

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) 00197095 001994 250 MULTIPL PERMISS		2. FEC IDENTIFICATION NUMBER C 00197095
AD	NORTHWESTERN POLITICAL CONSULTANTS SPECIAL COMPANY FEDERAL POLITICAL 100 EAST MICHIGAN AVENUE MILWAUKEE WI 53202	
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid Year Report (Non-election Year Only)

Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding _____
(Type of Election)

election on _____ in the State of _____

Thirtieth day report following the General Election on _____

in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/94</u> through <u>3/31/94</u>		
6. (a) Cash on Hand January 1, 19 <u>94</u>		\$ 61,750.75
(b) Cash on Hand at Beginning of Reporting Period	\$ 61,750.75	
(c) Total Receipts (from Line 19)	\$ 28,962.94	\$ 28,962.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 90,713.69	\$ 90,713.69
7. Total Disbursements (from Line 30)	\$ 37,420.71	\$ 37,420.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 53,292.98	\$ 53,292.98
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20488 Toll Free 800-424-8530 Local 202-219-8420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	
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
Sara A. Holm, Assistant Treasurer

Signature of Treasurer
Sara A. Holm

Date
4/13/94

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

FEC FORM 3X

(revised 9/93)

FE4ANI/1

2 4 0 3 8 9 3 3 3 3 3 4 7

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FED PAC		FROM	TO	
		1/1/94	3/31/94	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	13,411.62	13,411.62	11(a)(i)
j.	Unitemized	15,427.27	15,427.27	11(a)(ii)
ii.	Total	28,838.89	28,838.89	11(a)(iii)
b.	Political Party Committees			11(b)
c.	Other Political Committees (such as PACs)			11(c)
d.	Total Contributions			11(d)
12.	Transfers From Affiliated/Other Party Committees			12
13.	All Loans Received			13
14.	Loan Repayments Received			14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17.	Other Federal Receipts (Dividends, Interest, etc.)	124.05	124.05	17
18.	Transfers from Nonfederal Account for Joint Activity			18
19.	Total Receipts	28,962.94	28,962.94	19
20.	Total Federal Receipts	28,962.94	28,962.94	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share			21(a)(i)
ii.	Non-Federal Share			21(a)(ii)
b.	Other Federal Operating Expenditures	170.71	170.71	21(b)
c.	Total Operating Expenditures			21(c)
22.	Transfers to Affiliated/Other Party Committees			22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	37,250.00	37,250.00	23
24.	Independent Expenditures (use Schedule E)			24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26.	Loan Repayments Made			26
27.	Loans Made			27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees			28(a)
b.	Political Party Committees			28(b)
c.	Other Political Committees (such as PACs)			28(c)
d.	Total Contribution Refunds			28(d)
29.	Other Disbursements			29
30.	Total Disbursements	37,420.71	37,420.71	30
31.	Total Federal Disbursements	37,420.71	37,420.71	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	28,838.89	28,838.89	32
33.	Total Contribution Refunds (from line 28d)			33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	28,838.89	28,838.89	34
35.	Total Federal Operating Expenditures	170.71	170.71	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures	170.71	170.71	37

SCHEDULE A

ITEMIZED RECEIPTS

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

1 PAGE OF 5
FOR LINE NUMBER 11

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, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Warren A. Negri, Jr. 3B14 N. Richmond St. Arlington, VA 22207	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 50.00 to 3/31/94 \$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William D. Goodwin 3061 Wellington Ct. Atlanta, GA 30339	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 130.00 to 3/31/94 \$ 780.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 780.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William H. Beckley 727 W. Hickory St. Hinsdale, IL 60521	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 180.00 to 3/31/94 \$ 1,080.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,080.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marvin L. Smith 5366 Sleepy Hollow Road Newburgh, IN 47630	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 40.00 to 3/31/94 \$ 240.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 240.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lew D. Derrickson 7489 N. Illinois St. Indianapolis, IN 46260	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 100.00 to 3/31/94 \$ 600.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harry P. Hoopis 1133 Elm Tree Rd. Lake Forest, IL 60045	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 50.00 to 3/31/94 \$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary L. Hanes 12810 Walmer St. Overland Park, KS 66209	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 64.00 to 3/31/94 \$ 384.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 384.00	

SUBTOTAL of Receipts This Page (optional)

\$3,684.00

TOTAL This Period (last page this line number only)

24038733642

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald R. Iodice 10 East Lee St. #2609 Baltimore, MD 21202	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 40.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 240.00	\$ 240.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul L. Stein 383 Pilgrim Ave. Birmingham, MI 48009	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 37.50
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 225.00	\$ 225.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Storms 3121 Dunbar Rd. St. Cloud, MN 56301	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	\$ 300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leon W. Nesbitt 1232 Wilderness Park Ct. Eagan, MN 55123	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 37.50
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 225.00	\$ 225.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. Qualy 665 S. Skinker #23H St. Louis, MO 63105	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 84.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 504.00	\$ 504.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard L. Rawlings 6 Green Meadow Ln. Bedford, NJ 03110	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 3/1/94 to 3/31/94	of \$ 42.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 252.00	\$ 252.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald W. Beshear 7835 Hartford Hill Cincinnati, OH 45242	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions from 1/1/94 to 3/31/94	of \$ 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 210.00	\$ 210.00

SUBTOTAL of Receipts This Page (optional) \$1,956.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE OF
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FOR LINE NUMBER
11

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles E. McIntyre 5514 Old Ocean Blvd. Ocean Ridge, FL 33435	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 126.67 from 1/1/94 to 3/31/94	\$ 760.02
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 760.02	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R. Allen Angell 5331 Stone Falls Ln. Dallas, TX 75287	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 95.00 from 1/1/94 to 3/31/94	\$ 570.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 570.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul M. Nick 43 Mott Lane Houston, TX 77024	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 100.00 from 1/1/94 to 3/31/94	\$ 600.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 600.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles I. Ferrara 7 Hunt Club Ln. Pittsburgh, PA 15215	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 50.00 from 1/1/94 to 3/31/94	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William S. Cochran 4436 Tyne Blvd. Nashville, TN 37215	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 121.66 from 1/1/94 to 3/31/94	\$ 729.96
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 729.96	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terry A. McPartland 1862 E. Michael Way Sandy City, UT 84093	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 50.00 from 1/1/94 to 3/31/94	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Garrett J. Bleakley 13225 Stone Canyon Rd. Poway, CA 92064	Self-employed agent of The Northwestern Mutual Life Insurance Company	Semi-monthly commission deductions of \$ 50.00 from 1/1/94 to 3/31/94	\$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 300.00	

SUBTOTAL of Receipts This Page (optional) \$3,559.98

TOTAL This Period (last page the line number only)

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SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

94038933652

A. Full Name, Mailing Address and ZIP Code James D. Shanley E. 2002 Overbluff Spokane, WA 99023 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 50.00 \$ 300.00
B. Full Name, Mailing Address and ZIP Code James A. Schwertfeger 425 W. Apple Tree Ct. Mequon, WI 53092 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 60.00 \$ 360.00
C. Full Name, Mailing Address and ZIP Code Thomas E. Goris 1479 Lilac Ln. Fox Point, WI 53217 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 50.00 \$ 300.00
D. Full Name, Mailing Address and ZIP Code Thomas A. Mitchell 680 N. Lakeshore Dr. #1603 Chicago, IL 60611 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 245.64	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 40.94 \$ 245.64
E. Full Name, Mailing Address and ZIP Code Robert H. Kerrigan, Jr. 2361 Stratford Cir. Bel Air, CA 90077 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 900.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 150.00 \$ 900.00
F. Full Name, Mailing Address and ZIP Code Phillip B. Franczyk 6017 Annadale Ft. Worth, TX 76132 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed agent of The Northwestern Mutual Life Insurance Company Occupation Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 40.00 \$ 240.00
G. Full Name, Mailing Address and ZIP Code James D. Ericson 7014 N. Barnett Ln. Fox Point, WI 53217 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Northwestern Mutual Life Insurance Company Occupation President & CEO Aggregate Year-to-Date > \$ 354.00	Date (month, day, year) Semi-monthly deductions from 1/1/94 to 3/31/94	Amount of Each Receipt this Period of \$ 59.00 \$ 354.00

SUBTOTAL of Receipts This Page (for email) \$2,699.64

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald J. Schuenke 13500 Park Cir. North Elm Grove, WI 53122	The Northwestern Mutual Life Insurance Company	Semi-monthly payroll deductions from 1/1/94 to 1/31/94	of \$ 115.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman	Aggregate Year-to-Date > \$ 230.00	\$ 230.00
B. Full Name, Mailing Address and ZIP Code Walt J. Wojcik W30451804 Brandybrook Rd. Waukesha, WI 53188	The Northwestern Mutual Life Insurance Company	Semi-monthly payroll deductions from 1/1/94 to 3/31/94	of \$ 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sr. Vice President	Aggregate Year-to-Date > \$ 210.00	\$ 210.00
C. Full Name, Mailing Address and ZIP Code Edward J. Zore 129 W. Miller Dr. Mequon, WI 53092	The Northwestern Mutual Life Insurance Company	Semi-monthly payroll deductions from 1/1/94 to 3/31/94	of \$ 37.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Sr. Vice President	Aggregate Year-to-Date > \$ 222.00	\$ 222.00
D. Full Name, Mailing Address and ZIP Code James R. Worrell 2218 Hopedale Ave. Charlotte, NC 28207	Self-employed agent of The Northwestern Mutual Life Insurance Company	1/31/94 3/15/94	\$ 300.00 \$ 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code Thomas R. Richards 362 Hawthorn Ave. Boulder, CO 80304	Self-employed agent of The Northwestern Mutual Life Insurance Company	2/28/94	\$ 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$ 1,512.00

TOTAL This Period (last page this line number only)

\$13,411.62

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Firstar Bank Milwaukee, N.A. 777 East Wisconsin Avenue Milwaukee, WI 53202		3/31/94	\$ 124.05
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on checking		Occupation: _____ Aggregate Year-to-Date > \$ 124.05	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____		Occupation: _____ Aggregate Year-to-Date > \$ _____	

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	\$ 124.05

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Center Kansas City, MO 64999	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Tax Payment	3/14/94	\$ 170.71
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (set page this line number only)	\$ 170.71

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Herger for Congress Committee P. O. Box 40175 Washington, DC 20016	US Congress-California Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	1/17/94	\$ 1,000.00
Committee for Sam Gibbons P. O. Box 2884 Washington, DC 20013	US Congress-Florida Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	1/17/94	\$ 1,000.00
Peter Barca for Congress 1538 Sheridan Road Kenosha, WI 53140	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	1/18/94	\$ 1,000.00
Klug for Congress P. O. Box 5619 Madison, WI 53705	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	1/18/94	\$ 1,000.00
Comm. to Re-elect Cong. Marge Roukema P. O. Box 625 Ridgewood, NJ 07451	US Congress-New Jersey Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	1/25/94	\$ 500.00
American Council of Life Ins. PAC 1001 Pennsylvania Avenue, N.W. Washington, DC 20004-2599	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/8/94	\$ 5,000.00
Campaign America 900 Second Street, NE, Suite 118 Washington, DC 20002	Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/10/94	\$ 2,000.00
Friends for Slade Gorton 1994 2366 Eastlake Avenue, East Seattle, WA 98102	US Senate-Washington Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/10/94	\$ 1,000.00
Bill Thomas Campaign Committee P. O. Box 23175 Washington, DC 20026	US Congress-California Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/10/94	\$ 1,000.00

SUBTOTAL of Disbursements This Page (optional)	\$13,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hancock for Congress Committee P. O. Box 40175 Washington, DC 20016	US Congress-Missouri Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/10/94	\$ 500.00
Wyden for Congress P. O. Box 12473 Portland, OR 97212	US Congress-Oregon Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	2/22/94	\$ 500.00
Friends of Jerry Kieczka 4200 Christine Place Alexandria, VA 22311	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/7/94	\$ 2,000.00
Mica for Congress 305 Capitol Street, SE Washington, DC 20003	US Congress-Florida Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 500.00
Toby Roth for Congress '94 Committee P. O. Box 2673 Appleton, WI 54913-9957	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 1,500.00
The Sensenbrenner Committee P. O. Box 575 Brookfield, WI 53008-0575	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 1,000.00
Obey for Congress 555 New Jersey Ave. NW. Washington, DC 20001	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 1,500.00
Gephardt in Congress Committee 507 Capitol Court, NE Washington, DC 20002	US Congress-Missouri Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 1,500.00
Roth Senate Committee 425 Second Street, NE Washington, DC 20002	US Senate-Delaware Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/9/94	\$ 1,000.00

SUBTOTAL of Disbursements This Page (optional)	\$10,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
L. F. Payne for Congress Committee P. O. Box 2884 Washington, DC 20013	US Congress-Virginia Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code Hoagland for Congress Committee P. O. Box 2884 Washington, DC 20013	US Congress-Nebraska Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
C. Full Name, Mailing Address and ZIP Code Matsui for Congress Committee P. O. Box 523024 Springfield, VA 22152	US Congress-California Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Jim Sasser P. O. Box 24723 Nashville, TN 37202	US Congress-Tennessee Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
E. Full Name, Mailing Address and ZIP Code Citizens for Bunning 1717 Dixie Highway, Suite 1B0 Fort Wright, KY 41011	US Congress-Kentucky Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 750.00
F. Full Name, Mailing Address and ZIP Code Citizens for Tom Petri P. O. Box 270 Fond du Lac, WI 54936-9943	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
G. Full Name, Mailing Address and ZIP Code Nadler for Congress 610 West End Avenue New York, NY 10024	US Congress-New York Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 1,000.00
H. Full Name, Mailing Address and ZIP Code Rangel for Congress Committee 2030 Allen Place, NW Washington, DC 20009	US Congress-New York Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/9/94	\$ 500.00
I. Full Name, Mailing Address and ZIP Code Barca for Congress 1538 Sheridan Road Kenosha, WI 53140	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/16/94	\$ 500.00

SUBTOTAL of Disbursements This Page (optional) \$ 7,750.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full) The Northwestern Mutual Life Insurance Company Federal Political Action Committee, aka Northwestern Mutual Life Federal Political Action Committee, aka NML FEDPAC

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Levin for Congress Committee P. O. Box 990 Washington, DC 20044-0990	US Congress-Michigan Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/16/94	\$ 500.00
B. Full Name, Mailing Address and ZIP Code Barbara Kennelly for Congress 7864 Colonial Village Row Annandale, VA 22003	US Congress-Connecticut Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/16/94	\$ 2,000.00
C. Full Name, Mailing Address and ZIP Code Kerrey for U.S. Senate 245 Second Street, NE Washington, DC 20002	US Senate-Nebraska Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/16/94	\$ 1,000.00
D. Full Name, Mailing Address and ZIP Code Fr. & Ng. of Steve Gunderson 2418 Davis Avenue Alexandria, VA 22302	US Congress-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/16/94	\$ 2,000.00
E. Full Name, Mailing Address and ZIP Code Bob Welch Campaign Committee 3015 N. 114th St. Milwaukee, WI 53222	US Senate-Wisconsin Disbursement for: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	3/31/94	\$ 500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$ 6,000.00
TOTAL This Period (last page this line number only)	\$37,250.00

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered DATE OF RECEIPT

First Class Mail POSTMARKED

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4-14-94

No Postmark

Postmark Illegible

Received from the House Office of Records
and Registration DATE OF RECEIPT

Received from the Senate Office of Public
Records DATE OF RECEIPT

Other (Specify): POSTMARKED
and/or DATE OF RECEIPT

SES
PREPARER

4-18-94
DATE PREPARED

940338933660