

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
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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 06 01 2006 through 06 30 2006

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 Tammy M. Roo

Signature of Treasurer Electronically Filed by Tammy M. Roo Date 08 15 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		140998.06
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	112303.00									
(c) Total Receipts (from Line 19)	21441.66	113667.48								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	133744.66	254665.54								
7. Total Disbursements (from Line 31)	27533.68	148454.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	106210.98	106210.98								
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

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	16624.73	64730.51
(i) Itemized (use Schedule A)	4770.75	48615.37
(ii) Unitemized	21395.48	113345.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	21395.48	113345.88
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	46.18	321.60
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))	21441.66	113667.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21441.66	113667.48

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.....	33.68	355.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	33.68	355.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	148098.75
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	0.00
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))..	27533.68	148454.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	27533.68	148454.56

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)	21395.48	113345.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21395.48	113345.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	33.68	355.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	33.68	355.81

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 85 (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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Jerome R Baier Mailing Address 720 E Wisconsin Avenue City State Zip Code Milwaukee WI 53202-4703 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-673-14-13 Amount of Each Receipt this Period 48.00
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 ▼ 576.00	

B. Full Name (Last, First, Middle Initial) Jerome R Baier Mailing Address 720 E Wisconsin Avenue City State Zip Code Milwaukee WI 53202-4703 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 Transaction ID: 20060711-673-23-0 Amount of Each Receipt this Period 48.00
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 ▼ 576.00	

C. Full Name (Last, First, Middle Initial) Gary H Barsness Mailing Address 1704 E 54th Street City State Zip Code Davenport IA 52807-2769 FEC ID number of contributing federal political committee. C	Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-1101-14-13 Amount of Each Receipt this Period 20.00
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 ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	116.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Gary H Barsness		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 1704 E 54th Street		Transaction ID: 20060711-1101-23-0
City Davenport	State IA	Zip Code 52807-2769
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Douglas P Bates		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-531-14-13
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation Dir Fed Rel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Douglas P Bates		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-531-23-0
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer NML	Occupation Dir Fed Rel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. William H Beckley		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-510-14-13
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.00
Name of Employer NML	Occupation EVP Agencies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1152.00	

Full Name (Last, First, Middle Initial) B. William H Beckley		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-510-23-0
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.00
Name of Employer NML	Occupation EVP Agencies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1152.00	

Full Name (Last, First, Middle Initial) C. John P Bender		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 285 Riverside Avenue Suite 200		Transaction ID: 20060622-1138-14-13
City Westport	State CT	Zip Code 06880-4806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	217.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John P Bender		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 285 Riverside Avenue Suite 200		Transaction ID: 20060711-1138-23-0
City State Zip Code Westport CT 06880-4806	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. Robert J Berdan		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-810-14-13
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 79.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Gen Cnsl & Sec Aggregate Year-to-Date ▼ 948.00	

Full Name (Last, First, Middle Initial) C. Robert J Berdan		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-810-23-0
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 79.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Gen Cnsl & Sec Aggregate Year-to-Date ▼ 948.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Garrett J Bleakley		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 600 W Broadway Suite 600 One America Plaza		Transaction ID: 20060622-1117-14-13	
City San Diego State CA Zip Code 92101-3359	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation General Agent	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Garrett J Bleakley		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 600 W Broadway Suite 600 One America Plaza		Transaction ID: 20060711-1117-23-0	
City San Diego State CA Zip Code 92101-3359	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation General Agent	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) John D Blumberg		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 15 Fisher Lane		Transaction ID: 20060622-1152-14-13	
City White Plains State NY Zip Code 10603-2222	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation General Agent	Aggregate Year-to-Date ▼ 1440.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	170.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John D Blumberg		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 15 Fisher Lane		Transaction ID: 20060711-1152-23-0
City White Plains	State NY	Zip Code 10603-2222
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 ▼ 1440.00	

Full Name (Last, First, Middle Initial) B. Timothy J Bohannon		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 1400 Corporate Center Cr Suite 200		Transaction ID: 20060622-1119-14-13
City Eagan	State MN	Zip Code 55121-1372
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 1200.00	

Full Name (Last, First, Middle Initial) C. Timothy J Bohannon		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 1400 Corporate Center Cr Suite 200		Transaction ID: 20060711-1119-23-0
City Eagan	State MN	Zip Code 55121-1372
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
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 ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	▶	320.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. David G Bostick		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1300 Summit Avenue Suite 200		Transaction ID: 20060622-1129-14-13	
City State Zip Code Fort Worth TX 76102-4416	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 960.00		

Full Name (Last, First, Middle Initial) B. David G Bostick		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1300 Summit Avenue Suite 200		Transaction ID: 20060711-1129-23-0	
City State Zip Code Fort Worth TX 76102-4416	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 960.00		

Full Name (Last, First, Middle Initial) C. Mark C Boyle		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-814-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 22.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Director Aggregate Year-to-Date ▼ 264.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Mark C Boyle		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-814-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 22.00
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 ▼ 264.00		

B. Full Name (Last, First, Middle Initial) Jennifer Brase		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1505 NW 47th Ter		Transaction ID: 20060622-1149-14-13	
City Kansas City	State MO	Zip Code 64116-4648	Amount of Each Receipt this Period 60.00
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 ▼ 720.00		

C. Full Name (Last, First, Middle Initial) Jennifer Brase		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1505 NW 47th Ter		Transaction ID: 20060711-1149-23-0	
City Kansas City	State MO	Zip Code 64116-4648	Amount of Each Receipt this Period 60.00
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 ▼ 720.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John M Bremer		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-494-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 144.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chief Operating Ofcr Aggregate Year-to-Date ▼ 1728.00		

Full Name (Last, First, Middle Initial) B. John M Bremer		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-494-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 144.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chief Operating Ofcr Aggregate Year-to-Date ▼ 1728.00		

Full Name (Last, First, Middle Initial) C. Peter W Bruce		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-671-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 128.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Chief Ins Ofcr Aggregate Year-to-Date ▼ 1536.00		

SUBTOTAL of Receipts This Page (optional) ▶	416.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Peter W Bruce

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 Chief Ins Ofcr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1536.00

Date of Receipt
06 / 30 / 2006

Transaction ID: 20060711-671-23-0

Amount of Each Receipt this Period
128.00

B. Full Name (Last, First, Middle Initial)
John H Bullock

Mailing Address 400 Interstate N Parkway Southeast Suite 200

City Atlanta State GA Zip Code 30339-5017

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 ▼ 360.00

Date of Receipt
06 / 15 / 2006

Transaction ID: 20060622-1143-14-13

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
John H Bullock

Mailing Address 400 Interstate N Parkway Southeast Suite 200

City Atlanta State GA Zip Code 30339-5017

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 ▼ 360.00

Date of Receipt
06 / 30 / 2006

Transaction ID: 20060711-1143-23-0

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	188.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 / 85
<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Ben S Caputo Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 Transaction ID: 20060622-707-14-13 Amount of Each Receipt this Period 25.00
Name of Employer NML Occupation Regional Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ben S Caputo Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6 Transaction ID: 20060711-707-23-0 Amount of Each Receipt this Period 25.00
Name of Employer NML Occupation Regional Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Michael G Carter Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6 Transaction ID: 20060622-925-14-13 Amount of Each Receipt this Period 24.00
Name of Employer NML Occupation VP Pos 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)	▶	74.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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

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 VP Pos

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 20060711-925-23-0

Amount of Each Receipt this Period
 24.00

B. Full Name (Last, First, Middle Initial)
Steven T Catlett

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 VP Inv Prod

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 5 / 2 0 0 6

Transaction ID: 20060622-550-14-13

Amount of Each Receipt this Period
 36.00

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

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 VP Inv Prod

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 432.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 6

Transaction ID: 20060711-550-23-0

Amount of Each Receipt this Period
 36.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. David D Clark		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-645-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 47.00	
Zip Code 53202-4703		Transaction ID: 20060622-645-14-13	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.00	
Name of Employer NML	Occupation VP Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 564.00		

Full Name (Last, First, Middle Initial) B. David D Clark		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-645-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 47.00	
Zip Code 53202-4703		Transaction ID: 20060711-645-23-0	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 47.00	
Name of Employer NML	Occupation VP Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 564.00		

Full Name (Last, First, Middle Initial) C. Richard M Condrey		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 4020 Westchase Boulevard Suite 275		Transaction ID: 20060622-1114-14-13	
City Raleigh	State NC	Amount of Each Receipt this Period 100.00	
Zip Code 27607-3938		Transaction ID: 20060622-1114-14-13	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
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 ▼ 1200.00		

SUBTOTAL of Receipts This Page (optional) ▶	194.00
TOTAL This Period (last page this line number only) ▶	194.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard M Condrey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 4020 Westchase Boulevard Suite 275		Transaction ID: 20060711-1114-23-0	
City Raleigh	State NC	Amount of Each Receipt this Period 100.00	
Zip Code 27607-3938		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 ▼ 1200.00			

Full Name (Last, First, Middle Initial) B. Charles T Cruse		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address 12221 Merit Drive Suite 1500 Three Forest Plaza		Transaction ID: 6001170606206120116	
City Dallas	State TX	Amount of Each Receipt this Period 500.00	
Zip Code 75251-2235		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 ▼ 1000.00			

Full Name (Last, First, Middle Initial) C. Brian R Cunningham		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 6251 S Billings Way		Transaction ID: 20060622-1132-14-13	
City Centennial	State CO	Amount of Each Receipt this Period 50.00	
Zip Code 80111-6009		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			

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Brian R Cunningham

Mailing Address 6251 S Billings Way

City State Zip Code
Centennial CO 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 ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1132-23-0

Amount of Each Receipt this Period
50.00

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

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 VP Corp Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-506-14-13

Amount of Each Receipt this Period
20.00

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

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 VP Corp Plng

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-506-23-0

Amount of Each Receipt this Period
20.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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

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 Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 15 / 2006

Transaction ID: 20060622-551-14-13

Amount of Each Receipt this Period
20.00

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

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 Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 30 / 2006

Transaction ID: 20060711-551-23-0

Amount of Each Receipt this Period
20.00

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

Mailing Address PO Box 657

City Indianapolis State IN Zip Code 46206-0657

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 ▼ 1200.00

Date of Receipt
06 / 15 / 2006

Transaction ID: 20060622-1111-14-13

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Lew D Derrickson		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address PO Box 657		Transaction ID: 20060711-1111-23-0	
City Indianapolis	State IN	Zip Code 46206-0657	Amount of Each Receipt this Period 100.00
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 ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. James S Dobbs		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 920 Quarrier Street		Transaction ID: 20060622-1104-14-13	
City Charleston	State WV	Zip Code 25301-2619	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) C. James S Dobbs		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 920 Quarrier Street		Transaction ID: 20060711-1104-23-0	
City Charleston	State WV	Zip Code 25301-2619	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 ▼ 300.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark G Doll		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-813-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 75.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation President Msa		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Mark G Doll		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-813-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 75.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation President Msa		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. Brian H Early		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 565 E Swedesford Road Suite 300		Transaction ID: 20060622-1131-14-13	
City Wayne	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 19087-1611			
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		

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 85		
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Brian H Early		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 565 E Swedesford Road Suite 300		Transaction ID: 20060711-1131-23-0	
City State Zip Code Wayne PA 19087-1611	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. James R Effner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1901 Butterfield Road Suite 450		Transaction ID: 20060622-1136-14-13	
City State Zip Code Downers Grove IL 60515-7915	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 1800.00		

Full Name (Last, First, Middle Initial) C. James R Effner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1901 Butterfield Road Suite 450		Transaction ID: 20060711-1136-23-0	
City State Zip Code Downers Grove IL 60515-7915	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 1800.00		

SUBTOTAL of Receipts This Page (optional) ▶	350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Gordon Elgersma

Mailing Address 2738 Railside Ct SW

City State Zip Code
Byron Center MI 49315-9466

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 ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-1089-14-13

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Gordon Elgersma

Mailing Address 2738 Railside Ct SW

City State Zip Code
Byron Center MI 49315-9466

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 ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1089-23-0

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Charles I Ferrara

Mailing Address 600 Grant Street Suite 5100
Usx Tower

City State Zip Code
Pittsburgh PA 15219-2706

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 ▼ 212.88

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1087-23-0

Amount of Each Receipt this Period
17.74

SUBTOTAL of Receipts This Page (optional)	▶	267.74
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Christina H Fiasca		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-879-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation VP Fld Sys Admin	Aggregate Year-to-Date ▼ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Christina H Fiasca		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-879-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation VP Fld Sys Admin	Aggregate Year-to-Date ▼ 360.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Phillip B Franczyk		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2006	
Mailing Address 7030 S Yale Avenue Suite 800		Transaction ID: 20060622-1148-14-13	
City State Zip Code Tulsa OK 74136-5751	Amount of Each Receipt this Period 45.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation General Agent	Aggregate Year-to-Date ▼ 540.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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

Mailing Address 7030 S Yale Avenue Suite 800

City State Zip Code
Tulsa OK 74136-5751

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
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1148-23-0

Amount of Each Receipt this Period
45.00

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

Mailing Address 55 William Street Suite 100

City State Zip Code
Wellesley MA 02481-4003

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
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-1127-14-13

Amount of Each Receipt this Period
100.00

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

Mailing Address 55 William Street Suite 100

City State Zip Code
Wellesley MA 02481-4003

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
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1127-23-0

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	245.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Tom Goris		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 731 N Jackson Street Suite 100		Transaction ID: 20060622-1134-14-13	
City Milwaukee	State WI	Zip Code 53202-4697	Amount of Each Receipt this Period 100.00
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 ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Tom Goris		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 731 N Jackson Street Suite 100		Transaction ID: 20060711-1134-23-0	
City Milwaukee	State WI	Zip Code 53202-4697	Amount of Each Receipt this Period 100.00
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 ▼ 1200.00		

Full Name (Last, First, Middle Initial) C. Jon P Gruenster		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address PO Box 380		Transaction ID: 20060622-1102-14-13	
City Oshkosh	State WI	Zip Code 54903-0380	Amount of Each Receipt this Period 20.00
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 ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Jon P Gruenstern		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 380		Transaction ID: 20060711-1102-23-0	
City Oshkosh	State WI	Zip Code 54903-0380	Amount of Each Receipt this Period 20.00
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 ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Milton C Hall		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1201 Troy Schenectady Road Suite 120		Transaction ID: 20060622-1144-14-13	
City Latham	State NY	Zip Code 12110-1028	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Milton C Hall		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1201 Troy Schenectady Road Suite 120		Transaction ID: 20060711-1144-23-0	
City Latham	State NY	Zip Code 12110-1028	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 ▼ 300.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard L Hall		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-523-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation Svp Life Prod	Aggregate Year-to-Date ▼ 612.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Richard L Hall		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-523-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 51.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation Svp Life Prod	Aggregate Year-to-Date ▼ 612.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Gary L Hames		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 12810 Walmer St		Transaction ID: 20060622-1103-14-13	
City State Zip Code Overland Park KS 66209-3611	Amount of Each Receipt this Period 66.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Occupation General Agent	Aggregate Year-to-Date ▼ 792.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Gary L Hames		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 12810 Walmer St		Transaction ID: 20060711-1103-23-0	
City State Zip Code Overland Park KS 66209-3611	Amount of Each Receipt this Period 66.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 792.00		

Full Name (Last, First, Middle Initial) B. Kevin J Hassan		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1818 Market Street Suite 3010 Northwestern Mutual		Transaction ID: 20060622-1126-14-13	
City State Zip Code Philadelphia PA 19103-3653	Amount of Each Receipt this Period 66.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 799.92		

Full Name (Last, First, Middle Initial) C. Kevin J Hassan		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1818 Market Street Suite 3010 Northwestern Mutual		Transaction ID: 20060711-1126-23-0	
City State Zip Code Philadelphia PA 19103-3653	Amount of Each Receipt this Period 66.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 799.92		

SUBTOTAL of Receipts This Page (optional) ▶	199.32
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Edward T Hempstead		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 7733 Forsyth Boulevard Suite 1000		Transaction ID: 20060622-1086-14-13	
City State Zip Code Saint Louis MO 63105-1817	Amount of Each Receipt this Period 68.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 816.00		

Full Name (Last, First, Middle Initial) B. Edward T Hempstead		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 7733 Forsyth Boulevard Suite 1000		Transaction ID: 20060711-1086-23-0	
City State Zip Code Saint Louis MO 63105-1817	Amount of Each Receipt this Period 68.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 816.00		

Full Name (Last, First, Middle Initial) C. Gary M Hewitt		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-872-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Treas & Inv Ops Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Gary M Hewitt		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-872-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 20.00
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 ▼ 240.00		

Full Name (Last, First, Middle Initial) B. Austin E Hodgkins		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 316 Main Street		Transaction ID: 20060622-1094-14-13	
City Poughkeepsie	State NY	Zip Code 12601-3123	Amount of Each Receipt this Period 20.00
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 ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Austin E Hodgkins		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 316 Main Street		Transaction ID: 20060711-1094-23-0	
City Poughkeepsie	State NY	Zip Code 12601-3123	Amount of Each Receipt this Period 20.00
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 ▼ 240.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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

Mailing Address 5215 Old Orchard Road
Suite 1200

City State Zip Code
Skokie IL 60077-1035

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
0 6 / 1 5 / 2 0 0 6

Transaction ID: 20060622-1091-14-13

Amount of Each Receipt this Period
50.00

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

Mailing Address 5215 Old Orchard Road
Suite 1200

City State Zip Code
Skokie IL 60077-1035

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
0 6 / 3 0 / 2 0 0 6

Transaction ID: 20060711-1091-23-0

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Will S Hornsby

Mailing Address 11440 Lake Sherwood N
Suite D

City State Zip Code
Baton Rouge LA 70816-0408

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 ▼ 3700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 6

Transaction ID: 20060622-1090-14-13

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► 175.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Will S Hornsby		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6	
Mailing Address 11440 Lake Sherwood N Suite D		Transaction ID: 6618410606206114913	
City State Zip Code Baton Rouge LA 70816-0408		Amount of Each Receipt this Period 2800.00	
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 ▼ 3700.00	

Full Name (Last, First, Middle Initial) B. Will S Hornsby		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 11440 Lake Sherwood N Suite D		Transaction ID: 20060711-1090-23-0	
City State Zip Code Baton Rouge LA 70816-0408		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 ▼ 3700.00	

Full Name (Last, First, Middle Initial) C. Scott lodice		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 575 S Charles Street Suite 300		Transaction ID: 20060622-1130-14-13	
City State Zip Code Baltimore MD 21201-2428		Amount of Each Receipt this Period 100.00	
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 ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional) ▶	2975.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott Iodice		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 575 S Charles Street Suite 300		Transaction ID: 20060711-1130-23-0	
City Baltimore	State MD	Zip Code 21201-2428	Amount of Each Receipt this Period 100.00
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 ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Nicholas E Jahnke		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-899-14-13	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 48.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Director-Field Production		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00		

Full Name (Last, First, Middle Initial) C. Nicholas E Jahnke		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-899-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 48.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Director-Field Production		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.00		

SUBTOTAL of Receipts This Page (optional) ▶	196.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Adam S Kaufman		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 4 Heidi Lane		Transaction ID: 20060622-1122-14-13
City Mount Sinai	State NY	Zip Code 11766-1427
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 ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Adam S Kaufman		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 4 Heidi Lane		Transaction ID: 20060711-1122-23-0
City Mount Sinai	State NY	Zip Code 11766-1427
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 ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Donald E Kelley		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 202 Montrose West Avenue Suite 300		Transaction ID: 20060711-1093-23-0
City Akron	State OH	Zip Code 44321-2923
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
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 ▼ 216.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John C Kelly		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-588-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 32.00	
Zip Code 53202-4703			
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 ▼ 384.00		

Full Name (Last, First, Middle Initial) B. John C Kelly		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-588-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 32.00	
Zip Code 53202-4703			
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 ▼ 384.00		

Full Name (Last, First, Middle Initial) C. Robert H Kerrigan		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 888 W 6th Street Suite 200		Transaction ID: 20060622-1151-14-13	
City Los Angeles	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 90017-2728			
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		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert H Kerrigan

Mailing Address 888 W 6th Street Suite 200

City State Zip Code
Los Angeles CA 90017-2728

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
06 / 30 / 2006

Transaction ID: 20060711-1151-23-0

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
William S Koch

Mailing Address 245 Riverside Avenue Suite 100

City State Zip Code
Jacksonville FL 32202-4924

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
06 / 15 / 2006

Transaction ID: 20060622-1121-14-13

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
William S Koch

Mailing Address 245 Riverside Avenue Suite 100

City State Zip Code
Jacksonville FL 32202-4924

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
06 / 30 / 2006

Transaction ID: 20060711-1121-23-0

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) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 / 85
<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. William C Koenig		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-556-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 56.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Svp & Chief Actuary Aggregate Year-to-Date ▼ 672.00		

Full Name (Last, First, Middle Initial) B. William C Koenig		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-556-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 56.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Svp & Chief Actuary Aggregate Year-to-Date ▼ 672.00		

Full Name (Last, First, Middle Initial) C. John L Kordsmeier		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-996-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP-Nb Aggregate Year-to-Date ▼ 240.00		

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) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 / 85
<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
John L Kordsmeier

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 VP-Nb

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
06 / 30 / 2006

Transaction ID: 20060711-996-23-0

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Amin H Ladak

Mailing Address 60 S Market Street Suite 600

City San Jose State CA Zip Code 95113-2342

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 ▼ 450.00

Date of Receipt
06 / 15 / 2006

Transaction ID: 20060622-1146-14-13

Amount of Each Receipt this Period
37.50

C. Full Name (Last, First, Middle Initial)
Amin H Ladak

Mailing Address 60 S Market Street Suite 600

City San Jose State CA Zip Code 95113-2342

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 ▼ 450.00

Date of Receipt
06 / 30 / 2006

Transaction ID: 20060711-1146-23-0

Amount of Each Receipt this Period
37.50

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Robert D Lowrey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address PO Box 89710		Transaction ID: 20060622-1120-14-13	
City Sioux Falls	State SD	Amount of Each Receipt this Period 20.00	
Zip Code 57109-9710		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer NML	Occupation General Agent	Amount of Each Receipt this Period 20.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	Amount of Each Receipt this Period 20.00	

B. Full Name (Last, First, Middle Initial) Robert D Lowrey		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 89710		Transaction ID: 20060711-1120-23-0	
City Sioux Falls	State SD	Amount of Each Receipt this Period 20.00	
Zip Code 57109-9710		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00	
Name of Employer NML	Occupation General Agent	Amount of Each Receipt this Period 20.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	Amount of Each Receipt this Period 20.00	

C. Full Name (Last, First, Middle Initial) Susan A Lueger		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-578-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 35.00	
Zip Code 53202-4703		Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer NML	Occupation VP HR	Amount of Each Receipt this Period 35.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	Amount of Each Receipt this Period 35.00	

SUBTOTAL of Receipts This Page (optional) ▶	75.00
TOTAL This Period (last page this line number only) ▶	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Susan A Lueger		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-578-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 35.00	
Zip Code 53202-4703			
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 ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Jeffrey J Lueken		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-863-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 25.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Securities		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Jeffrey J Lueken		Date of Receipt M M / D D / Y Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-863-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 25.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Securities		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Jean M Maier		Date of Receipt MM / DD / YYYY 06 / 15 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-508-14-13
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NML	Occupation VP Compliance/Bp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Jean M Maier		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-508-23-0
City Milwaukee	State WI	Zip Code 53202-4703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer NML	Occupation VP Compliance/Bp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. James V Marker		Date of Receipt MM / DD / YYYY 06 / 30 / 2006
Mailing Address 7812 McEwen Rd. Suite A		Transaction ID: 20060711-1113-23-0
City Dayton	State OH	Zip Code 45459-4069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 17.00
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 ▼ 204.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Meridee J Maynard		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-799-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 53.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
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 ▼ 636.00		

Full Name (Last, First, Middle Initial) B. Meridee J Maynard		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-799-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 53.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
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 ▼ 636.00		

Full Name (Last, First, Middle Initial) C. David C Mc Avoy		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 1 Beacon Street Suite 19		Transaction ID: 20060622-1110-14-13	
City Boston	State MA	Amount of Each Receipt this Period 66.66	
Zip Code 02108-3107			
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 ▼ 799.92		

SUBTOTAL of Receipts This Page (optional) ▶	172.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. David C Mc Avoy		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1 Beacon Street Suite 19		Transaction ID: 20060711-1110-23-0	
City State Zip Code Boston MA 02108-3107	Amount of Each Receipt this Period 66.66		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 799.92		

Full Name (Last, First, Middle Initial) B. Charles E Mc Intyre		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 2101 W Commercial Boulevard Suite 5100		Transaction ID: 20060622-1107-14-13	
City State Zip Code Fort Lauderdale FL 33309-3071	Amount of Each Receipt this Period 205.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 2460.00		

Full Name (Last, First, Middle Initial) C. Charles E Mc Intyre		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 2101 W Commercial Boulevard Suite 5100		Transaction ID: 20060711-1107-23-0	
City State Zip Code Fort Lauderdale FL 33309-3071	Amount of Each Receipt this Period 205.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 2460.00		

SUBTOTAL of Receipts This Page (optional) ▶	476.66
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 / 85
<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Roger M Mc Queen Mailing Address 111 E Broadway Suite 1400 City State Zip Code Salt Lake City UT 84111-5260 FEC ID number of contributing federal political committee. C		Date of Receipt <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>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 20060622-1106-14-13 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	5		2	0	0	6														
50.00																							
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 ▼ <table border="1"> <tr> <td>600.00</td> </tr> </table>		600.00																					
600.00																							

B. Full Name (Last, First, Middle Initial) Roger M Mc Queen Mailing Address 111 E Broadway Suite 1400 City State Zip Code Salt Lake City UT 84111-5260 FEC ID number of contributing federal political committee. C		Date of Receipt <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>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 20060711-1106-23-0 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	6														
50.00																							
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 ▼ <table border="1"> <tr> <td>600.00</td> </tr> </table>		600.00																					
600.00																							

C. Full Name (Last, First, Middle Initial) John W McTigue Mailing Address 1 N Wacker Drive Floor 46 City State Zip Code Chicago IL 60606-2807 FEC ID number of contributing federal political committee. C		Date of Receipt <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>0</td><td>6</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 20060622-1116-14-13 Amount of Each Receipt this Period <table border="1"> <tr> <td>200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	5		2	0	0	6	200.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		1	5		2	0	0	6														
200.00																							
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 ▼ <table border="1"> <tr> <td>2400.00</td> </tr> </table>		2400.00																					
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John W McTigue		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 1 N Wacker Drive Floor 46		Transaction ID: 20060711-1116-23-0
City Chicago	State IL	Zip Code 60606-2807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
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 ▼ 2400.00	

Full Name (Last, First, Middle Initial) B. Joseph F Meier		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006
Mailing Address 2682 W Fairbanks Avenue		Transaction ID: 20060622-1118-14-13
City Winter Park	State FL	Zip Code 32789-3385
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Joseph F Meier		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006
Mailing Address 2682 W Fairbanks Avenue		Transaction ID: 20060711-1118-23-0
City Winter Park	State FL	Zip Code 32789-3385
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Richard D Mellinger		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 4100 Edison Lakes Parkway Suite 200		Transaction ID: 20060622-1097-14-13	
City Mishawaka	State IN	Zip Code 46545-3422	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Richard D Mellinger		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 4100 Edison Lakes Parkway Suite 200		Transaction ID: 20060711-1097-23-0	
City Mishawaka	State IN	Zip Code 46545-3422	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Carl W Middleton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 Olive Way Suite 1900		Transaction ID: 20060622-1100-14-13	
City Seattle	State WA	Zip Code 98101-1847	Amount of Each Receipt this Period 100.00
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 ▼ 1200.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Carl W Middleton

Mailing Address 720 Olive Way Suite 1900

City State Zip Code
Seattle WA 98101-1847

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
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 20060711-1100-23-0

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
James J Nemece

Mailing Address 1114 Avenue of the Americas
Floor 23

City State Zip Code
New York NY 10036-7703

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 ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 6

Transaction ID: 20060622-1147-14-13

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
James J Nemece

Mailing Address 1114 Avenue of the Americas
Floor 23

City State Zip Code
New York NY 10036-7703

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 ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 6

Transaction ID: 20060711-1147-23-0

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Joseph C Nill		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 530 W Spring Street Suite 200		Transaction ID: 20060622-1115-14-13	
City Columbus	State OH	Zip Code 43215-5385	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Joseph C Nill		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 530 W Spring Street Suite 200		Transaction ID: 20060711-1115-23-0	
City Columbus	State OH	Zip Code 43215-5385	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) C. William H Norton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-507-14-13	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. William H Norton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-507-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 35.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Regional Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Gregory C Oberland		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-563-14-13	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 53.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Sr VP & CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 636.00		

Full Name (Last, First, Middle Initial) C. Gregory C Oberland		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-563-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 53.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Sr VP & CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 636.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Gary A Poliner Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-513-14-13 Amount of Each Receipt this Period 90.00
Name of Employer NML Occupation Svp & CFO 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) Gary A Poliner Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 Transaction ID: 20060711-513-23-0 Amount of Each Receipt this Period 90.00
Name of Employer NML Occupation Svp & CFO 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) Charles R Pruett Mailing Address 1600 Division Street Suite 400 City Nashville State TN Zip Code 37203-2755 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-1140-14-13 Amount of Each Receipt this Period 125.00
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)	305.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Charles R Pruett		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 1600 Division Street Suite 400		Transaction ID: 20060711-1140-23-0	
City State Zip Code Nashville TN 37203-2755	Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) B. John M Qualy		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 701 Market Street Suite 1070		Transaction ID: 20060622-1095-14-13	
City State Zip Code Saint Louis MO 63101-1851	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 2400.00		

Full Name (Last, First, Middle Initial) C. John M Qualy		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 701 Market Street Suite 1070		Transaction ID: 20060711-1095-23-0	
City State Zip Code Saint Louis MO 63101-1851	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 2400.00		

SUBTOTAL of Receipts This Page (optional) ▶	525.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Jeff D Reeter Mailing Address 1 Riverway Suite 900 City State Zip Code Houston TX 77056-1906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-1145-14-13 Amount of Each Receipt this Period 45.00
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 ▼ 540.00		

B. Full Name (Last, First, Middle Initial) Jeff D Reeter Mailing Address 1 Riverway Suite 900 City State Zip Code Houston TX 77056-1906 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 Transaction ID: 20060711-1145-23-0 Amount of Each Receipt this Period 45.00
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 ▼ 540.00		

C. Full Name (Last, First, Middle Initial) Robert F Rice Mailing Address PO Box 8627 City State Zip Code Boise ID 83707-2627 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-1088-14-13 Amount of Each Receipt this Period 35.00
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 ▼ 420.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 85		
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert F Rice		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address PO Box 8627		Transaction ID: 20060711-1088-23-0	
City Boise	State ID	Zip Code 83707-2627	Amount of Each Receipt this Period 35.00
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 ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Thomas R Richards		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-558-14-13	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Agency Dev		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Thomas R Richards		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-558-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Agency Dev		
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) ▶	75.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marcia Rimai

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 Svp Mktg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-598-14-13

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Marcia Rimai

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 Svp Mktg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-598-23-0

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Kathleen M Rivera

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 VP & Deputy Gc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-733-23-0

Amount of Each Receipt this Period
17.00

SUBTOTAL of Receipts This Page (optional)	▶	67.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Charles D Robinson

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 Svp Inv Prod & Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 852.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-527-14-13

Amount of Each Receipt this Period
71.00

B. Full Name (Last, First, Middle Initial)
Charles D Robinson

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 Svp Inv Prod & Svcs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 852.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-527-23-0

Amount of Each Receipt this Period
71.00

C. Full Name (Last, First, Middle Initial)
Mason G Ross

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 EVP & CIO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1452.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-776-14-13

Amount of Each Receipt this Period
121.00

SUBTOTAL of Receipts This Page (optional)	▶	263.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 / 85
<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial) Mason G Ross Mailing Address 720 E Wisconsin Avenue City Milwaukee State WI Zip Code 53202-4703 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 Transaction ID: 20060711-776-23-0 Amount of Each Receipt this Period 121.00
Name of Employer NML Occupation EVP & CIO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1452.00		

B. Full Name (Last, First, Middle Initial) R. P Sarnecki Mailing Address 3805 Edwards Road Suite 200 City Cincinnati State OH Zip Code 45209-1939 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006 Transaction ID: 20060622-1137-14-13 Amount of Each Receipt this Period 41.67
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 ▼ 500.04		

C. Full Name (Last, First, Middle Initial) R. P Sarnecki Mailing Address 3805 Edwards Road Suite 200 City Cincinnati State OH Zip Code 45209-1939 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006 Transaction ID: 20060711-1137-23-0 Amount of Each Receipt this Period 41.67
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 ▼ 500.04		

SUBTOTAL of Receipts This Page (optional)	204.34
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joseph M Savino

Mailing Address 777 Alexander Road

City State Zip Code
Princeton NJ 08540-6300

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 ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-1099-14-13

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Joseph M Savino

Mailing Address 777 Alexander Road

City State Zip Code
Princeton NJ 08540-6300

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 ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1099-23-0

Amount of Each Receipt this Period
20.00

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

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 Svp Ips & Affiliates

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1128.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-734-14-13

Amount of Each Receipt this Period
94.00

SUBTOTAL of Receipts This Page (optional)	▶	134.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. John E Schlifske		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-734-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 94.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation Svp Ips & Affiliates		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1128.00		

Full Name (Last, First, Middle Initial) B. James A Schwertfeger		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 1101 N Market Street Suite 100		Transaction ID: 20060622-1098-14-13	
City Milwaukee	State WI	Zip Code 53202-3148	Amount of Each Receipt this Period 150.00
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 ▼ 1800.00		

Full Name (Last, First, Middle Initial) C. James A Schwertfeger		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 1101 N Market Street Suite 100		Transaction ID: 20060711-1098-23-0	
City Milwaukee	State WI	Zip Code 53202-3148	Amount of Each Receipt this Period 150.00
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 ▼ 1800.00		

SUBTOTAL of Receipts This Page (optional) ▶	394.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
David W Simbro

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 VP Ltc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-1013-23-0

Amount of Each Receipt this Period
18.00

B. Full Name (Last, First, Middle Initial)
Steven E Smith

Mailing Address 111 Sutter Street Suite 1800

City State Zip Code
San Francisco CA 94104-4545

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-1142-14-13

Amount of Each Receipt this Period
37.50

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

Mailing Address 111 Sutter Street Suite 1800

City State Zip Code
San Francisco CA 94104-4545

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-1142-23-0

Amount of Each Receipt this Period
37.50

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Robert L Spinks

Mailing Address 15 River Bend Place Suite A

City State Zip Code
Jackson MS 39232-9559

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 ▼ 200.04

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1109-23-0

Amount of Each Receipt this Period
16.67

B. Full Name (Last, First, Middle Initial)
Leonard F Stecklein

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 Svp Inv Prod Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-1025-14-13

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Leonard F Stecklein

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 Svp Inv Prod Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1025-23-0

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)	▶	56.67
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jason Steigman

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 ▼ 216.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-584-23-0

Amount of Each Receipt this Period
18.00

B. Full Name (Last, First, Middle Initial)
Paul L Stein

Mailing Address 901 Wilshire Drive Suite 300

City Troy State MI Zip Code 48084-5611

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 ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-1096-14-13

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Paul L Stein

Mailing Address 901 Wilshire Drive Suite 300

City Troy State MI Zip Code 48084-5611

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 ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-1096-23-0

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	▶	118.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Stephen B Stone		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address PO Box 1008 180 River Road Floor 2		Transaction ID: 20060622-1123-14-13
City State Zip Code Summit NJ 07902-1008	Amount of Each Receipt this Period 50.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Stephen B Stone		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6
Mailing Address PO Box 1008 180 River Road Floor 2		Transaction ID: 20060711-1123-23-0
City State Zip Code Summit NJ 07902-1008	Amount of Each Receipt this Period 50.00	
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 ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Eugene H Storms		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6
Mailing Address 100 Washington Square Suite 1200		Transaction ID: 20060622-1092-14-13
City State Zip Code Minneapolis MN 55401-2110	Amount of Each Receipt this Period 170.00	
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 ▼ 2040.00	

SUBTOTAL of Receipts This Page (optional) ▶	270.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Eugene H Storms		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 100 Washington Square Suite 1200		Transaction ID: 20060711-1092-23-0	
City State Zip Code Minneapolis MN 55401-2110	Amount of Each Receipt this Period 170.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Special Agent Aggregate Year-to-Date ▼ 2040.00		

Full Name (Last, First, Middle Initial) B. Richard A Strait		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-1012-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Managing Director Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Richard A Strait		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-1012-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Managing Director Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	210.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Joe P Teague

Mailing Address 2613 N Dundee St

City Tampa State FL Zip Code 33629-7516

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 ▼ 840.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 15 / 2006

Transaction ID: 20060622-1112-14-13

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 Tampa State FL Zip Code 33629-7516

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 ▼ 840.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2006

Transaction ID: 20060711-1112-23-0

Amount of Each Receipt this Period
 70.00

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

Mailing Address 1873 S Bellaire Street Suite 1700

City Denver State CO Zip Code 80222-4358

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
 06 / 15 / 2006

Transaction ID: 20060622-1135-14-13

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)	▶	215.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

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

Mailing Address 1873 S Bellaire Street
Suite 1700

City State Zip Code
Denver CO 80222-4358

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
06 / 30 / 2006

Transaction ID: 20060711-1135-23-0

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
J. Edward Tippetts

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
VP Fld Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 15 / 2006

Transaction ID: 20060622-1034-14-13

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
J. Edward Tippetts

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
VP Fld Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1034-23-0

Amount of Each Receipt this Period
45.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Leo C Tucker		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 605 Potomac River Rd		Transaction ID: 20060622-1139-14-13	
City State Zip Code McLean VA 22102-1402	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Leo C Tucker		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 605 Potomac River Rd		Transaction ID: 20060711-1139-23-0	
City State Zip Code McLean VA 22102-1402	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) C. Martha M Valerio		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-605-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Tech & Web Rsrch Aggregate Year-to-Date ▼ 288.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Martha M Valerio		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-605-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 24.00	
Zip Code 53202-4703			
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Tech & Web Rsrch		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00		

Full Name (Last, First, Middle Initial) B. Patricia L Van Kampen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-590-14-13	
City Milwaukee	State WI	Amount of Each Receipt this Period 25.00	
Zip Code 53202-4703			
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 ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Patricia L Van Kampen		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-590-23-0	
City Milwaukee	State WI	Amount of Each Receipt this Period 25.00	
Zip Code 53202-4703			
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 ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	74.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert J Waltos		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 1500 Quail Street Suite 600		Transaction ID: 20060622-1125-14-13	
City State Zip Code Newport Beach CA 92660-2738	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) B. Robert J Waltos		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 1500 Quail Street Suite 600		Transaction ID: 20060711-1125-23-0	
City State Zip Code Newport Beach CA 92660-2738	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 480.00		

Full Name (Last, First, Middle Initial) C. P. Andrew Ware		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-484-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 18.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation VP Actuary Aggregate Year-to-Date ▼ 216.00		

SUBTOTAL of Receipts This Page (optional) ▶	98.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 72 / 85
	(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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Donald R Wilkinson

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 VP Agy Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-520-14-13

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Donald R Wilkinson

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 VP Agy Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-520-23-0

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
John A Williamson

Mailing Address PO Box 660347

City State Zip Code
Birmingham AL 35266-0347

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 ▼ 1416.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-1108-14-13

Amount of Each Receipt this Period
118.00

SUBTOTAL of Receipts This Page (optional)	▶	158.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
John A Williamson

Mailing Address PO Box 660347

City Birmingham State AL Zip Code 35266-0347

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 ▼ 1416.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-1108-23-0

Amount of Each Receipt this Period
118.00

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

Mailing Address 6235 Morrison Boulevard

City Charlotte State NC Zip Code 28211-3508

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 ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 20 / 2006

Transaction ID: 3219260606206126758

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Michael L Youngman

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 VP Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-912-14-13

Amount of Each Receipt this Period
56.00

SUBTOTAL of Receipts This Page (optional)	474.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael L Youngman

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 VP Govt Rel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 672.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-912-23-0

Amount of Each Receipt this Period
56.00

B. Full Name (Last, First, Middle Initial)
T. S Zach

Mailing Address PO Box 10435
Northwestern Mutual

City State Zip Code
Cedar Rapids IA 52410-0435

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2006

Transaction ID: 20060622-1141-14-13

Amount of Each Receipt this Period
37.50

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

Mailing Address PO Box 10435
Northwestern Mutual

City State Zip Code
Cedar Rapids IA 52410-0435

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2006

Transaction ID: 20060711-1141-23-0

Amount of Each Receipt this Period
37.50

SUBTOTAL of Receipts This Page (optional)	131.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 85		
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Thomas D Zale		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-768-14-13	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 21.00
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 ▼ 252.00		

Full Name (Last, First, Middle Initial) B. Thomas D Zale		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-768-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 21.00
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 ▼ 252.00		

Full Name (Last, First, Middle Initial) C. Rick T Zehner		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 6	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-927-23-0	
City Milwaukee	State WI	Zip Code 53202-4703	Amount of Each Receipt this Period 18.00
FEC ID number of contributing federal political committee. C			
Name of Employer NML	Occupation VP Life Prod		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 85
	<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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Edward J Zore		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060622-955-14-13	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 208.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 2496.00		

Full Name (Last, First, Middle Initial) B. Edward J Zore		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2006	
Mailing Address 720 E Wisconsin Avenue		Transaction ID: 20060711-955-23-0	
City State Zip Code Milwaukee WI 53202-4703	Amount of Each Receipt this Period 208.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 2496.00		

Full Name (Last, First, Middle Initial) C. Jeffrey Zuzolo		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2006	
Mailing Address 29 S Main Street Suite 201		Transaction ID: 20060622-1124-14-13	
City State Zip Code West Hartford CT 06107-2454	Amount of Each Receipt this Period 41.67		
FEC ID number of contributing federal political committee. C			
Name of Employer NML Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation General Agent Aggregate Year-to-Date ▼ 500.04		

SUBTOTAL of Receipts This Page (optional) ▶	457.67
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 77 / 85	
	(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"/> 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)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jeffrey Zuzolo

Mailing Address 29 S Main Street Suite 201

City State Zip Code
West Hartford CT 06107-2454

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 ▼
500.04

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2006

Transaction ID: 20060711-1124-23-0

Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional)	▶	41.67
TOTAL This Period (last page this line number only)	▶	16624.73

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 78 / 85	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Northwestern Mutual Life Insurance Company Federal Political Action Committee

A. Full Name (Last, First, Middle Initial)
US Bank

Mailing Address 777 E. Wisconsin Ave.

City	State	Zip Code
Milwaukee	WI	53202

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
321.60

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: 79431-11996096372604

Amount of Each Receipt this Period
46.18

Interest Received

SUBTOTAL of Receipts This Page (optional)	▶	46.18
TOTAL This Period (last page this line number only)	▶	46.18

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Barney Frank for Congress Committee		Transaction ID: EA9624OM2VCBGE Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address PO Box 260		Amount of Each Disbursement this Period 1000.00
City Newtonville State MA Zip Code 02460	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name Frank Barney		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ben Cardin for Senate		Transaction ID: E1IGBCV4AA5269A Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 6
Mailing Address PO Box 65056		Amount of Each Disbursement this Period 1000.00
City Baltimore State MD Zip Code 21209	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name Cardin Benjamin		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 00	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christopher Shays for Congress Committee		Transaction ID: EA6SBTTTT0JCBG9 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00
City Norwalk State CT Zip Code 06851	Category/ Type	
Purpose of Disbursement contribution		
Candidate Name Shays Christopher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Committe To Re-Elect Ed Towns		Transaction ID: EA500WU2UU0Q35 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 6
Mailing Address 438 Lewis Avenue		Amount of Each Disbursement this Period 1000.00
City Brooklyn State NY Zip Code 11233		
Purpose of Disbursement contribution Candidate Name Towns Edolphus Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 10		

Full Name (Last, First, Middle Initial) B. Congressional Majority Committee		Transaction ID: EA66YJAXVGCBG4 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 6 / 2 0 0 6
Mailing Address PO Box 746		Amount of Each Disbursement this Period 2000.00
City Bakersfield State CA Zip Code 93302		
Purpose of Disbursement contribution Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Crowley for Congress		Transaction ID: E1HGBCIZEFTBS6A Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6
Mailing Address 84-56 Grand Avenue		Amount of Each Disbursement this Period 1000.00
City Elmhurst State NY Zip Code 11373		
Purpose of Disbursement contribution Candidate Name Crowley Joseph Category/Type		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 07		

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 81 / 85

<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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

<p>A. Feinstein for Senate</p> <p>Full Name (Last, First, Middle Initial) Feinstein for Senate</p> <p>Mailing Address 601 S Glenoaks Boulevard #211</p> <p>City Burbank State CA Zip Code 91502</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Feinstein Dianne</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 00</p>		<p>Transaction ID: EADC96WEIHGU69</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>B. Freedom Project, The</p> <p>Full Name (Last, First, Middle Initial) Freedom Project, The</p> <p>Mailing Address 509 7th Street Northwest Third Floor</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: E1DGBCJ18YTBS6A</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>C. Friends of Joe Lieberman</p> <p>Full Name (Last, First, Middle Initial) Friends of Joe Lieberman</p> <p>Mailing Address PO Box 231294 State House Square</p> <p>City State House Square State CT Zip Code 06123</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Lieberman Joseph</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CT District: 00</p>		<p>Transaction ID: EA6SBTO90JCBGX</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2006"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>Disbursement For: 2006</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="9500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Jim Ramstad Volunteer Committee</p> <p>Mailing Address 1809 Plymouth Road South #310</p> <p>City Minnetonka State MN Zip Code 55305</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Ramstad Jim</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: EA50139FTU0Q3U Date of Disbursement 06 / 13 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Judy Biggert for Congress</p> <p>Mailing Address PO Box 637</p> <p>City Hinsdale State IL Zip Code 60522</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Biggert Judy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: EA66YI7JVGCBG4 Date of Disbursement 06 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Kind for Congress Committee</p> <p>Mailing Address 205 South 5th Avenue Suite 428</p> <p>City La Crosse State WI Zip Code 54601</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Kind Ron</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 03</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E1B6UGGFESUNQCA Date of Disbursement 06 / 27 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial) A. Moore for Congress		Transaction ID: E1N3Q0UST33105A Date of Disbursement 06 / 13 / 2006	
Mailing Address PO Box 16646		Amount of Each Disbursement this Period 1000.00	
City Milwaukee State WI Zip Code 53216	Purpose of Disbursement contribution Candidate Name Moore Gwendolynne Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Moore for Congress		Transaction ID: EA6SBQKGUICBGO Date of Disbursement 06 / 19 / 2006	
Mailing Address PO Box 14631		Amount of Each Disbursement this Period 1000.00	
City Shawnee Mission State KS Zip Code 66285	Purpose of Disbursement contribution Candidate Name Moore Dennis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Pryce for Congress		Transaction ID: EAXB6PZMKBOQ38 Date of Disbursement 06 / 06 / 2006	
Mailing Address 145 East Rich Street		Amount of Each Disbursement this Period 2000.00	
City Columbus State OH Zip Code 43215	Purpose of Disbursement contribution Candidate Name Pryce Deborah Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

<p>A. Putnam for Congress</p> <p>Full Name (Last, First, Middle Initial) Putnam for Congress</p> <p>Mailing Address PO Box 2257</p> <p>City Bartow State FL Zip Code 33831</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Putnam Adam</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 12</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E1KGBD1I9NIXCAA</p> <p>Date of Disbursement 06 / 22 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p>B. Scott Farrell for Congress</p> <p>Full Name (Last, First, Middle Initial) Scott Farrell for Congress</p> <p>Mailing Address PO Box 3242</p> <p>City Tampa State FL Zip Code 33601</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Farrell Scott</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: EA66YL3JWGCBG8</p> <p>Date of Disbursement 06 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
--	--	--

<p>C. Team Sununu</p> <p>Full Name (Last, First, Middle Initial) Team Sununu</p> <p>Mailing Address PO Box 500</p> <p>City Rye State NH Zip Code 03870</p> <p>Purpose of Disbursement contribution</p> <p>Candidate Name Sununu John</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: EA3JYDKLS0BDA</p> <p>Date of Disbursement 06 / 02 / 2006</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 85 / 85

<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)

The Northwestern Mutual Life Insurance Company Federal Political Action Committee

Full Name (Last, First, Middle Initial)

A. Together for Our Majority Political Action Committee (T-OMPAC)

Mailing Address PO Box 16488

City Arlington State VA Zip Code 22215

Purpose of Disbursement contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EA968J2A0VCBG4

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

27500.00