

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1185-16-1

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Adam S. Kaufman

Mailing Address 4 Heidi Lane

City State Zip Code
Mount Sinai NY 11766-1427

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1184-10-1

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Adam S. Kaufman

Mailing Address 4 Heidi Lane

City State Zip Code
Mount Sinai NY 11766-1427

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1186-12-2

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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 88 / 225

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Shawn F. Kelley		Date of Receipt																					
	Mailing Address 16 Vintage Walk		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	3	0	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	3	0	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: 20081230-1226-16-1																			
	Cincinnati	OH	45249-2101																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Kelley Fncl Grp Inc		Occupation Special Agent		<input type="text" value="42.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="504.00"/>																						

B.	Full Name (Last, First, Middle Initial) Shawn F. Kelley		Date of Receipt																					
	Mailing Address 16 Vintage Walk		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	5	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: 20081231-1225-10-1																			
	Cincinnati	OH	45249-2101																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Kelley Fncl Grp Inc		Occupation Special Agent		<input type="text" value="42.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="504.00"/>																						

C.	Full Name (Last, First, Middle Initial) Shawn F. Kelley		Date of Receipt																					
	Mailing Address 16 Vintage Walk		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	3	1	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: 20090113-1227-12-2																			
	Cincinnati	OH	45249-2101																					
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>		Amount of Each Receipt this Period																				
Name of Employer Kelley Fncl Grp Inc		Occupation Special Agent		<input type="text" value="42.00"/>																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="504.00"/>																						

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="126.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 225

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) John C. Kelly		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 5806 N Kent Avenue		Transaction ID: 20081230-633-16-0		
	City Whitefish Bay	State WI	Zip Code 53217-4612	Amount of Each Receipt this Period 61.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP & Controller			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1212.00			

B.	Full Name (Last, First, Middle Initial) John C. Kelly		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 5806 N Kent Avenue		Transaction ID: 20081231-633-10-0		
	City Whitefish Bay	State WI	Zip Code 53217-4612	Amount of Each Receipt this Period 61.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP & Controller			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1212.00			

C.	Full Name (Last, First, Middle Initial) John C. Kelly		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 5806 N Kent Avenue		Transaction ID: 20090113-634-12-0		
	City Whitefish Bay	State WI	Zip Code 53217-4612	Amount of Each Receipt this Period 61.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP & Controller			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1212.00			

SUBTOTAL of Receipts This Page (optional) ► **183.00**

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 90 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1032 E Juneau Avenue
Apt. 523

City Milwaukee State WI Zip Code 53202-2850

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1225-16-1
Amount of Each Receipt this Period 42.00

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

Mailing Address 1032 E Juneau Avenue
Apt. 523

City Milwaukee State WI Zip Code 53202-2850

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1224-10-1
Amount of Each Receipt this Period 42.00

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

Mailing Address 1032 E Juneau Avenue
Apt. 523

City Milwaukee State WI Zip Code 53202-2850

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 504.00

Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1226-12-2
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 126.00

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 91 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Robert H. Kerrigan

Mailing Address 1457 N Beverly Drive

City State Zip Code
Beverly Hills CA 90210-2326

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1233-16-1

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Robert H. Kerrigan

Mailing Address 1457 N Beverly Drive

City State Zip Code
Beverly Hills CA 90210-2326

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1232-10-1

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Robert H. Kerrigan

Mailing Address 1457 N Beverly Drive

City State Zip Code
Beverly Hills CA 90210-2326

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1234-12-2

Amount of Each Receipt this Period
125.00

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: PAGE 92 / 225
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Mark E. Kishler		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20081230-650-16-0		
	City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Managing Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

B.	Full Name (Last, First, Middle Initial) Mark E. Kishler		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20081231-650-10-0		
	City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Managing Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Mark E. Kishler		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20090113-651-12-0		
	City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Managing Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional)	▶	30.00
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 93 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Pamela A. Knox

Mailing Address 6109 Audubon Manor B

City State Zip Code
Lithia FL 33547

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

Name of Employer NML Occupation District Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1064-16-0

Amount of Each Receipt this Period

16.00

B.

Full Name (Last, First, Middle Initial)
Pamela A. Knox

Mailing Address 6109 Audubon Manor B

City State Zip Code
Lithia FL 33547

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

Name of Employer NML Occupation District Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1064-10-0

Amount of Each Receipt this Period

16.00

C.

Full Name (Last, First, Middle Initial)
Pamela A. Knox

Mailing Address 6109 Audubon Manor B

City State Zip Code
Lithia FL 33547

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

Name of Employer NML Occupation District Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 384.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1065-12-0

Amount of Each Receipt this Period

16.00

SUBTOTAL of Receipts This Page (optional)

48.00

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 94 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) William S. Koch		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 4645 Swilcan Bridge Lane S		Transaction ID: 20081230-1184-16-1
City Jacksonville	State FL	Zip Code 32224-5621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.

Full Name (Last, First, Middle Initial) William S. Koch		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 4645 Swilcan Bridge Lane S		Transaction ID: 20081231-1183-10-1
City Jacksonville	State FL	Zip Code 32224-5621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

C.

Full Name (Last, First, Middle Initial) William S. Koch		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 4645 Swilcan Bridge Lane S		Transaction ID: 20090113-1185-12-2
City Jacksonville	State FL	Zip Code 32224-5621
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 225
(check only one)

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

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

A.

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

Mailing Address 541 E Erie Street Unit 4

City Milwaukee State WI Zip Code 53202-6236

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

Name of Employer NML Occupation Svp & Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-595-16-0

Amount of Each Receipt this Period 107.00

B.

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

Mailing Address 541 E Erie Street Unit 4

City Milwaukee State WI Zip Code 53202-6236

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

Name of Employer NML Occupation Svp & Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-595-10-0

Amount of Each Receipt this Period 107.00

C.

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

Mailing Address 541 E Erie Street Unit 4

City Milwaukee State WI Zip Code 53202-6236

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

Name of Employer NML Occupation Svp & Chief Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-596-12-0

Amount of Each Receipt this Period 107.00

SUBTOTAL of Receipts This Page (optional) ► 321.00

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 96 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
John L. Kordsmeier
Mailing Address 2522 W Daphne Road
City Glendale State WI Zip Code 53209-3352
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Enterprise Solutions
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1332.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1067-16-0
Amount of Each Receipt this Period 77.00

B. Full Name (Last, First, Middle Initial)
John L. Kordsmeier
Mailing Address 2522 W Daphne Road
City Glendale State WI Zip Code 53209-3352
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Enterprise Solutions
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1332.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1067-10-0
Amount of Each Receipt this Period 77.00

C. Full Name (Last, First, Middle Initial)
John L. Kordsmeier
Mailing Address 2522 W Daphne Road
City Glendale State WI Zip Code 53209-3352
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Enterprise Solutions
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1332.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1068-12-0
Amount of Each Receipt this Period 77.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Steven H. Kosnick

Mailing Address 5799 Windsona Circle

City State Zip Code
Fitchburg WI 53711-5839

FEC ID number of contributing federal political committee. C

Name of Employer: Kosnick and Assoc Inc
Occupation: Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1178-16-1

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Steven H. Kosnick

Mailing Address 5799 Windsona Circle

City State Zip Code
Fitchburg WI 53711-5839

FEC ID number of contributing federal political committee. C

Name of Employer: Kosnick and Assoc Inc
Occupation: Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1177-10-1

Amount of Each Receipt this Period 42.00

C.

Full Name (Last, First, Middle Initial)
Steven H. Kosnick

Mailing Address 5799 Windsona Circle

City State Zip Code
Fitchburg WI 53711-5839

FEC ID number of contributing federal political committee. C

Name of Employer: Kosnick and Assoc Inc
Occupation: Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 462.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1179-12-2

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) 126.00

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 98 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert J. Kowalsky

Mailing Address 4791 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1042-16-0

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Robert J. Kowalsky

Mailing Address 4791 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1042-10-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Robert J. Kowalsky

Mailing Address 4791 N Larkin Street

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer NML Occupation VP IS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1043-12-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 99 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Carol L. Kracht

Mailing Address 449 E Cedar Lane

City State Zip Code
Mequon WI 53092-6102

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

Name of Employer NML Occupation
VP Dep Gc & Inv Cns

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-995-16-0

Amount of Each Receipt this Period

32.00

B.

Full Name (Last, First, Middle Initial)
Carol L. Kracht

Mailing Address 449 E Cedar Lane

City State Zip Code
Mequon WI 53092-6102

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

Name of Employer NML Occupation
VP Dep Gc & Inv Cns

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-995-10-0

Amount of Each Receipt this Period

32.00

C.

Full Name (Last, First, Middle Initial)
Carol L. Kracht

Mailing Address 449 E Cedar Lane

City State Zip Code
Mequon WI 53092-6102

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

Name of Employer NML Occupation
VP Dep Gc & Inv Cns

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-996-12-0

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)

96.00

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 100 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Todd L. Laszewski

Mailing Address 2604 N 90th Street

City State Zip Code
Wauwatosa WI 53226-1813

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

Name of Employer NML Occupation Dir Lp Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-919-16-0

Amount of Each Receipt this Period
11.00

B.

Full Name (Last, First, Middle Initial)
Todd L. Laszewski

Mailing Address 2604 N 90th Street

City State Zip Code
Wauwatosa WI 53226-1813

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

Name of Employer NML Occupation Dir Lp Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-919-10-0

Amount of Each Receipt this Period
11.00

C.

Full Name (Last, First, Middle Initial)
Todd L. Laszewski

Mailing Address 2604 N 90th Street

City State Zip Code
Wauwatosa WI 53226-1813

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

Name of Employer NML Occupation Dir Lp Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-920-12-0

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional) ► **33.00**

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 101 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Michael K. Lawhon		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 6952 Burnt Sienna Circle		Transaction ID: 20081230-1221-16-1
City Naples	State FL	Zip Code 34109-7826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

B.

Full Name (Last, First, Middle Initial) Michael K. Lawhon		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 6952 Burnt Sienna Circle		Transaction ID: 20081231-1220-10-1
City Naples	State FL	Zip Code 34109-7826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

C.

Full Name (Last, First, Middle Initial) Michael K. Lawhon		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 6952 Burnt Sienna Circle		Transaction ID: 20090113-1222-12-2
City Naples	State FL	Zip Code 34109-7826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 504.00	

SUBTOTAL of Receipts This Page (optional)	126.00
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 102 / 225
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Brian E. Lee		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 3118 Hunt Road		Transaction ID: 20081230-763-16-0		
	City Oakton	State VA	Zip Code 22124-1314	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation Director-Field Production		

Aggregate Year-to-Date ▼
360.00

B.	Full Name (Last, First, Middle Initial) Brian E. Lee		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 3118 Hunt Road		Transaction ID: 20081231-763-10-0		
	City Oakton	State VA	Zip Code 22124-1314	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation Director-Field Production		

Aggregate Year-to-Date ▼
360.00

C.	Full Name (Last, First, Middle Initial) Brian E. Lee		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 3118 Hunt Road		Transaction ID: 20090113-764-12-0		
	City Oakton	State VA	Zip Code 22124-1314	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation Director-Field Production		

Aggregate Year-to-Date ▼
360.00

SUBTOTAL of Receipts This Page (optional)	▶	45.00
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 103 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Gilbert R. Llanas

Mailing Address 1322 Edgewood Avenue

City State Zip Code
South Milwauk WI 53172-3573

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

Name of Employer NML Occupation Dir Comm Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-791-10-0

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Gilbert R. Llanas

Mailing Address 1322 Edgewood Avenue

City State Zip Code
South Milwauk WI 53172-3573

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

Name of Employer NML Occupation Dir Comm Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-792-12-0

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Werner Loots

Mailing Address 121 W Chestnut Street

City State Zip Code
Chicago IL 60610-3175

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 612.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-620-16-0

Amount of Each Receipt this Period
33.00

SUBTOTAL of Receipts This Page (optional) ► **53.00**

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 104 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Werner Loots

Mailing Address 121 W Chestnut Street

City State Zip Code
Chicago IL 60610-3175

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 612.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-620-10-0

Amount of Each Receipt this Period
33.00

B.

Full Name (Last, First, Middle Initial)
Werner Loots

Mailing Address 121 W Chestnut Street

City State Zip Code
Chicago IL 60610-3175

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 612.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-621-12-0

Amount of Each Receipt this Period
33.00

C.

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

Mailing Address 1108 W Goldthread Circle

City State Zip Code
Sioux Falls SD 57108-2824

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1008.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1183-16-1

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **108.00**

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 105 / 225		
	<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

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)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) Robert D. Lowrey	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 1108 W Goldthread Circle	Transaction ID: 20081231-1182-10-1
	City State Zip Code Sioux Falls SD 57108-2824	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1008.00	

B.	Full Name (Last, First, Middle Initial) Robert D. Lowrey	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 1108 W Goldthread Circle	Transaction ID: 20090113-1184-12-2
	City State Zip Code Sioux Falls SD 57108-2824	Amount of Each Receipt this Period 42.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation General Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1008.00	

C.	Full Name (Last, First, Middle Initial) Susan A. Lueger	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 4317 N Stowell Avenue	Transaction ID: 20081230-622-16-0
	City State Zip Code Shorewood WI 53211-1748	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation VP HR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1140.00	

SUBTOTAL of Receipts This Page (optional)	139.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 106 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Susan A. Lueger
Mailing Address 4317 N Stowell Avenue
City Shorewood State WI Zip Code 53211-1748
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP HR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1140.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-622-10-0
Amount of Each Receipt this Period 55.00

B. Full Name (Last, First, Middle Initial)
Susan A. Lueger
Mailing Address 4317 N Stowell Avenue
City Shorewood State WI Zip Code 53211-1748
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP HR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1140.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-623-12-0
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Jeffrey J. Lueken
Mailing Address 1213 E Goodrich Lane
City Fox Point State WI Zip Code 53217-2946
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp Securities
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3288.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-923-16-0
Amount of Each Receipt this Period 182.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 107 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 1213 E Goodrich Lane		Transaction ID: 20081231-923-10-0		
	City Fox Point	State WI	Zip Code 53217-2946	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 3288.00		
	Name of Employer NML		Occupation Svp Securities		

B.	Full Name (Last, First, Middle Initial) Jeffrey J. Lueken		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 1213 E Goodrich Lane		Transaction ID: 20090113-924-12-0		
	City Fox Point	State WI	Zip Code 53217-2946	Amount of Each Receipt this Period 182.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 3288.00		
	Name of Employer NML		Occupation Svp Securities		

C.	Full Name (Last, First, Middle Initial) Jean M. Maier		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 5432 N Diversey		Transaction ID: 20081230-547-16-0		
	City Whitefish Bay	State WI	Zip Code 53217-5165	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 2400.00		
	Name of Employer NML		Occupation Svp Ent Ops & Cco		

SUBTOTAL of Receipts This Page (optional)	514.00
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 108 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Jean M. Maier

Mailing Address 5432 N Diversey

City State Zip Code
Whitefish Bay WI 53217-5165

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

Name of Employer NML Occupation Svp Ent Ops & Cco

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-547-10-0

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Jean M. Maier

Mailing Address 5432 N Diversey

City State Zip Code
Whitefish Bay WI 53217-5165

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

Name of Employer NML Occupation Svp Ent Ops & Cco

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-548-12-0

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Raymond J. Manista

Mailing Address 7236 N Crossway

City State Zip Code
Fox Point WI 53217-3519

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

Name of Employer NML Occupation VP Gen Cnsl & Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-580-16-0

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **365.00**

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 109 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Raymond J. Manista
Mailing Address 7236 N Crossway
City State Zip Code
Fox Point WI 53217-3519
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Gen Cnsl & Sec
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-580-10-0
Amount of Each Receipt this Period 65.00

B. Full Name (Last, First, Middle Initial)
Raymond J. Manista
Mailing Address 7236 N Crossway
City State Zip Code
Fox Point WI 53217-3519
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Gen Cnsl & Sec
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-581-12-0
Amount of Each Receipt this Period 65.00

C. Full Name (Last, First, Middle Initial)
James V. Marker
Mailing Address 1812 Timber Creek Court
City State Zip Code
Centerville OH 45458-9589
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 374.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1175-16-1
Amount of Each Receipt this Period 17.00

SUBTOTAL of Receipts This Page (optional) ► 147.00
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 110 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Jeffrey S. Marks

Mailing Address 407 S Front Street

City Burlington State WI Zip Code 53105-7215

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation Dir Spcl Proj

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-599-16-0

Amount of Each Receipt this Period 11.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey S. Marks

Mailing Address 407 S Front Street

City Burlington State WI Zip Code 53105-7215

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation Dir Spcl Proj

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-599-10-0

Amount of Each Receipt this Period 11.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey S. Marks

Mailing Address 407 S Front Street

City Burlington State WI Zip Code 53105-7215

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation Dir Spcl Proj

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-600-12-0

Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional) 33.00

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 111 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Meridee J. Maynard
Mailing Address 809 E Lake Forest
City Whitefish Bay State WI Zip Code 53217-5377
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2004.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-844-16-0
Amount of Each Receipt this Period 103.00

B. Full Name (Last, First, Middle Initial)
Meridee J. Maynard
Mailing Address 809 E Lake Forest
City Whitefish Bay State WI Zip Code 53217-5377
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2004.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-844-10-0
Amount of Each Receipt this Period 103.00

C. Full Name (Last, First, Middle Initial)
Meridee J. Maynard
Mailing Address 809 E Lake Forest
City Whitefish Bay State WI Zip Code 53217-5377
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2004.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-845-12-0
Amount of Each Receipt this Period 103.00

SUBTOTAL of Receipts This Page (optional) ► 309.00
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 112 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David C. Mc Avoy

Mailing Address 11 Mountview Road

City State Zip Code
Wellesley MA 02481-2757

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4099.92

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1172-16-1

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
David C. Mc Avoy

Mailing Address 11 Mountview Road

City State Zip Code
Wellesley MA 02481-2757

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4099.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1172-10-1

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
David C. Mc Avoy

Mailing Address 11 Mountview Road

City State Zip Code
Wellesley MA 02481-2757

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 4099.92

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1174-12-2

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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 113 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Roger M. Mc Queen

Mailing Address 6098 Pioneer Fork Road

City State Zip Code
Salt Lake Cty UT 84108-3613

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

Name of Employer Occupation
McQueen Fncl Group Inc Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1169-16-1

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Roger M. Mc Queen

Mailing Address 6098 Pioneer Fork Road

City State Zip Code
Salt Lake Cty UT 84108-3613

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

Name of Employer Occupation
McQueen Fncl Group Inc Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1169-10-1

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Roger M. Mc Queen

Mailing Address 6098 Pioneer Fork Road

City State Zip Code
Salt Lake Cty UT 84108-3613

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

Name of Employer Occupation
McQueen Fncl Group Inc Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1171-12-2

Amount of Each Receipt this Period
125.00

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: PAGE 114 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Erin L. McComas		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 1485 Broadstone Place		Transaction ID: 20081230-1123-16-0
City Vienna	State VA	Zip Code 22182-1752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.00
Name of Employer NML	Occupation Director-Field Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

B.

Full Name (Last, First, Middle Initial) Erin L. McComas		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 1485 Broadstone Place		Transaction ID: 20081231-1123-10-0
City Vienna	State VA	Zip Code 22182-1752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.00
Name of Employer NML	Occupation Director-Field Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

C.

Full Name (Last, First, Middle Initial) Erin L. McComas		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 1485 Broadstone Place		Transaction ID: 20090113-1125-12-0
City Vienna	State VA	Zip Code 22182-1752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.00
Name of Employer NML	Occupation Director-Field Asset Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

SUBTOTAL of Receipts This Page (optional)	▶	39.00
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 115 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
James L. McFarland

Mailing Address 215 N Aberdeen Street

City State Zip Code
Chicago IL 60607-1615

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1031-16-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
James L. McFarland

Mailing Address 215 N Aberdeen Street

City State Zip Code
Chicago IL 60607-1615

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1031-10-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
James L. McFarland

Mailing Address 215 N Aberdeen Street

City State Zip Code
Chicago IL 60607-1615

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1032-12-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

30.00

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 116 / 225		
	<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

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

A.	Full Name (Last, First, Middle Initial) Mark J. McLennon		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 2571 N 86th Street		Transaction ID: 20081230-618-16-0		
	City Wauwatosa	State WI	Zip Code 53226-1921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation VP Inv Adv Svc		

Aggregate Year-to-Date ▼
588.00

B.	Full Name (Last, First, Middle Initial) Mark J. McLennon		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 2571 N 86th Street		Transaction ID: 20081231-618-10-0		
	City Wauwatosa	State WI	Zip Code 53226-1921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation VP Inv Adv Svc		

Aggregate Year-to-Date ▼
588.00

C.	Full Name (Last, First, Middle Initial) Mark J. McLennon		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 2571 N 86th Street		Transaction ID: 20090113-619-12-0		
	City Wauwatosa	State WI	Zip Code 53226-1921	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer NML		Occupation VP Inv Adv Svc		

Aggregate Year-to-Date ▼
588.00

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 117 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Lesli H. McLinden

Mailing Address 340 N Elmridge Avenue

City State Zip Code
Brookfield WI 53005-6117

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1090-16-0

Amount of Each Receipt this Period
11.00

B.

Full Name (Last, First, Middle Initial)
Lesli H. McLinden

Mailing Address 340 N Elmridge Avenue

City State Zip Code
Brookfield WI 53005-6117

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1090-10-0

Amount of Each Receipt this Period
11.00

C.

Full Name (Last, First, Middle Initial)
Lesli H. McLinden

Mailing Address 340 N Elmridge Avenue

City State Zip Code
Brookfield WI 53005-6117

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1091-12-0

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional) ► 33.00

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 118 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John W. McTigue

Mailing Address 205 E 4th Street

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer McTigue Fncl Group Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1177-16-1

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
John W. McTigue

Mailing Address 205 E 4th Street

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer McTigue Fncl Group Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1176-10-1

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
John W. McTigue

Mailing Address 205 E 4th Street

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer McTigue Fncl Group Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1178-12-2

Amount of Each Receipt this Period
208.00

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 119 / 225
(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

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

A.

Full Name (Last, First, Middle Initial)
Daniel J. Meehan

Mailing Address N30W6890 Lincoln Blv

City Cedarburg State WI Zip Code 53012-2266

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	8

Transaction ID: 20081230-584-16-0

Amount of Each Receipt this Period
11.00

B.

Full Name (Last, First, Middle Initial)
Daniel J. Meehan

Mailing Address N30W6890 Lincoln Blv

City Cedarburg State WI Zip Code 53012-2266

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	8

Transaction ID: 20081231-584-10-0

Amount of Each Receipt this Period
11.00

C.

Full Name (Last, First, Middle Initial)
Daniel J. Meehan

Mailing Address N30W6890 Lincoln Blv

City Cedarburg State WI Zip Code 53012-2266

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

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 20090113-585-12-0

Amount of Each Receipt this Period
11.00

SUBTOTAL of Receipts This Page (optional) ► **33.00**

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 120 / 225
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Arthur J. Mees, Jr.		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 5347 N Hollywood Avenue		Transaction ID: 20081231-1100-10-0
	City Whitefish Bay	State WI	Zip Code 53217-5324
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.00
	Name of Employer NML	Occupation Dir Mktg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) Arthur J. Mees, Jr.		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 5347 N Hollywood Avenue		Transaction ID: 20090113-1101-12-0
	City Whitefish Bay	State WI	Zip Code 53217-5324
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.00
	Name of Employer NML	Occupation Dir Mktg	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	

C.	Full Name (Last, First, Middle Initial) Joseph F. Meier		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 208 Long Acres Lane		Transaction ID: 20081230-1181-16-1
	City Oviedo	State FL	Zip Code 32765-7843
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
	Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1008.00	

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 121 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Joseph F. Meier
Mailing Address 208 Long Acres Lane
City Oviedo State FL Zip Code 32765-7843
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1180-10-1
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Joseph F. Meier
Mailing Address 208 Long Acres Lane
City Oviedo State FL Zip Code 32765-7843
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1182-12-2
Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Robert G. Meilander
Mailing Address 6900 N Glen Shore Drive
City Glendale State WI Zip Code 53209-2819
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP-Corp Actuary
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-573-16-0
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 114.00
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 122 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Robert G. Meilander

Mailing Address 6900 N Glen Shore Drive

City State Zip Code
Glendale WI 53209-2819

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

Name of Employer NML Occupation VP-Corp Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-573-10-0

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
Robert G. Meilander

Mailing Address 6900 N Glen Shore Drive

City State Zip Code
Glendale WI 53209-2819

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

Name of Employer NML Occupation VP-Corp Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-574-12-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
Richard D. Mellinger

Mailing Address 50960 Fox Trail

City State Zip Code
Granger IN 46530-9039

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1162-16-1

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

85.00

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 123 / 225
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Richard D. Mellinger

Mailing Address 50960 Fox Trail

City State Zip Code
Granger IN 46530-9039

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1162-10-1

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Richard D. Mellinger

Mailing Address 50960 Fox Trail

City State Zip Code
Granger IN 46530-9039

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1164-12-2

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Richard E. Meyers

Mailing Address 848 E Birch Avenue

City State Zip Code
Whitefish Bay WI 53217-5359

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1063-16-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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 124 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Richard E. Meyers

Mailing Address 848 E Birch Avenue

City State Zip Code
Whitefish Bay WI 53217-5359

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1063-10-0

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Richard E. Meyers

Mailing Address 848 E Birch Avenue

City State Zip Code
Whitefish Bay WI 53217-5359

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1064-12-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Carl W. Middleton

Mailing Address 15712 Point Monroe Drive Northeast

City State Zip Code
Bainbridge Island WA 98110-1158

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1165-16-1

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 145.00

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 125 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Carl W. Middleton

Mailing Address 15712 Point Monroe Drive Northeast

City State Zip Code
Bainbridge Island WA 98110-1158

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1165-10-1

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Carl W. Middleton

Mailing Address 15712 Point Monroe Drive Northeast

City State Zip Code
Bainbridge Island WA 98110-1158

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1167-12-2

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Ben Miller

Mailing Address 10523 Blanco Drive Northwest

City State Zip Code
Albuquerque NM 87114-5667

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1096.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1223-16-1

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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 126 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Ben Miller		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 10523 Blanco Drive Northwest		Transaction ID: 20081231-1222-10-1
City Albuquerque	State NM	Zip Code 87114-5667
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.00	

B.

Full Name (Last, First, Middle Initial) Ben Miller		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 10523 Blanco Drive Northwest		Transaction ID: 20090113-1224-12-2
City Albuquerque	State NM	Zip Code 87114-5667
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.00	

C.

Full Name (Last, First, Middle Initial) Jay W. Miller		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 4820 N Oakland Avenue		Transaction ID: 20081230-1059-16-0
City Whitefish Bay	State WI	Zip Code 53217-6050
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation VP Adv Plng	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

SUBTOTAL of Receipts This Page (optional)	▶	125.00
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 127 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Jay W. Miller
Mailing Address 4820 N Oakland Avenue
City State Zip Code
Whitefish Bay WI 53217-6050
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Adv PIng
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1059-10-0
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Jay W. Miller
Mailing Address 4820 N Oakland Avenue
City State Zip Code
Whitefish Bay WI 53217-6050
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Adv PIng
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1060-12-0
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Kevin E. Miller
Mailing Address 214 Schenley Road
City State Zip Code
Pittsburgh PA 15217-1171
FEC ID number of contributing federal political committee. **C**
Name of Employer KEM Fncl Services Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1212-16-1
Amount of Each Receipt this Period 43.00

SUBTOTAL of Receipts This Page (optional) ► 93.00
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 128 / 225

(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Kevin E. Miller		Date of Receipt
	Mailing Address 214 Schenley Road		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15217-1171
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081231-1211-10-1
Name of Employer KEM Fncl Services Inc		Occupation Special Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="43.00"/>
		<input type="text" value="430.00"/>	

B.	Full Name (Last, First, Middle Initial) Kevin E. Miller		Date of Receipt
	Mailing Address 214 Schenley Road		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Pittsburgh	PA	15217-1171
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090113-1213-12-2
Name of Employer KEM Fncl Services Inc		Occupation Special Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="43.00"/>
		<input type="text" value="430.00"/>	

C.	Full Name (Last, First, Middle Initial) Scott J. Morris		Date of Receipt
	Mailing Address 12719 N Meadow Circle W		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Mequon	WI	53092-1184
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081230-1079-16-0
Name of Employer NML		Occupation Asst Gc & Asst Sec	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="11.00"/>
		<input type="text" value="264.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="97.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Scott J. Morris

Mailing Address 12719 N Meadow Circle W

City State Zip Code
Mequon WI 53092-1184

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1079-10-0

Amount of Each Receipt this Period
11.00

B.

Full Name (Last, First, Middle Initial)
Scott J. Morris

Mailing Address 12719 N Meadow Circle W

City State Zip Code
Mequon WI 53092-1184

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1080-12-0

Amount of Each Receipt this Period
11.00

C.

Full Name (Last, First, Middle Initial)
Martin A. Moser

Mailing Address 378 Juniper Court

City State Zip Code
Grafton WI 53024-2270

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-615-16-0

Amount of Each Receipt this Period
16.00

SUBTOTAL of Receipts This Page (optional) ► 38.00

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 130 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Martin A. Moser

Mailing Address 378 Juniper Court

City State Zip Code
Grafton WI 53024-2270

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-615-10-0

Amount of Each Receipt this Period
16.00

B. Full Name (Last, First, Middle Initial)
Martin A. Moser

Mailing Address 378 Juniper Court

City State Zip Code
Grafton WI 53024-2270

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-616-12-0

Amount of Each Receipt this Period
16.00

C. Full Name (Last, First, Middle Initial)
David K. Nelson

Mailing Address 1506 E Fox Lane

City State Zip Code
Fox Point WI 53217-2853

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-683-16-0

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► 44.00

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 131 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David K. Nelson

Mailing Address 1506 E Fox Lane

City State Zip Code
Fox Point WI 53217-2853

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

Name of Employer Occupation
NML Asst Gc & Asst Sec

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-683-10-0

Amount of Each Receipt this Period

12.00

B.

Full Name (Last, First, Middle Initial)
David K. Nelson

Mailing Address 1506 E Fox Lane

City State Zip Code
Fox Point WI 53217-2853

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

Name of Employer Occupation
NML Asst Gc & Asst Sec

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-684-12-0

Amount of Each Receipt this Period

12.00

C.

Full Name (Last, First, Middle Initial)
Ronald C. Nelson

Mailing Address 5275 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-5371

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

Name of Employer Occupation
NML Dir Prd Dev & Strat

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-625-16-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

44.00

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 132 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ronald C. Nelson

Mailing Address 5275 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-5371

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

Name of Employer Occupation
NML Dir Prd Dev & Strat

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 432.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-625-10-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Ronald C. Nelson

Mailing Address 5275 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-5371

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

Name of Employer Occupation
NML Dir Prd Dev & Strat

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 432.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-626-12-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Timothy Nelson

Mailing Address 3518 17th Street

City State Zip Code
Kenosha WI 53144-3339

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

Name of Employer Occupation
NML Dir Mkt Conduct

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-884-16-0

Amount of Each Receipt this Period

13.00

SUBTOTAL of Receipts This Page (optional)

53.00

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 133 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Timothy Nelson

Mailing Address 3518 17th Street

City Kenosha State WI Zip Code 53144-3339

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

Name of Employer NML Occupation Dir Mkt Conduct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-884-10-0

Amount of Each Receipt this Period 13.00

B.

Full Name (Last, First, Middle Initial)
Timothy Nelson

Mailing Address 3518 17th Street

City Kenosha State WI Zip Code 53144-3339

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

Name of Employer NML Occupation Dir Mkt Conduct

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-885-12-0

Amount of Each Receipt this Period 13.00

C.

Full Name (Last, First, Middle Initial)
James J. Nemeo

Mailing Address 22 Maple Avenue

City Larchmont State NY Zip Code 10538-4041

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

Name of Employer The Nemeo Agency LLC Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1229-16-1

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 234.00

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 134 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
James J. Nemec

Mailing Address 22 Maple Avenue

City State Zip Code
Larchmont NY 10538-4041

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

Name of Employer Occupation
The Nemec Agency LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1228-10-1

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)
James J. Nemec

Mailing Address 22 Maple Avenue

City State Zip Code
Larchmont NY 10538-4041

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

Name of Employer Occupation
The Nemec Agency LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 4992.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1230-12-2

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)
Jeremy D. Newman

Mailing Address 2456 N 97th Street

City State Zip Code
Wauwatosa WI 53226-1646

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

Name of Employer Occupation
NML Dir Corp Offices

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 348.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1113-16-0

Amount of Each Receipt this Period

18.00

SUBTOTAL of Receipts This Page (optional)

434.00

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 135 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Jeremy D. Newman

Mailing Address 2456 N 97th Street

City Wauwatosa State WI Zip Code 53226-1646

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

Name of Employer NML Occupation Dir Corp Offices

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-1113-10-0

Amount of Each Receipt this Period 18.00

B.

Full Name (Last, First, Middle Initial)
Jeremy D. Newman

Mailing Address 2456 N 97th Street

City Wauwatosa State WI Zip Code 53226-1646

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

Name of Employer NML Occupation Dir Corp Offices

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-1115-12-0

Amount of Each Receipt this Period 18.00

C.

Full Name (Last, First, Middle Initial)
William H. Norton

Mailing Address 10145 Wavell Road

City Fairfax State VA Zip Code 22032-2337

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

Name of Employer NML Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-546-16-0

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 86.00

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 136 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
William H. Norton

Mailing Address 10145 Wavell Road

City State Zip Code
Fairfax VA 22032-2337

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

Name of Employer NML Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-546-10-0

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
William H. Norton

Mailing Address 10145 Wavell Road

City State Zip Code
Fairfax VA 22032-2337

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

Name of Employer NML Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-547-12-0

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Daniel J. O Meara

Mailing Address W70 N385 Fox Pointe

City State Zip Code
Cedarburg WI 53012

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

Name of Employer NML Occupation VP Agency Dev & Pgrms

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-736-16-0

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► 127.00

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 137 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Daniel J. O Meara

Mailing Address W70 N385 Fox Pointe

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation VP Agency Dev & Prgrms

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-736-10-0

Amount of Each Receipt this Period 27.00

B.

Full Name (Last, First, Middle Initial)
Daniel J. O Meara

Mailing Address W70 N385 Fox Pointe

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation VP Agency Dev & Prgrms

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-737-12-0

Amount of Each Receipt this Period 27.00

C.

Full Name (Last, First, Middle Initial)
John K. O Meara

Mailing Address 1083 N Perry Court

City Wauwatosa State WI Zip Code 53213-3158

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

Name of Employer NML Occupation Dir Adv Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1037-16-0

Amount of Each Receipt this Period 14.00

SUBTOTAL of Receipts This Page (optional) ► 68.00

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 138 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
John K. O Meara
Mailing Address 1083 N Perry Court
City Wauwatosa State WI Zip Code 53213-3158
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Adv Plng
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1037-10-0
Amount of Each Receipt this Period 14.00

B. Full Name (Last, First, Middle Initial)
John K. O Meara
Mailing Address 1083 N Perry Court
City Wauwatosa State WI Zip Code 53213-3158
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Adv Plng
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1038-12-0
Amount of Each Receipt this Period 14.00

C. Full Name (Last, First, Middle Initial)
Mary Joy O Meara
Mailing Address 4325 N Morris Boulevard
City Shorewood State WI Zip Code 53211-1547
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Specialty Mkts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-760-16-0
Amount of Each Receipt this Period 11.00

SUBTOTAL of Receipts This Page (optional) ► 39.00
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 139 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Mary Joy O Meara

Mailing Address 4325 N Morris Boulevard

City State Zip Code
Shorewood WI 53211-1547

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

Name of Employer NML Occupation Dir Specialty Mkts

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-760-10-0

Amount of Each Receipt this Period

11.00

B.

Full Name (Last, First, Middle Initial)
Mary Joy O Meara

Mailing Address 4325 N Morris Boulevard

City State Zip Code
Shorewood WI 53211-1547

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

Name of Employer NML Occupation Dir Specialty Mkts

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-761-12-0

Amount of Each Receipt this Period

11.00

C.

Full Name (Last, First, Middle Initial)
Gregory C. Oberland

Mailing Address 4746 N Cumberland Bl

City State Zip Code
Whitefish Bay WI 53211-1147

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

Name of Employer NML Occupation EVP Ins & Tech

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3348.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-601-16-0

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional) ▶

230.00

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 140 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Gregory C. Oberland
Mailing Address 4746 N Cumberland Bl

City State Zip Code
Whitefish Bay WI 53211-1147

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

Name of Employer NML Occupation EVP Ins & Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3348.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-601-10-0

Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
Gregory C. Oberland
Mailing Address 4746 N Cumberland Bl

City State Zip Code
Whitefish Bay WI 53211-1147

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

Name of Employer NML Occupation EVP Ins & Tech

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3348.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-602-12-0

Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Anthony Oliver
Mailing Address 7704 S Pine Avenue

City State Zip Code
Oak Creek WI 53154-2345

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

Name of Employer NML Occupation Director IS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-682-12-0

Amount of Each Receipt this Period 9.00

SUBTOTAL of Receipts This Page (optional) ► 425.00

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 141 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kathleen A. Oman

Mailing Address S63W16495 College Avenue

City State Zip Code
Muskego WI 53150-8303

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

Name of Employer NML Occupation VP Pos

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 708.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-766-16-0

Amount of Each Receipt this Period

52.00

B.

Full Name (Last, First, Middle Initial)
Kathleen A. Oman

Mailing Address S63W16495 College Avenue

City State Zip Code
Muskego WI 53150-8303

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

Name of Employer NML Occupation VP Pos

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 708.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-766-10-0

Amount of Each Receipt this Period

52.00

C.

Full Name (Last, First, Middle Initial)
Kathleen A. Oman

Mailing Address S63W16495 College Avenue

City State Zip Code
Muskego WI 53150-8303

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

Name of Employer NML Occupation VP Pos

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 708.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-767-12-0

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

156.00

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 142 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

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

Mailing Address 217 W Wilbur Avenue

City State Zip Code
Milwaukee WI 53207-3229

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

Name of Employer NML Occupation Ast Dir Inv Pln Sys

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-723-10-0

Amount of Each Receipt this Period
9.00

B.

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

Mailing Address 217 W Wilbur Avenue

City State Zip Code
Milwaukee WI 53207-3229

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

Name of Employer NML Occupation Ast Dir Inv Pln Sys

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-724-12-0

Amount of Each Receipt this Period
9.00

C.

Full Name (Last, First, Middle Initial)
Christen L. Partleton

Mailing Address 4832 N Shoreland Avenue

City State Zip Code
Whitefish Bay WI 53217-5821

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

Name of Employer NML Occupation VP Facility Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-871-16-0

Amount of Each Receipt this Period
22.00

SUBTOTAL of Receipts This Page (optional) ► **40.00**

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 143 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Christen L. Partleton
Mailing Address 4832 N Shoreland Avenue
City State Zip Code
Whitefish Bay WI 53217-5821
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Facility Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 372.00
Date of Receipt MM / DD / YYYY
12 / 15 / 2008
Transaction ID: 20081231-871-10-0
Amount of Each Receipt this Period 22.00

B. Full Name (Last, First, Middle Initial)
Christen L. Partleton
Mailing Address 4832 N Shoreland Avenue
City State Zip Code
Whitefish Bay WI 53217-5821
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Facility Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 372.00
Date of Receipt MM / DD / YYYY
12 / 31 / 2008
Transaction ID: 20090113-872-12-0
Amount of Each Receipt this Period 22.00

C. Full Name (Last, First, Middle Initial)
Jeffrey L. Pawlowski
Mailing Address 2519 Northwest Marsden Place
City State Zip Code
Portland OR 97229-9190
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00
Date of Receipt MM / DD / YYYY
11 / 30 / 2008
Transaction ID: 20081230-1193-16-1
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 169.00
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 144 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jeffrey L. Pawlowski

Mailing Address 2519 Northwest Marsden Place

City State Zip Code
Portland OR 97229-9190

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1192-10-1

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey L. Pawlowski

Mailing Address 2519 Northwest Marsden Place

City State Zip Code
Portland OR 97229-9190

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1194-12-2

Amount of Each Receipt this Period
125.00

C.

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

Mailing Address 1823 N 81st Street

City State Zip Code
Wauwatosa WI 53213-2146

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1046-16-0

Amount of Each Receipt this Period
12.00

SUBTOTAL of Receipts This Page (optional) ► 262.00

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 145 / 225
(check only one)

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

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

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

A.

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

Mailing Address 1823 N 81st Street

City State Zip Code
Wauwatosa WI 53213-2146

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1046-10-0

Amount of Each Receipt this Period

12.00

B.

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

Mailing Address 1823 N 81st Street

City State Zip Code
Wauwatosa WI 53213-2146

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1047-12-0

Amount of Each Receipt this Period

12.00

C.

Full Name (Last, First, Middle Initial)
Harvey W. Pogoriler

Mailing Address 9185 N Rexleigh Drive

City State Zip Code
Bayside WI 53217-1869

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 444.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1073-16-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) ▶

44.00

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 146 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Harvey W. Pogoriler

Mailing Address 9185 N Rexleigh Drive

City State Zip Code
Bayside WI 53217-1869

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 444.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1073-10-0

Amount of Each Receipt this Period

20.00

B.

Full Name (Last, First, Middle Initial)
Harvey W. Pogoriler

Mailing Address 9185 N Rexleigh Drive

City State Zip Code
Bayside WI 53217-1869

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 444.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1074-12-0

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Gary A. Poliner

Mailing Address 311 E Erie Street

City State Zip Code
Milwaukee WI 53202-6040

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

Name of Employer NML Occupation
EVP Ips

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4116.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-551-16-0

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

248.00

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 147 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Gary A. Poliner

Mailing Address 311 E Erie Street

City State Zip Code
Milwaukee WI 53202-6040

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

Name of Employer NML Occupation EVP Ips

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4116.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-551-10-0

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Gary A. Poliner

Mailing Address 311 E Erie Street

City State Zip Code
Milwaukee WI 53202-6040

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

Name of Employer NML Occupation EVP Ips

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4116.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-552-12-0

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Charles R. Pruett

Mailing Address 224 Ensworth Place

City State Zip Code
Nashville TN 37205-1922

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2750.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1220-16-1

Amount of Each Receipt this Period
125.00

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: PAGE 148 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Charles R. Pruett

Mailing Address 224 Ensworth Place

City Nashville State TN Zip Code 37205-1922

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-1219-10-1

Amount of Each Receipt this Period 125.00

B.

Full Name (Last, First, Middle Initial)
Charles R. Pruett

Mailing Address 224 Ensworth Place

City Nashville State TN Zip Code 37205-1922

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-1221-12-2

Amount of Each Receipt this Period 125.00

C.

Full Name (Last, First, Middle Initial)
John M. Qualy

Mailing Address 625 S Skinker Blvd # 1203
Apt. 1203

City Clayton State MO Zip Code 63105-2341

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

Name of Employer Qualy Nwk Of Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1161-16-1

Amount of Each Receipt this Period 208.00

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: PAGE 149 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) John M. Qualy		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 625 S Skinker Bvd # 1203 Apt. 1203		Transaction ID: 20081231-1161-10-1
City Clayton	State MO	Zip Code 63105-2341
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer Qualy Nwk Of Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) John M. Qualy		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 625 S Skinker Bvd # 1203 Apt. 1203		Transaction ID: 20090113-1163-12-2
City Clayton	State MO	Zip Code 63105-2341
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer Qualy Nwk Of Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Thomas O. Rabenn		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 9410 N Fairway Drive		Transaction ID: 20081230-1039-16-0
City Bayside	State WI	Zip Code 53217-1321
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer NML	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	426.00
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 150 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Thomas O. Rabenn

Mailing Address 9410 N Fairway Drive

City State Zip Code
Bayside WI 53217-1321

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	0	8

Transaction ID: 20081231-1039-10-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Thomas O. Rabenn

Mailing Address 9410 N Fairway Drive

City State Zip Code
Bayside WI 53217-1321

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

Transaction ID: 20090113-1040-12-0

Amount of Each Receipt this Period

10.00

C.

Full Name (Last, First, Middle Initial)
Steven M. Radke

Mailing Address 9600 N Crestwood Court

City State Zip Code
Mequon WI 53092-5355

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

Name of Employer NML Occupation VP Leg & Reg Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	0	8

Transaction ID: 20081230-837-16-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

50.00

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 151 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Steven M. Radke

Mailing Address 9600 N Crestwood Court

City State Zip Code
Mequon WI 53092-5355

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

Name of Employer NML Occupation
VP Leg & Reg Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-837-10-0

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
Steven M. Radke

Mailing Address 9600 N Crestwood Court

City State Zip Code
Mequon WI 53092-5355

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

Name of Employer NML Occupation
VP Leg & Reg Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 516.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-838-12-0

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)
Randal W. Ralph

Mailing Address 3616 Turnberry Drive

City State Zip Code
Mequon WI 53092-6307

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

Name of Employer NML Occupation
Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 408.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1071-16-0

Amount of Each Receipt this Period

17.50

SUBTOTAL of Receipts This Page (optional)

77.50

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 152 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Randal W. Ralph

Mailing Address 3616 Turnberry Drive

City State Zip Code
Mequon WI 53092-6307

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1071-10-0

Amount of Each Receipt this Period
17.50

B. Full Name (Last, First, Middle Initial)
Randal W. Ralph

Mailing Address 3616 Turnberry Drive

City State Zip Code
Mequon WI 53092-6307

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 408.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1072-12-0

Amount of Each Receipt this Period
17.50

C. Full Name (Last, First, Middle Initial)
Jeff D. Reeter

Mailing Address 7 Williamsburg Lane

City State Zip Code
Houston TX 77024-5144

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

Name of Employer Texas FncI Group L P Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1228-16-1

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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 153 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jeff D. Reeter

Mailing Address 7 Williamsburg Lane

City State Zip Code
Houston TX 77024-5144

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

Name of Employer Occupation
Texas Fncl Group L P Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1227-10-1

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
Jeff D. Reeter

Mailing Address 7 Williamsburg Lane

City State Zip Code
Houston TX 77024-5144

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

Name of Employer Occupation
Texas Fncl Group L P Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1650.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1229-12-2

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
David R. Remstad

Mailing Address 2634 N Lake Drive

City State Zip Code
Milwaukee WI 53211-3837

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

Name of Employer Occupation
NML VP Specialty Mkts

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 492.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-770-16-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

180.00

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 154 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David R. Remstad

Mailing Address 2634 N Lake Drive

City State Zip Code
Milwaukee WI 53211-3837

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation VP Specialty Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.00

Date of Receipt M M / D D / Y Y Y Y
12 / 15 / 2008

Transaction ID: 20081231-770-10-0

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
David R. Remstad

Mailing Address 2634 N Lake Drive

City State Zip Code
Milwaukee WI 53211-3837

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation VP Specialty Mkts

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 492.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: 20090113-771-12-0

Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
Peter K. Richardson

Mailing Address 720 E Green Tree Road

City State Zip Code
Fox Point WI 53217-3615

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt M M / D D / Y Y Y Y
11 / 30 / 2008

Transaction ID: 20081230-526-16-0

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) 75.00

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 155 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Peter K. Richardson

Mailing Address 720 E Green Tree Road

City State Zip Code
Fox Point WI 53217-3615

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-526-10-0

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
Peter K. Richardson

Mailing Address 720 E Green Tree Road

City State Zip Code
Fox Point WI 53217-3615

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-527-12-0

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
Daniel A. Riedl

Mailing Address 6604 Cedar Street

City State Zip Code
Wauwatosa WI 53213-3252

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

Name of Employer NML Occupation VP Dist Pol & Ops

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-684-16-0

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 50.00

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 156 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 6604 Cedar Street

City State Zip Code
Wauwatosa WI 53213-3252

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

Name of Employer NML Occupation VP Dist Pol & Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-684-10-0

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Daniel A. Riedl

Mailing Address 6604 Cedar Street

City State Zip Code
Wauwatosa WI 53213-3252

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

Name of Employer NML Occupation VP Dist Pol & Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-685-12-0

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Marcia Rimai

Mailing Address 4100 N Lake Drive

City State Zip Code
Shorewood WI 53211-1719

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

Name of Employer NML Occupation EVP & Chief Admin Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3096.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-646-16-0

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **248.00**

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 157 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Marcia Rimai

Mailing Address 4100 N Lake Drive

City State Zip Code
Shorewood WI 53211-1719

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation
EVP & Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3096.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 15 / 2008

Transaction ID: 20081231-646-10-0

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Marcia Rimai

Mailing Address 4100 N Lake Drive

City State Zip Code
Shorewood WI 53211-1719

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation
EVP & Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3096.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: 20090113-647-12-0

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
John D. Rivers

Mailing Address 3601 River Ridge Cove

City State Zip Code
Prospect KY 40059-8038

FEC ID number of contributing federal political committee. C

Name of Employer NM Louisville Inc Occupation
Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 30 / 2008

Transaction ID: 20081230-1198-16-1

Amount of Each Receipt this Period
125.00

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: PAGE 158 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John D. Rivers

Mailing Address 3601 River Ridge Cove

City State Zip Code
Prospect KY 40059-8038

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

Name of Employer Occupation
NM Louisville Inc Special Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1197-10-1

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
John D. Rivers

Mailing Address 3601 River Ridge Cove

City State Zip Code
Prospect KY 40059-8038

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

Name of Employer Occupation
NM Louisville Inc Special Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1199-12-2

Amount of Each Receipt this Period

125.00

C.

Full Name (Last, First, Middle Initial)
Bethany M. Rodenhuis

Mailing Address 3900 N Lake Drive

City State Zip Code
Shorewood WI 53211-2448

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

Name of Employer Occupation
NML VP Corp Plng

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 576.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-647-16-0

Amount of Each Receipt this Period

34.00

SUBTOTAL of Receipts This Page (optional)

284.00

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 159 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Bethany M. Rodenhuis

Mailing Address 3900 N Lake Drive

City State Zip Code
Shorewood WI 53211-2448

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

Name of Employer NML Occupation VP Corp Plng

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 576.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-647-10-0

Amount of Each Receipt this Period

34.00

B.

Full Name (Last, First, Middle Initial)
Bethany M. Rodenhuis

Mailing Address 3900 N Lake Drive

City State Zip Code
Shorewood WI 53211-2448

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

Name of Employer NML Occupation VP Corp Plng

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 576.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-648-12-0

Amount of Each Receipt this Period

34.00

C.

Full Name (Last, First, Middle Initial)
Tammy M. Roou

Mailing Address N99 W14710 Amber Drive

City State Zip Code
Germantown WI 53022

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-823-16-0

Amount of Each Receipt this Period

12.00

SUBTOTAL of Receipts This Page (optional)

80.00

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 160 / 225
	<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	

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

A.	Full Name (Last, First, Middle Initial) Tammy M. Roou		Date of Receipt
	Mailing Address N99 W14710 Amber Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Germantown	WI	53022
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081231-823-10-0
Name of Employer NML		Occupation	Amount of Each Receipt this Period
		Asst Gc & Asst Sec	<input type="text"/> 12.00
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 252.00	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Tammy M. Roou		Date of Receipt
	Mailing Address N99 W14710 Amber Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Germantown	WI	53022
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090113-824-12-0
Name of Employer NML		Occupation	Amount of Each Receipt this Period
		Asst Gc & Asst Sec	<input type="text"/> 12.00
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 252.00	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Stephen G. Ruys		Date of Receipt
	Mailing Address 2336 N 90th Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 3 0 / 2 0 0 8
	City	State	Zip Code
	Wauwatosa	WI	53226-1829
	FEC ID number of contributing federal political committee. C		Transaction ID: 20081230-834-16-0
Name of Employer NML		Occupation	Amount of Each Receipt this Period
		Dir IS	<input type="text"/> 12.50
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 282.00	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 36.50
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 161 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen G. Ruys

Mailing Address 2336 N 90th Street

City State Zip Code
Wauwatosa WI 53226-1829

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

Name of Employer NML Occupation Dir IS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-834-10-0

Amount of Each Receipt this Period

12.50

B.

Full Name (Last, First, Middle Initial)
Stephen G. Ruys

Mailing Address 2336 N 90th Street

City State Zip Code
Wauwatosa WI 53226-1829

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

Name of Employer NML Occupation Dir IS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 282.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-835-12-0

Amount of Each Receipt this Period

12.50

C.

Full Name (Last, First, Middle Initial)
R. P. Sarnecki

Mailing Address 16004 King Street

City State Zip Code
Overland Park KS 66062-7508

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

Name of Employer RPS Fncl Grp Inc Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 916.74

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1208-16-1

Amount of Each Receipt this Period

41.67

SUBTOTAL of Receipts This Page (optional)

66.67

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 162 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
R. P. Sarnecki

Mailing Address 16004 King Street

City State Zip Code
Overland Park KS 66062-7508

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

Name of Employer Occupation
RPS Fncl Grp Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 916.74

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1207-10-1

Amount of Each Receipt this Period

41.67

B.

Full Name (Last, First, Middle Initial)
R. P. Sarnecki

Mailing Address 16004 King Street

City State Zip Code
Overland Park KS 66062-7508

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

Name of Employer Occupation
RPS Fncl Grp Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 916.74

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1209-12-2

Amount of Each Receipt this Period

41.67

C.

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

Mailing Address 8 Benedek Road

City State Zip Code
Princeton NJ 08540-2227

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

Name of Employer Occupation
NML General Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 3456.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1164-16-1

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

291.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 163 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

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

Mailing Address 8 Benedek Road

City State Zip Code
Princeton NJ 08540-2227

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3456.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1164-10-1

Amount of Each Receipt this Period
208.00

B.

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

Mailing Address 8 Benedek Road

City State Zip Code
Princeton NJ 08540-2227

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3456.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1166-12-2

Amount of Each Receipt this Period
208.00

C.

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

Mailing Address 1013 E Lexington Blv

City State Zip Code
Whitefish Bay WI 53217-5381

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

Name of Employer NML Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-870-16-0

Amount of Each Receipt this Period
68.00

SUBTOTAL of Receipts This Page (optional) ► **484.00**

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 164 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 1013 E Lexington Blv

City State Zip Code
Whitefish Bay WI 53217-5381

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

Name of Employer NML Occupation Chief Information Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-870-10-0
Amount of Each Receipt this Period 68.00

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

Mailing Address 1013 E Lexington Blv

City State Zip Code
Whitefish Bay WI 53217-5381

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

Name of Employer NML Occupation Chief Information Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-871-12-0
Amount of Each Receipt this Period 68.00

C. Full Name (Last, First, Middle Initial)
Cal D. Schattschneider

Mailing Address 6598 Williamsburg Wa

City State Zip Code
Racine WI 53406

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

Name of Employer NML Occupation Dir - Nb Lg Case

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1051-16-0
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 146.00

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 165 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Cal D. Schattschneider

Mailing Address 6598 Williamsburg Wa

City State Zip Code
Racine WI 53406

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

Name of Employer NML Occupation Dir - Nb Lg Case

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1051-10-0

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Cal D. Schattschneider

Mailing Address 6598 Williamsburg Wa

City State Zip Code
Racine WI 53406

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

Name of Employer NML Occupation Dir - Nb Lg Case

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1052-12-0

Amount of Each Receipt this Period
10.00

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

Mailing Address 4711 N Woodburn Street

City State Zip Code
Whitefish Bay WI 53211-1127

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-693-16-0

Amount of Each Receipt this Period
19.00

SUBTOTAL of Receipts This Page (optional) ► 39.00

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 166 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Thomas F. Scheer

Mailing Address 4711 N Woodburn Street

City State Zip Code
Whitefish Bay WI 53211-1127

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-693-10-0

Amount of Each Receipt this Period
19.00

B.

Full Name (Last, First, Middle Initial)
Thomas F. Scheer

Mailing Address 4711 N Woodburn Street

City State Zip Code
Whitefish Bay WI 53211-1127

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-694-12-0

Amount of Each Receipt this Period
19.00

C.

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

Mailing Address 8253 N River Road

City State Zip Code
River Hills WI 53217-2546

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

Name of Employer NML Occupation EVP Affiliate Invest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4116.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-784-16-0

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► 246.00

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 167 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John E. Schlifske
Mailing Address 8253 N River Road

City State Zip Code
River Hills WI 53217-2546

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation EVP Affiliate Invest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4116.00

Date of Receipt M M / D D / Y Y Y Y
12 / 15 / 2008

Transaction ID: 20081231-784-10-0

Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
John E. Schlifske
Mailing Address 8253 N River Road

City State Zip Code
River Hills WI 53217-2546

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation EVP Affiliate Invest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4116.00

Date of Receipt M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: 20090113-785-12-0

Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Jeffrey S. Schlinsog
Mailing Address W73N412 Greystone Drive

City State Zip Code
Cedarburg WI 53012-2281

FEC ID number of contributing federal political committee. C

Name of Employer NML Occupation Senior Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt M M / D D / Y Y Y Y
11 / 30 / 2008

Transaction ID: 20081230-989-16-0

Amount of Each Receipt this Period 22.00

SUBTOTAL of Receipts This Page (optional) 438.00

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 168 / 225
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address W73N412 Greystone Drive		Transaction ID: 20081231-989-10-0
	City Cedarburg	State WI	Zip Code 53012-2281
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.00
	Name of Employer NML	Occupation Senior Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 432.00	

B.	Full Name (Last, First, Middle Initial) Jeffrey S. Schlinsog		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address W73N412 Greystone Drive		Transaction ID: 20090113-990-12-0
	City Cedarburg	State WI	Zip Code 53012-2281
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 22.00
	Name of Employer NML	Occupation Senior Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 432.00	

C.	Full Name (Last, First, Middle Initial) Kathleen H. Schluter		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 5057 N Palisades Road		Transaction ID: 20081230-786-16-0
	City Whitefish Bay	State WI	Zip Code 53217-5756
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.00
	Name of Employer NML	Occupation VP & Tax Cnsl	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 506.00	

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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 169 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Kathleen H. Schluter

Mailing Address 5057 N Palisades Road

City State Zip Code
Whitefish Bay WI 53217-5756

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

Name of Employer NML Occupation VP & Tax Cnsl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-786-10-0

Amount of Each Receipt this Period
31.00

B.

Full Name (Last, First, Middle Initial)
Kathleen H. Schluter

Mailing Address 5057 N Palisades Road

City State Zip Code
Whitefish Bay WI 53217-5756

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

Name of Employer NML Occupation VP & Tax Cnsl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 506.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-787-12-0

Amount of Each Receipt this Period
31.00

C.

Full Name (Last, First, Middle Initial)
Calvin R. Schmidt

Mailing Address W205 Allen Road

City State Zip Code
Oconomowoc WI 53066-9048

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

Name of Employer NML Occupation VP Inv Prod Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-811-16-0

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **77.00**

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 170 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Calvin R. Schmidt

Mailing Address W205 Allen Road

City Oconomowoc State WI Zip Code 53066-9048

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

Name of Employer NML Occupation VP Inv Prod Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-811-10-0

Amount of Each Receipt this Period 15.00

B.

Full Name (Last, First, Middle Initial)
Calvin R. Schmidt

Mailing Address W205 Allen Road

City Oconomowoc State WI Zip Code 53066-9048

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

Name of Employer NML Occupation VP Inv Prod Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-812-12-0

Amount of Each Receipt this Period 15.00

C.

Full Name (Last, First, Middle Initial)
Rodd Schneider

Mailing Address 1415 E Fairy Chasm R

City Bayside State WI Zip Code 53217

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

Name of Employer NML Occupation VP & Lit Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-542-16-0

Amount of Each Receipt this Period 32.00

SUBTOTAL of Receipts This Page (optional) ► 62.00

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 171 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Rodd Schneider

Mailing Address 1415 E Fairy Chasm R

City Bayside State WI Zip Code 53217

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

Name of Employer NML Occupation VP & Lit Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.00

Date of Receipt: 12 / 15 / 2008
Transaction ID: 20081231-542-10-0
 Amount of Each Receipt this Period: 32.00

B.

Full Name (Last, First, Middle Initial)
Rodd Schneider

Mailing Address 1415 E Fairy Chasm R

City Bayside State WI Zip Code 53217

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

Name of Employer NML Occupation VP & Lit Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 552.00

Date of Receipt: 12 / 31 / 2008
Transaction ID: 20090113-543-12-0
 Amount of Each Receipt this Period: 32.00

C.

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

Mailing Address 923 E Kilbourn Avenue U

City Milwaukee State WI Zip Code 53202-3493

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

Name of Employer NML Occupation Sr VP Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2928.00

Date of Receipt: 11 / 30 / 2008
Transaction ID: 20081230-1093-16-0
 Amount of Each Receipt this Period: 208.00

SUBTOTAL of Receipts This Page (optional) ► 272.00

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 172 / 225
(check only one)

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

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

A.

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

Mailing Address 923 E Kilbourn Avenue U

City Milwaukee State WI Zip Code 53202-3493

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

Name of Employer NML Occupation Sr VP Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2928.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-1093-10-0

Amount of Each Receipt this Period 208.00

B.

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

Mailing Address 923 E Kilbourn Avenue U

City Milwaukee State WI Zip Code 53202-3493

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

Name of Employer NML Occupation Sr VP Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2928.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-1094-12-0

Amount of Each Receipt this Period 208.00

C.

Full Name (Last, First, Middle Initial)
Bradley P. Seitzinger

Mailing Address 720 E Wisconsin Ave

City Milwaukee State WI Zip Code 53202-4703

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

Name of Employer Seitzinger Fncl Gp Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 924.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1211-16-1

Amount of Each Receipt this Period 42.00

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:	PAGE 173 / 225						
	(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

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

A.	Full Name (Last, First, Middle Initial) Bradley P. Seitzinger		Date of Receipt																					
	Mailing Address 720 E Wisconsin Ave		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	5		2	0	0	8														
	City State Zip Code Milwaukee WI 53202-4703		Transaction ID: 20081231-1210-10-1																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00																						
Name of Employer Occupation Seitzinger Fnc'l Gp Inc Special Agent		Aggregate Year-to-Date ▼ 924.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) Bradley P. Seitzinger		Date of Receipt																					
	Mailing Address 720 E Wisconsin Ave		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	1		2	0	0	8														
	City State Zip Code Milwaukee WI 53202-4703		Transaction ID: 20090113-1212-12-2																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00																						
Name of Employer Occupation Seitzinger Fnc'l Gp Inc Special Agent		Aggregate Year-to-Date ▼ 924.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) Catherine L. Shaw		Date of Receipt																					
	Mailing Address 7720 Rogers Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		3	0		2	0	0	8														
	City State Zip Code Wauwatosa WI 53213-1748		Transaction ID: 20081230-903-16-0																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00																						
Name of Employer Occupation NML Asst Gc & Asst Sec		Aggregate Year-to-Date ▼ 240.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	94.00
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 174 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Catherine L. Shaw

Mailing Address 7720 Rogers Avenue

City State Zip Code
Wauwatosa WI 53213-1748

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-903-10-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
Catherine L. Shaw

Mailing Address 7720 Rogers Avenue

City State Zip Code
Wauwatosa WI 53213-1748

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

Name of Employer NML Occupation
Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-904-12-0

Amount of Each Receipt this Period

10.00

C.

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

Mailing Address 311 E Erie Street Unit 4

City State Zip Code
Milwaukee WI 53202-6040

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

Name of Employer NML Occupation
VP Di & Ltc

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 552.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1084-16-0

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) ▶

50.00

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 175 / 225						
	(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

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

A.	Full Name (Last, First, Middle Initial) David W. Simbro		Date of Receipt	
	Mailing Address 311 E Erie Street Unit 4		M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 20081231-1084-10-0
	Milwaukee	WI	53202-6040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer NML		Occupation VP Di & Ltc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 552.00		

B.	Full Name (Last, First, Middle Initial) David W. Simbro		Date of Receipt	
	Mailing Address 311 E Erie Street Unit 4		M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 20090113-1085-12-0
	Milwaukee	WI	53202-6040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer NML		Occupation VP Di & Ltc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 552.00		

C.	Full Name (Last, First, Middle Initial) Paul W. Skalecki		Date of Receipt	
	Mailing Address W69N463 Fox Pointe A		M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 20081230-896-16-0
	Cedarburg	WI	53012	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer NML		Occupation VP Uw Standards		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00		

SUBTOTAL of Receipts This Page (optional)	▶	85.00
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 176 / 225
(check only one)

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

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

A.	Date of Receipt
Full Name (Last, First, Middle Initial) Paul W. Skalecki	<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
Mailing Address W69N463 Fox Pointe A	Transaction ID: 20081231-896-10-0
City State Zip Code Cedarburg WI 53012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="25.00"/>
Name of Employer NML Occupation VP Uw Standards	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="360.00"/>

B.	Date of Receipt
Full Name (Last, First, Middle Initial) Paul W. Skalecki	<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
Mailing Address W69N463 Fox Pointe A	Transaction ID: 20090113-897-12-0
City State Zip Code Cedarburg WI 53012	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="25.00"/>
Name of Employer NML Occupation VP Uw Standards	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="360.00"/>

C.	Date of Receipt
Full Name (Last, First, Middle Initial) Mark W. Smith	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
Mailing Address 614 Park Crest Drive	Transaction ID: 20081230-898-16-0
City State Zip Code Thiensville WI 53092-1423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	<input type="text" value="22.00"/>
Name of Employer NML Occupation Asst Gc & Asst Sec	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼
	<input type="text" value="432.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="72.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 177 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Mark W. Smith

Mailing Address 614 Park Crest Drive

City Thiensville State WI Zip Code 53092-1423

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-898-10-0

Amount of Each Receipt this Period 22.00

B.

Full Name (Last, First, Middle Initial)
Mark W. Smith

Mailing Address 614 Park Crest Drive

City Thiensville State WI Zip Code 53092-1423

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-899-12-0

Amount of Each Receipt this Period 22.00

C.

Full Name (Last, First, Middle Initial)
Richard P. Snyder

Mailing Address 909 Fairview Avenue

City South Milwaukee State WI Zip Code 53172-1719

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

Name of Employer NML Occupation Dir Distribution Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-667-16-0

Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional) ► 56.00

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 178 / 225
(check only one)

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

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

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

A.	Full Name (Last, First, Middle Initial) Richard P. Snyder		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 909 Fairview Avenue		Transaction ID: 20081231-667-10-0		
	City South Milwaukee	State WI	Zip Code 53172-1719	Amount of Each Receipt this Period 12.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Dir Distribution PIng			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.00			

B.	Full Name (Last, First, Middle Initial) Richard P. Snyder		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 909 Fairview Avenue		Transaction ID: 20090113-668-12-0		
	City South Milwaukee	State WI	Zip Code 53172-1719	Amount of Each Receipt this Period 12.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Dir Distribution PIng			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 276.00			

C.	Full Name (Last, First, Middle Initial) Steve P. Sperka		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address S68W18088 Island Drive		Transaction ID: 20081230-815-16-0		
	City Muskego	State WI	Zip Code 53150-9090	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Dir Di Ben			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 324.00			

SUBTOTAL of Receipts This Page (optional)	▶	39.00
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 179 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Steve P. Sperka

Mailing Address S68W18088 Island Drive

City State Zip Code
Muskego WI 53150-9090

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

Name of Employer NML Occupation Dir Di Ben

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-815-10-0

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Steve P. Sperka

Mailing Address S68W18088 Island Drive

City State Zip Code
Muskego WI 53150-9090

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

Name of Employer NML Occupation Dir Di Ben

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-816-12-0

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Robert L. Spinks

Mailing Address 305 Waterbury Cove

City State Zip Code
Jackson MS 39232-8692

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1171-16-1

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

55.00

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 180 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Robert L. Spinks
Mailing Address 305 Waterbury Cove
City Jackson State MS Zip Code 39232-8692
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1171-10-1
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Robert L. Spinks
Mailing Address 305 Waterbury Cove
City Jackson State MS Zip Code 39232-8692
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation General Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1173-12-2
Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Thomas Spragg
Mailing Address 1617 S Barton Street
City Arlington State VA Zip Code 22204-4855
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-853-16-0
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 60.00
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 181 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Thomas Spragg
Mailing Address 1617 S Barton Street
City Arlington State VA Zip Code 22204-4855
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-853-10-0
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Thomas Spragg
Mailing Address 1617 S Barton Street
City Arlington State VA Zip Code 22204-4855
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-854-12-0
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Paul J. Steffen
Mailing Address 10502 N Stone Creek
City Mequon State WI Zip Code 53092-5463
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Agencies
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-543-16-0
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 70.00
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 182 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Paul J. Steffen

Mailing Address 10502 N Stone Creek

City State Zip Code
Mequon WI 53092-5463

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

Name of Employer NML Occupation VP Agencies

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-543-10-0

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Paul J. Steffen

Mailing Address 10502 N Stone Creek

City State Zip Code
Mequon WI 53092-5463

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

Name of Employer NML Occupation VP Agencies

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-544-12-0

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Jason Steigman

Mailing Address 2301 E Newton Avenue

City State Zip Code
Shorewood WI 53211-2617

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-627-16-0

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **125.00**

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 183 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jason Steigman

Mailing Address 2301 E Newton Avenue

City State Zip Code
Shorewood WI 53211-2617

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

Name of Employer NML Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-627-10-0

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Jason Steigman

Mailing Address 2301 E Newton Avenue

City State Zip Code
Shorewood WI 53211-2617

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

Name of Employer NML Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-628-12-0

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
David G. Stoeffel

Mailing Address 6311 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-4343

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

Name of Employer NML Occupation VP Invest Prod Ln

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-899-16-0

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► **77.00**

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 184 / 225
(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

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

A.

Full Name (Last, First, Middle Initial)
David G. Stoeffel

Mailing Address 6311 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-4343

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

Name of Employer NML Occupation VP Invest Prod Ln

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-899-10-0

Amount of Each Receipt this Period
27.00

B.

Full Name (Last, First, Middle Initial)
David G. Stoeffel

Mailing Address 6311 N Lake Drive

City State Zip Code
Whitefish Bay WI 53217-4343

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

Name of Employer NML Occupation VP Invest Prod Ln

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 324.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-900-12-0

Amount of Each Receipt this Period
27.00

C.

Full Name (Last, First, Middle Initial)
Stephen R. Stone

Mailing Address N58 W24851 Cardinal

City State Zip Code
Sussex WI 53089

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

Name of Employer NML Occupation Dir Inv Acctg

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-691-16-0

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► 72.00

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 185 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen R. Stone

Mailing Address N58 W24851 Cardinal

City State Zip Code
Sussex WI 53089

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

Name of Employer NML Occupation Dir Inv Acctg

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-691-10-0

Amount of Each Receipt this Period

18.00

B.

Full Name (Last, First, Middle Initial)
Stephen R. Stone

Mailing Address N58 W24851 Cardinal

City State Zip Code
Sussex WI 53089

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

Name of Employer NML Occupation Dir Inv Acctg

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 348.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-692-12-0

Amount of Each Receipt this Period

18.00

C.

Full Name (Last, First, Middle Initial)
Richard A. Strait

Mailing Address 9086 N Tennyson Drive

City State Zip Code
Bayside WI 53217-1967

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1081-16-0

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

56.00

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 186 / 225
	<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	

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

A.	Full Name (Last, First, Middle Initial) Richard A. Strait	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 9086 N Tennyson Drive	Transaction ID: 20081231-1081-10-0
	City State Zip Code Bayside WI 53217-1967	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00	

B.	Full Name (Last, First, Middle Initial) Richard A. Strait	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 9086 N Tennyson Drive	Transaction ID: 20090113-1082-12-0
	City State Zip Code Bayside WI 53217-1967	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 480.00	

C.	Full Name (Last, First, Middle Initial) Steven J. Stribling	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 11830 W Whitaker Avenue	Transaction ID: 20081230-1096-16-0
	City State Zip Code Greenfield WI 53228-2455	Amount of Each Receipt this Period 13.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Sr Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00	

SUBTOTAL of Receipts This Page (optional)	53.00
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 187 / 225
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Steven J. Stribling		Date of Receipt MM / DD / YYYY 12 / 15 / 2008		
	Mailing Address 11830 W Whitaker Avenue		Transaction ID: 20081231-1096-10-0		
	City Greenfield	State WI	Zip Code 53228-2455	Amount of Each Receipt this Period 13.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Sr Actuary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.00			

B.	Full Name (Last, First, Middle Initial) Steven J. Stribling		Date of Receipt MM / DD / YYYY 12 / 31 / 2008		
	Mailing Address 11830 W Whitaker Avenue		Transaction ID: 20090113-1097-12-0		
	City Greenfield	State WI	Zip Code 53228-2455	Amount of Each Receipt this Period 13.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Sr Actuary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 312.00			

C.	Full Name (Last, First, Middle Initial) Stephen J. Strommen		Date of Receipt MM / DD / YYYY 11 / 30 / 2008		
	Mailing Address 7410 N Range Line Road		Transaction ID: 20081230-785-16-0		
	City Glendale	State WI	Zip Code 53209-2028	Amount of Each Receipt this Period 15.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Sr Actuary			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 324.00			

SUBTOTAL of Receipts This Page (optional)	▶	41.00
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 188 / 225
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen J. Strommen

Mailing Address 7410 N Range Line Road

City State Zip Code
Glendale WI 53209-2028

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

Name of Employer NML Occupation Sr Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-785-10-0

Amount of Each Receipt this Period

15.00

B.

Full Name (Last, First, Middle Initial)
Stephen J. Strommen

Mailing Address 7410 N Range Line Road

City State Zip Code
Glendale WI 53209-2028

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

Name of Employer NML Occupation Sr Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 324.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-786-12-0

Amount of Each Receipt this Period

15.00

C.

Full Name (Last, First, Middle Initial)
Daphne C. Stroud

Mailing Address 150 Fernwood Drive

City State Zip Code
East Greenwich RI 02818-1616

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

Name of Employer Southern NE Group LLC Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1224-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional) ▶

72.00

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 189 / 225

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)

Daphne C. Stroud

Mailing Address 150 Fernwood Drive

City State Zip Code
East Greenwich RI 02818-1616

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

Name of Employer Occupation
Southern NE Group LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1223-10-1

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Daphne C. Stroud

Mailing Address 150 Fernwood Drive

City State Zip Code
East Greenwich RI 02818-1616

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

Name of Employer Occupation
Southern NE Group LLC Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1225-12-2

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Christopher P. Swain

Mailing Address 10927 N Wyngate Trail

City State Zip Code
Mequon WI 53092-5862

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

Name of Employer Occupation
NML Managing Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.08

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-849-16-0

Amount of Each Receipt this Period

10.42

SUBTOTAL of Receipts This Page (optional)

94.42

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 190 / 225						
	(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

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

A.	Full Name (Last, First, Middle Initial) Christopher P. Swain		Date of Receipt
	Mailing Address 10927 N Wyngate Trail		<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Meguon	WI	53092-5862
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation Managing Director	Transaction ID: 20081231-849-10-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.08"/>	<input type="text" value="10.42"/>

B.	Full Name (Last, First, Middle Initial) Christopher P. Swain		Date of Receipt
	Mailing Address 10927 N Wyngate Trail		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Meguon	WI	53092-5862
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation Managing Director	Transaction ID: 20090113-850-12-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.08"/>	<input type="text" value="10.42"/>

C.	Full Name (Last, First, Middle Initial) Rachel L. Taknint		Date of Receipt
	Mailing Address 4733 N Cumberland Bl		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Whitefish Bay	WI	53211-1140
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation VP PI & Opn & Assc Gc	Transaction ID: 20081230-842-16-0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="336.00"/>	<input type="text" value="28.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="48.84"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 191 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Rachel L. Tahnint

Mailing Address 4733 N Cumberland Bl

City State Zip Code
Whitefish Bay WI 53211-1140

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

Name of Employer NML Occupation
VP PI & Opn & Assc Gc

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-842-10-0

Amount of Each Receipt this Period

28.00

B.

Full Name (Last, First, Middle Initial)
Rachel L. Tahnint

Mailing Address 4733 N Cumberland Bl

City State Zip Code
Whitefish Bay WI 53211-1140

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

Name of Employer NML Occupation
VP PI & Opn & Assc Gc

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-843-12-0

Amount of Each Receipt this Period

28.00

C.

Full Name (Last, First, Middle Initial)
Thomas Talajkowski

Mailing Address 1550 East Cumberland

City State Zip Code
Whitefish Bay WI 53211-1141

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

Name of Employer NML Occupation
Asst Dir Tax

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-880-16-0

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

66.00

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 192 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Thomas Talajkowski

Mailing Address 1550 East Cumberland

City State Zip Code
Whitefish Bay WI 53211-1141

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

Name of Employer NML Occupation Asst Dir Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-880-10-0

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Thomas Talajkowski

Mailing Address 1550 East Cumberland

City State Zip Code
Whitefish Bay WI 53211-1141

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

Name of Employer NML Occupation Asst Dir Tax

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-881-12-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Joe P. Teague

Mailing Address 2613 N Dundee St

City State Zip Code
Tampa FL 33629-7516

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

Name of Employer Teague Fncl Group Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1680.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-1174-16-1

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 193 / 225

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Joe P. Teague

Mailing Address 2613 N Dundee St

City State Zip Code
Tampa FL 33629-7516

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

Name of Employer Occupation
Teague Fncl Group Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1680.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 15 / 2008

Transaction ID: 20081231-1174-10-1

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Joe P. Teague

Mailing Address 2613 N Dundee St

City State Zip Code
Tampa FL 33629-7516

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

Name of Employer Occupation
Teague Fncl Group Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1680.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 31 / 2008

Transaction ID: 20090113-1176-12-2

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)

Michael F. Tews

Mailing Address 609 S 249th Circle

City State Zip Code
Waterloo NE 68069-4432

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

Name of Employer Occupation
Tews Fncl Group Inc Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 30 / 2008

Transaction ID: 20081230-1195-16-1

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

182.00

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 194 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael F. Tews
Mailing Address 609 S 249th Circle
City Waterloo State NE Zip Code 68069-4432
FEC ID number of contributing federal political committee. **C**
Name of Employer Tews Fncl Group Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1194-10-1
Amount of Each Receipt this Period 42.00

B. Full Name (Last, First, Middle Initial)
Michael F. Tews
Mailing Address 609 S 249th Circle
City Waterloo State NE Zip Code 68069-4432
FEC ID number of contributing federal political committee. **C**
Name of Employer Tews Fncl Group Inc Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1196-12-2
Amount of Each Receipt this Period 42.00

C. Full Name (Last, First, Middle Initial)
Scott P. Theodore
Mailing Address 12505 Ventana Mesa Circle
City Castle Rock State CO Zip Code 80108-9148
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Special Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3396.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1204-16-1
Amount of Each Receipt this Period 208.00

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

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

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

FOR LINE NUMBER: PAGE 195 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 12505 Ventana Mesa Circle

City State Zip Code
Castle Rock CO 80108-9148

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3396.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1203-10-1

Amount of Each Receipt this Period
208.00

B. Full Name (Last, First, Middle Initial)
Scott P. Theodore

Mailing Address 12505 Ventana Mesa Circle

City State Zip Code
Castle Rock CO 80108-9148

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3396.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1205-12-2

Amount of Each Receipt this Period
208.00

C. Full Name (Last, First, Middle Initial)
Douglas D. Timmer

Mailing Address 633 W McIntosh Lane

City State Zip Code
Mequon WI 53092-6022

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

Name of Employer NML Occupation Asst Gc & Asst Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-967-16-0

Amount of Each Receipt this Period
17.00

SUBTOTAL of Receipts This Page (optional) ▶ **433.00**

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 196 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Douglas D. Timmer
Mailing Address 633 W McIntosh Lane
City State Zip Code
Mequon WI 53092-6022
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Asst Gc & Asst Sec
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-967-10-0
Amount of Each Receipt this Period 17.00

B. Full Name (Last, First, Middle Initial)
Douglas D. Timmer
Mailing Address 633 W McIntosh Lane
City State Zip Code
Mequon WI 53092-6022
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Asst Gc & Asst Sec
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 264.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-968-12-0
Amount of Each Receipt this Period 17.00

C. Full Name (Last, First, Middle Initial)
Chris G. Trost
Mailing Address 1218 E Olive Street
City State Zip Code
Shorewood WI 53211-1825
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Sr Actuary
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 288.00
Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-626-16-0
Amount of Each Receipt this Period 12.00

SUBTOTAL of Receipts This Page (optional) ► 46.00
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 197 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Chris G. Trost

Mailing Address 1218 E Olive Street

City Shorewood State WI Zip Code 53211-1825

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

Name of Employer NML Occupation Sr Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-626-10-0

Amount of Each Receipt this Period 12.00

B.

Full Name (Last, First, Middle Initial)
Chris G. Trost

Mailing Address 1218 E Olive Street

City Shorewood State WI Zip Code 53211-1825

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

Name of Employer NML Occupation Sr Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-627-12-0

Amount of Each Receipt this Period 12.00

C.

Full Name (Last, First, Middle Initial)
Leo C. Tucker

Mailing Address 605 Potomac River Rd

City Mc Lean State VA Zip Code 22102-1402

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

Name of Employer NML Occupation General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1218-16-1

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 99.00

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 198 / 225
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Leo C. Tucker

Mailing Address 605 Potomac River Rd

City State Zip Code
Mc Lean VA 22102-1402

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-1217-10-1

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Leo C. Tucker

Mailing Address 605 Potomac River Rd

City State Zip Code
Mc Lean VA 22102-1402

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-1219-12-2

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Bruce K. Twomey

Mailing Address 1035B Oakwood Lane

City State Zip Code
Brookfield WI 53045-2828

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

Name of Employer NML Occupation Dir Tech Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-537-16-0

Amount of Each Receipt this Period
13.00

SUBTOTAL of Receipts This Page (optional) ► **163.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 199 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Bruce K. Twomey

Mailing Address 1035B Oakwood Lane

City State Zip Code
Brookfield WI 53045-2828

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

Name of Employer NML Occupation Dir Tech Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-537-10-0

Amount of Each Receipt this Period
13.00

B.

Full Name (Last, First, Middle Initial)
Bruce K. Twomey

Mailing Address 1035B Oakwood Lane

City State Zip Code
Brookfield WI 53045-2828

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

Name of Employer NML Occupation Dir Tech Svcs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-538-12-0

Amount of Each Receipt this Period
13.00

C.

Full Name (Last, First, Middle Initial)
Donald G. Tyler

Mailing Address 4480 N Maryland

City State Zip Code
Shorewood WI 53211-1651

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

Name of Employer NML Occupation VP Ips Prod & Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1078-16-0

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional) ► **96.00**

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 200 / 225

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Donald G. Tyler

Mailing Address 4480 N Maryland

City State Zip Code
Shorewood WI 53211-1651

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Ips Prod & Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1078-10-0

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)
Donald G. Tyler

Mailing Address 4480 N Maryland

City State Zip Code
Shorewood WI 53211-1651

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Ips Prod & Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1079-12-0

Amount of Each Receipt this Period

70.00

C.

Full Name (Last, First, Middle Initial)
Martha M. Valerio

Mailing Address 6048 N Lydell

City State Zip Code
Whitefish Bay WI 53217-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP & Chief Info Security Ofcr

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 432.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-652-16-0

Amount of Each Receipt this Period

24.00

SUBTOTAL of Receipts This Page (optional)

164.00

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 201 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Martha M. Valerio

Mailing Address 6048 N Lydell

City State Zip Code
Whitefish Bay WI 53217-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP & Chief Info Security Ofcr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-652-10-0
Amount of Each Receipt this Period 24.00

B. Full Name (Last, First, Middle Initial)
Martha M. Valerio

Mailing Address 6048 N Lydell

City State Zip Code
Whitefish Bay WI 53217-4522

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP & Chief Info Security Ofcr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-653-12-0
Amount of Each Receipt this Period 24.00

C. Full Name (Last, First, Middle Initial)
Patricia L. Van Kampen

Mailing Address 4520 N Lake Drive

City State Zip Code
Whitefish Bay WI 53211-1252

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Public Equities

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1212.00

Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-635-16-0
Amount of Each Receipt this Period 66.00

SUBTOTAL of Receipts This Page (optional) ► 114.00

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 202 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Patricia L. Van Kampen
Mailing Address 4520 N Lake Drive
City State Zip Code
Whitefish Bay WI 53211-1252
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Public Equities
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1212.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-635-10-0
Amount of Each Receipt this Period 66.00

B. Full Name (Last, First, Middle Initial)
Patricia L. Van Kampen
Mailing Address 4520 N Lake Drive
City State Zip Code
Whitefish Bay WI 53211-1252
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Public Equities
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1212.00
Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-636-12-0
Amount of Each Receipt this Period 66.00

C. Full Name (Last, First, Middle Initial)
Janine L. Wagner
Mailing Address 6565 N Green Bay Road
City State Zip Code
Glendale WI 53209-3471
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director IS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 216.00
Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-830-10-0
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ► 142.00
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 203 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Janine L. Wagner

Mailing Address 6565 N Green Bay Road

City State Zip Code
Glendale WI 53209-3471

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Director IS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-831-12-0

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Robert J. Waltos

Mailing Address 7 Castaways N

City State Zip Code
Newport Beach CA 92660-8403

FEC ID number of contributing federal political committee. **C**

Name of Employer RJ Waltos Ins Ser Inc Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1187-16-1

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Robert J. Waltos

Mailing Address 7 Castaways N

City State Zip Code
Newport Beach CA 92660-8403

FEC ID number of contributing federal political committee. **C**

Name of Employer RJ Waltos Ins Ser Inc Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1186-10-1

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 204 / 225
(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

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Robert J. Waltos

Mailing Address 7 Castaways N

City State Zip Code
Newport Beach CA 92660-8403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RJ Waltos Ins Ser Inc Special Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1188-12-2

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Gregory J. Walz

Mailing Address 3166 Wicks Creek Tra

City State Zip Code
Marietta GA 30062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NML Regional Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1030-16-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Gregory J. Walz

Mailing Address 3166 Wicks Creek Tra

City State Zip Code
Marietta GA 30062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NML Regional Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1030-10-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **95.00**

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 205 / 225

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Gregory J. Walz

Mailing Address 3166 Wicks Creek Tra

City State Zip Code
Marietta GA 30062

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
Regional Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1031-12-0

Amount of Each Receipt this Period

10.00

B.

Full Name (Last, First, Middle Initial)
P. Andrew Ware

Mailing Address 7900 N Berwyn Avenue

City State Zip Code
Glendale WI 53209-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-523-16-0

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
P. Andrew Ware

Mailing Address 7900 N Berwyn Avenue

City State Zip Code
Glendale WI 53209-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-523-10-0

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

60.00

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 206 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
P. Andrew Ware

Mailing Address 7900 N Berwyn Avenue

City State Zip Code
Glendale WI 53209-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-524-12-0

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Andrew T. Wassweiler

Mailing Address 6746 River Terrace D

City State Zip Code
Franklin WI 53132

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-819-16-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Andrew T. Wassweiler

Mailing Address 6746 River Terrace D

City State Zip Code
Franklin WI 53132

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-819-10-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 45.00

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 207 / 225
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) Andrew T. Wassweiler		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 6746 River Terrace D		Transaction ID: 20090113-820-12-0
City Franklin	State WI	Zip Code 53132
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer NML	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.

Full Name (Last, First, Middle Initial) Alison Watson		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 629 Constitution Ave NE Apt 105		Transaction ID: 20090113-1063-12-0
City Washington	State DC	Zip Code 20002-6086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NML	Occupation Director of Fed Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Robert J. Welsh		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address S68 W17598 Marybeck		Transaction ID: 20090113-959-12-0
City Muskego	State WI	Zip Code 53150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer NML	Occupation Dir EE Comp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

SUBTOTAL of Receipts This Page (optional)	70.00
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 208 / 225
(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

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Jeffrey B. Williams

Mailing Address 2004 N 72nd Street

City State Zip Code
Wauwatosa WI 53213-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Corp Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-590-16-0

Amount of Each Receipt this Period
27.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey B. Williams

Mailing Address 2004 N 72nd Street

City State Zip Code
Wauwatosa WI 53213-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Corp Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-590-10-0

Amount of Each Receipt this Period
27.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey B. Williams

Mailing Address 2004 N 72nd Street

City State Zip Code
Wauwatosa WI 53213-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Corp Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-591-12-0

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ► 81.00

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 209 / 225
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

<p>A. Full Name (Last, First, Middle Initial) John A. Williamson</p> <p>Mailing Address 608 Euclid Avenue</p> <p>City State Zip Code Birmingham AL 35213-2518</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NM Fncl Nwk Of AL Inc Special Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 4238.00</p>	<p>Date of Receipt 11 / 30 / 2008</p> <p>Transaction ID: 20081230-1170-16-1</p> <p>Amount of Each Receipt this Period 208.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) John A. Williamson</p> <p>Mailing Address 608 Euclid Avenue</p> <p>City State Zip Code Birmingham AL 35213-2518</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NM Fncl Nwk Of AL Inc Special Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 4238.00</p>	<p>Date of Receipt 12 / 15 / 2008</p> <p>Transaction ID: 20081231-1170-10-1</p> <p>Amount of Each Receipt this Period 208.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) John A. Williamson</p> <p>Mailing Address 608 Euclid Avenue</p> <p>City State Zip Code Birmingham AL 35213-2518</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation NM Fncl Nwk Of AL Inc Special Agent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 4238.00</p>	<p>Date of Receipt 12 / 31 / 2008</p> <p>Transaction ID: 20090113-1172-12-2</p> <p>Amount of Each Receipt this Period 208.00</p>
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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 210 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) Brian D. Wilson		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 6203 N Bay Ridge Avenue		Transaction ID: 20081230-1101-16-0
City Whitefish Bay	State WI	Zip Code 53217-4328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer NML	Occupation Dir Ips Mkt & Sls	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

B.

Full Name (Last, First, Middle Initial) Brian D. Wilson		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 6203 N Bay Ridge Avenue		Transaction ID: 20081231-1101-10-0
City Whitefish Bay	State WI	Zip Code 53217-4328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer NML	Occupation Dir Ips Mkt & Sls	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

C.

Full Name (Last, First, Middle Initial) Brian D. Wilson		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 6203 N Bay Ridge Avenue		Transaction ID: 20090113-1103-12-0
City Whitefish Bay	State WI	Zip Code 53217-4328
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.00
Name of Employer NML	Occupation Dir Ips Mkt & Sls	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

SUBTOTAL of Receipts This Page (optional)	▶	33.00
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 211 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) James R. Worrell		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 2218 Hopedale Avenue		Transaction ID: 20081230-1163-16-1
City Charlotte	State NC	Zip Code 28207-2130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Worrell Gen Agt Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

B.

Full Name (Last, First, Middle Initial) James R. Worrell		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 2218 Hopedale Avenue		Transaction ID: 20081231-1163-10-1
City Charlotte	State NC	Zip Code 28207-2130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Worrell Gen Agt Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

C.

Full Name (Last, First, Middle Initial) James R. Worrell		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 2218 Hopedale Avenue		Transaction ID: 20090113-1165-12-2
City Charlotte	State NC	Zip Code 28207-2130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Worrell Gen Agt Inc	Occupation Special Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 212 / 225
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
John W. Wright

Mailing Address 4463 Jett Road Northwest

City Atlanta State GA Zip Code 30327-3563

FEC ID number of contributing federal political committee. **C**

Name of Employer Goodwin Wright Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.48

Date of Receipt 11 / 30 / 2008

Transaction ID: 20081230-1210-16-1

Amount of Each Receipt this Period 20.84

B.

Full Name (Last, First, Middle Initial)
John W. Wright

Mailing Address 4463 Jett Road Northwest

City Atlanta State GA Zip Code 30327-3563

FEC ID number of contributing federal political committee. **C**

Name of Employer Goodwin Wright Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.48

Date of Receipt 12 / 15 / 2008

Transaction ID: 20081231-1209-10-1

Amount of Each Receipt this Period 20.84

C.

Full Name (Last, First, Middle Initial)
John W. Wright

Mailing Address 4463 Jett Road Northwest

City Atlanta State GA Zip Code 30327-3563

FEC ID number of contributing federal political committee. **C**

Name of Employer Goodwin Wright Inc Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 458.48

Date of Receipt 12 / 31 / 2008

Transaction ID: 20090113-1211-12-2

Amount of Each Receipt this Period 20.84

SUBTOTAL of Receipts This Page (optional) ► 62.52

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 213 / 225
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Conrad C. York

Mailing Address 522 Heather Lane

City State Zip Code
Wales WI 53183-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 828.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-790-16-0

Amount of Each Receipt this Period

55.00

B.

Full Name (Last, First, Middle Initial)
Conrad C. York

Mailing Address 522 Heather Lane

City State Zip Code
Wales WI 53183-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 828.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-790-10-0

Amount of Each Receipt this Period

55.00

C.

Full Name (Last, First, Middle Initial)
Conrad C. York

Mailing Address 522 Heather Lane

City State Zip Code
Wales WI 53183-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
VP Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 828.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-791-12-0

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 225
(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)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Catherine M. Young
 Mailing Address 929 N Astor Street Unit
 City Milwaukee State WI Zip Code 53202-7000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Asst Gc & Asst Sec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00
 Date of Receipt 11 / 30 / 2008
Transaction ID: 20081230-1118-16-0
 Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Catherine M. Young
 Mailing Address 929 N Astor Street Unit
 City Milwaukee State WI Zip Code 53202-7000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Asst Gc & Asst Sec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00
 Date of Receipt 12 / 15 / 2008
Transaction ID: 20081231-1118-10-0
 Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Catherine M. Young
 Mailing Address 929 N Astor Street Unit
 City Milwaukee State WI Zip Code 53202-7000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation Asst Gc & Asst Sec
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 312.00
 Date of Receipt 12 / 31 / 2008
Transaction ID: 20090113-1120-12-0
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 45.00
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 215 / 225

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
John E. Young

Mailing Address 6728 Maple Terrace

City	State	Zip Code
Wauwatosa	WI	53213-3259

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation Dir Offshore Rel
-------------------------	--------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-918-16-0

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
John E. Young

Mailing Address 6728 Maple Terrace

City	State	Zip Code
Wauwatosa	WI	53213-3259

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation Dir Offshore Rel
-------------------------	--------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-918-10-0

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
John E. Young

Mailing Address 6728 Maple Terrace

City	State	Zip Code
Wauwatosa	WI	53213-3259

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation Dir Offshore Rel
-------------------------	--------------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-919-12-0

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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 216 / 225

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Michael L. Youngman

Mailing Address 716 E Sylvan Avenue

City	State	Zip Code
Whitefish Bay	WI	53217-5350

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Govt Rel
-------------------------	---------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-979-16-0

Amount of Each Receipt this Period
56.00

B.

Full Name (Last, First, Middle Initial)
Michael L. Youngman

Mailing Address 716 E Sylvan Avenue

City	State	Zip Code
Whitefish Bay	WI	53217-5350

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Govt Rel
-------------------------	---------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-979-10-0

Amount of Each Receipt this Period
56.00

C.

Full Name (Last, First, Middle Initial)
Michael L. Youngman

Mailing Address 716 E Sylvan Avenue

City	State	Zip Code
Whitefish Bay	WI	53217-5350

FEC ID number of contributing federal political committee. **C**

Name of Employer NML	Occupation VP Govt Rel
-------------------------	---------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1344.00
---	-------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-980-12-0

Amount of Each Receipt this Period
56.00

SUBTOTAL of Receipts This Page (optional) ▶

168.00

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 217 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
T. Scott Zach

Mailing Address 6630 County Creek Lane

City State Zip Code
Cedar Rapids IA 52403-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 20081230-1222-16-1

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
T. Scott Zach

Mailing Address 6630 County Creek Lane

City State Zip Code
Cedar Rapids IA 52403-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 8

Transaction ID: 20081231-1221-10-1

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)
T. Scott Zach

Mailing Address 6630 County Creek Lane

City State Zip Code
Cedar Rapids IA 52403-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation
General Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1008.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 20090113-1223-12-2

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

126.00

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 218 / 225		
	<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

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.	Full Name (Last, First, Middle Initial) Thomas D. Zale	Date of Receipt MM / DD / YYYY 11 / 30 / 2008
	Mailing Address 2818 E Menlo Boulevard	Transaction ID: 20081230-816-16-0
	City State Zip Code Shorewood WI 53211-2652	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1080.00	

B.	Full Name (Last, First, Middle Initial) Thomas D. Zale	Date of Receipt MM / DD / YYYY 12 / 15 / 2008
	Mailing Address 2818 E Menlo Boulevard	Transaction ID: 20081231-816-10-0
	City State Zip Code Shorewood WI 53211-2652	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1080.00	

C.	Full Name (Last, First, Middle Initial) Thomas D. Zale	Date of Receipt MM / DD / YYYY 12 / 31 / 2008
	Mailing Address 2818 E Menlo Boulevard	Transaction ID: 20090113-817-12-0
	City State Zip Code Shorewood WI 53211-2652	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1080.00	

SUBTOTAL of Receipts This Page (optional)	150.00
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 219 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
Diana M. Zawada

Mailing Address N1 W311143 Wildwood

City State Zip Code
Delafield WI 53018

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Exp Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-792-16-0

Amount of Each Receipt this Period 19.00

B.

Full Name (Last, First, Middle Initial)
Diana M. Zawada

Mailing Address N1 W311143 Wildwood

City State Zip Code
Delafield WI 53018

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Exp Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-792-10-0

Amount of Each Receipt this Period 19.00

C.

Full Name (Last, First, Middle Initial)
Diana M. Zawada

Mailing Address N1 W311143 Wildwood

City State Zip Code
Delafield WI 53018

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Exp Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 372.00

Date of Receipt MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-793-12-0

Amount of Each Receipt this Period 19.00

SUBTOTAL of Receipts This Page (optional) ► 57.00

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 220 / 225
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Rick T. Zehner

Mailing Address 203 W Ravine Baye

City State Zip Code
Bayside WI 53217-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Dist Strat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt
MM / DD / YYYY
11 / 30 / 2008

Transaction ID: 20081230-996-16-0

Amount of Each Receipt this Period
44.00

B. Full Name (Last, First, Middle Initial)
Rick T. Zehner

Mailing Address 203 W Ravine Baye

City State Zip Code
Bayside WI 53217-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Dist Strat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt
MM / DD / YYYY
12 / 15 / 2008

Transaction ID: 20081231-996-10-0

Amount of Each Receipt this Period
44.00

C. Full Name (Last, First, Middle Initial)
Rick T. Zehner

Mailing Address 203 W Ravine Baye

City State Zip Code
Bayside WI 53217-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation VP Dist Strat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 756.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2008

Transaction ID: 20090113-997-12-0

Amount of Each Receipt this Period
44.00

SUBTOTAL of Receipts This Page (optional) ► **132.00**

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 221 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial)
Todd O. Zinkgraf

Mailing Address 118 Ferris Drive

City North Prairie State WI Zip Code 53153-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Annuity Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 11 / 30 / 2008
Transaction ID: 20081230-1018-16-0
 Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Todd O. Zinkgraf

Mailing Address 118 Ferris Drive

City North Prairie State WI Zip Code 53153-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Annuity Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 15 / 2008
Transaction ID: 20081231-1018-10-0
 Amount of Each Receipt this Period: 10.00

C. Full Name (Last, First, Middle Initial)
Todd O. Zinkgraf

Mailing Address 118 Ferris Drive

City North Prairie State WI Zip Code 53153-9455

FEC ID number of contributing federal political committee. **C**

Name of Employer NML Occupation Dir Annuity Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 12 / 31 / 2008
Transaction ID: 20090113-1019-12-0
 Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ► 30.00

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 222 / 225
(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

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) Edward J. Zore		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 2505 W Dean Road		Transaction ID: 20081230-1025-16-0
City River Hills	State WI	Zip Code 53217-2010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

B.

Full Name (Last, First, Middle Initial) Edward J. Zore		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 2505 W Dean Road		Transaction ID: 20081231-1025-10-0
City River Hills	State WI	Zip Code 53217-2010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

C.

Full Name (Last, First, Middle Initial) Edward J. Zore		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 2505 W Dean Road		Transaction ID: 20090113-1026-12-0
City River Hills	State WI	Zip Code 53217-2010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00	

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 223 / 225
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial) Jeffrey Zuzolo		Date of Receipt MM / DD / YYYY 11 / 30 / 2008
Mailing Address 104 Wildwood Drive		Transaction ID: 20081230-1186-16-1
City Avon	State CT	Zip Code 06001-4413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2497.05	

B.

Full Name (Last, First, Middle Initial) Jeffrey Zuzolo		Date of Receipt MM / DD / YYYY 12 / 15 / 2008
Mailing Address 104 Wildwood Drive		Transaction ID: 20081231-1185-10-1
City Avon	State CT	Zip Code 06001-4413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2497.05	

C.

Full Name (Last, First, Middle Initial) Jeffrey Zuzolo		Date of Receipt MM / DD / YYYY 12 / 31 / 2008
Mailing Address 104 Wildwood Drive		Transaction ID: 20090113-1187-12-2
City Avon	State CT	Zip Code 06001-4413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer NML	Occupation General Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2497.05	

SUBTOTAL of Receipts This Page (optional)	624.00
TOTAL This Period (last page this line number only)	37435.29

**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)

PAGE 224 / 225

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A.

Full Name (Last, First, Middle Initial)
US Bank

Mailing Address 777 E. Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Service Charges

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 79c1f5e087a20a943ec
Date of Disbursement

12 / 12 / 2008

Amount of Each Disbursement this Period

35.82

SUBTOTAL of Disbursements This Page (optional)

35.82

TOTAL This Period (last page this line number only)

35.82

**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)

PAGE 225 / 225

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Northwestern Mutual Life Insurance Federal PAC

A. Full Name (Last, First, Middle Initial) Friends of Chris Dodd <hr/> Mailing Address PO Box 270701 <hr/> City West Hartford State CT Zip Code 06127 <hr/> Purpose of Disbursement 2010 General Candidate Name Christopher J. Dodd <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 94795426c8be3ebc179 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
B. Full Name (Last, First, Middle Initial) Kagen 4 Congress <hr/> Mailing Address 100 W. College Ave. 50 D <hr/> City Appleton State WI Zip Code 54911 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Steven L. Kagen <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 6a1b608dfdfea96f48f Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

2000.00