

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 PAC

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

2. **FEC IDENTIFICATION NUMBER** C00197095
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
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 07 01 2010 through 07 31 2010

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

Signature of Treasurer Electronically Filed by Loretta Mlekoday Date 08 18 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		183558.22
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	136500.49									
(c) Total Receipts (from Line 19)	30923.57	214756.21								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	167424.06	398314.43								
7. Total Disbursements (from Line 31)	21567.46	252457.83								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	145856.60	145856.60								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	25833.64	151687.14
(ii) Unitemized	5088.84	58060.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30922.48	209748.02
(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)	30922.48	209748.02
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.09	8.19
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))	30923.57	214756.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30923.57	214756.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	67.46	457.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	67.46	457.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	240500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	11500.00
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))..	21567.46	252457.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21567.46	252457.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	30922.48	209748.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30922.48	209748.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	67.46	457.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	67.46	457.83

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 122						
	(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

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 PAC

A.	Full Name (Last, First, Middle Initial) Mark J. Backe		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 4419 N Wildwood Ave		Transaction ID: 2010071319154-654		
	City Shorewood	State WI	Zip Code 53211-1408	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Ast Gn Cnl/Ins			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

B.	Full Name (Last, First, Middle Initial) Mark J. Backe		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 4419 N Wildwood Ave		Transaction ID: 2010072819050-653		
	City Shorewood	State WI	Zip Code 53211-1408	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Ast Gn Cnl/Ins			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00			

C.	Full Name (Last, First, Middle Initial) Jerome R. Baier		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 19820 Tralee Ct		Transaction ID: 2010071319154-693		
	City Brookfield	State WI	Zip Code 53045-2129	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation Managing Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 652.00			

SUBTOTAL of Receipts This Page (optional)	▶	60.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Jerome R. Baier
Mailing Address 19820 Tralee Ct
City Brookfield State WI Zip Code 53045-2129
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 ▼ 652.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-692
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
David A. Barras
Mailing Address 8700 W Bennington Ct
City Mequon State WI Zip Code 53097-3440
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 ▼ 336.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-673
Amount of Each Receipt this Period 18.00

C. Full Name (Last, First, Middle Initial)
David A. Barras
Mailing Address 8700 W Bennington Ct
City Mequon State WI Zip Code 53097-3440
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 ▼ 336.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-672
Amount of Each Receipt this Period 18.00

SUBTOTAL of Receipts This Page (optional) ► 56.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 122
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Rebekah B. Barsch

Mailing Address N46 W5455 Spring Court

City Cedarburg State WI Zip Code 53012

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

Name of Employer NML Occupation Dir Strat Plng & Cnsltg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 2010072819050-822

Amount of Each Receipt this Period 15.00

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

Mailing Address 1671 Deer Springs Cir

City Bettendorf State IA Zip Code 52722-7148

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071519050-6

Amount of Each Receipt this Period 42.00

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

Mailing Address 1671 Deer Springs Cir

City Bettendorf State IA Zip Code 52722-7148

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 20100802105347-6

Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 99.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 5413 Mount Corcoran PI

City State Zip Code
Burke VA 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 07 / 15 / 2010
Transaction ID: 2010071319154-549
Amount of Each Receipt this Period: 35.00

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

Mailing Address 5413 Mount Corcoran PI

City State Zip Code
Burke VA 22015-2188

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

Name of Employer NML Occupation VP Federal Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt: 07 / 31 / 2010
Transaction ID: 2010072819050-548
Amount of Each Receipt this Period: 35.00

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

Mailing Address 23300 Dover Line Rd

City State Zip Code
Waterford WI 53185-4908

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

Name of Employer NML Occupation VP IS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 364.00

Date of Receipt: 07 / 15 / 2010
Transaction ID: 2010071319154-965
Amount of Each Receipt this Period: 26.00

SUBTOTAL of Receipts This Page (optional) ► 96.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Blaise C. Beaulier		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 23300 Dover Line Rd		Transaction ID: 2010072819050-964		
	City Waterford	State WI	Zip Code 53185-4908	Amount of Each Receipt this Period 26.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP IS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 364.00			

B.	Full Name (Last, First, Middle Initial) Mitchell C Beer		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 3387 Hampton Ct		Transaction ID: 2010071519050-44		
	City Thousand Oaks	State CA	Zip Code 91362-1130	Amount of Each Receipt this Period 125.00	
	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 ▼ 754.00			

C.	Full Name (Last, First, Middle Initial) Mitchell C Beer		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 3387 Hampton Ct		Transaction ID: 20100802105347-44		
	City Thousand Oaks	State CA	Zip Code 91362-1130	Amount of Each Receipt this Period 125.00	
	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 ▼ 754.00			

SUBTOTAL of Receipts This Page (optional)	▶	276.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 122
(check only one)

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

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

A.

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

Mailing Address 116 Belden Hill Rd

City State Zip Code
Wilton CT 06897-2911

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-47

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 116 Belden Hill Rd

City State Zip Code
Wilton CT 06897-2911

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-47

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 4141 N Murray Ave

City State Zip Code
Shorewood WI 53211-2011

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

Name of Employer NML Occupation
NML Ast Gn Cnl/Secur

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-546

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 122
(check only one)

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

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

A.

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

Mailing Address 4141 N Murray Ave

City Shorewood State WI Zip Code 53211-2011

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

Name of Employer NML Occupation Ast Gn Cnl/Secur

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 2010072819050-545

Amount of Each Receipt this Period 30.00

B.

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

Mailing Address 1140 Burnet St

City Brookfield State WI Zip Code 53005-6835

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071319154-988

Amount of Each Receipt this Period 15.00

C.

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

Mailing Address 1140 Burnet St

City Brookfield State WI Zip Code 53005-6835

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

Name of Employer NML Occupation Rvp Fld Supv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 2010072819050-987

Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Dwaan C Black		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 3520 Dumbarton Rd NW		Transaction ID: 2010071519050-39
	City Atlanta	State GA	Zip Code 30327-2614
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	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 ▼ 654.00	

B.	Full Name (Last, First, Middle Initial) Dwaan C Black		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 3520 Dumbarton Rd NW		Transaction ID: 20100802105347-39
	City Atlanta	State GA	Zip Code 30327-2614
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	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 ▼ 654.00	

C.	Full Name (Last, First, Middle Initial) Garrett J. Bleakley		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 5460 Chelsea Ave		Transaction ID: 2010071519050-19
	City La Jolla	State CA	Zip Code 92037-7607
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 122
(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial) Garrett J. Bleakley		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
Mailing Address 5460 Chelsea Ave		Transaction ID: 20100802105347-19
City La Jolla	State CA	Zip Code 92037-7607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Debra Blevons Wascher		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
Mailing Address 165 S Pine Ct		Transaction ID: 2010071519050-74
City Appleton	State WI	Zip Code 54914-8222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	

C.

Full Name (Last, First, Middle Initial) Debra Blevons Wascher		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
Mailing Address 165 S Pine Ct		Transaction ID: 20100802105347-74
City Appleton	State WI	Zip Code 54914-8222
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00	

SUBTOTAL of Receipts This Page (optional)	109.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 122

(check only one)

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

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

A.

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

Mailing Address 8677 Alvarado Ct

City State Zip Code
Inver Grove MN 55077-3121

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-21

Amount of Each Receipt this Period

208.00

B.

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

Mailing Address 8677 Alvarado Ct

City State Zip Code
Inver Grove MN 55077-3121

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-21

Amount of Each Receipt this Period

208.00

C.

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

Mailing Address 15375 Kata Dr

City State Zip Code
Elm Grove WI 53122-1028

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

Name of Employer NML Occupation
NML VP - Era

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-833

Amount of Each Receipt this Period

44.00

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Sandra L. Botcher

Mailing Address 15375 Kata Dr

City State Zip Code
Elm Grove WI 53122-1028

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

Name of Employer NML Occupation VP - Era

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 376.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-832

Amount of Each Receipt this Period
44.00

B.

Full Name (Last, First, Middle Initial)

Mark C. Boyle

Mailing Address 720 E Wisconsin Ave

City State Zip Code
Milwaukee WI 53202-4703

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-848

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Mark C. Boyle

Mailing Address 720 E Wisconsin Ave

City State Zip Code
Milwaukee WI 53202-4703

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-847

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ▶

94.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Jennifer L. Brase		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 12877 N Cobblestone Ct		Transaction ID: 2010071319154-868		
	City Mequon	State WI	Zip Code 53097-1812	Amount of Each Receipt this Period 25.00	
	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 ▼ 290.00			

B.	Full Name (Last, First, Middle Initial) Jennifer L. Brase		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 12877 N Cobblestone Ct		Transaction ID: 2010072819050-867		
	City Mequon	State WI	Zip Code 53097-1812	Amount of Each Receipt this Period 25.00	
	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 ▼ 290.00			

C.	Full Name (Last, First, Middle Initial) Kristofer D. Breitzman		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address W290N3649 Tall Tree Ct		Transaction ID: 2010071319154-949		
	City Pewaukee	State WI	Zip Code 53072-3152	Amount of Each Receipt this Period 20.00	
	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 ▼ 280.00			

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kristofer D. Breitzman

Mailing Address W290 N3649 Tall Tree

City State Zip Code
Pewaukee WI 53072

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 ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-948

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address 395 La Casa Via

City State Zip Code
Walnut Creek CA 94598-4842

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-37

Amount of Each Receipt this Period
125.00

C.

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

Mailing Address 395 La Casa Via

City State Zip Code
Walnut Creek CA 94598-4842

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-37

Amount of Each Receipt this Period
125.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 122

(check only one)

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

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

A.

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

Mailing Address 7322 N Mohawk Rd

City State Zip Code
Fox Point WI 53217-3454

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

Name of Employer NML Occupation VP & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-970

Amount of Each Receipt this Period
75.00

B.

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

Mailing Address 7322 N Mohawk Rd

City State Zip Code
Fox Point WI 53217-3454

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

Name of Employer NML Occupation VP & CFO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-969

Amount of Each Receipt this Period
75.00

C.

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

Mailing Address 317 Evening Star Ln

City State Zip Code
Bozeman MT 59715-7738

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-54

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ▶

192.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 122
(check only one)

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

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

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

Mailing Address 317 Evening Star Ln

City Bozeman State MT Zip Code 59715-7738

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 20100802105347-54

Amount of Each Receipt this Period 42.00

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

Mailing Address 12 High Meadow Ln

City Amherst State NH Zip Code 03031-2554

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071519050-53

Amount of Each Receipt this Period 125.00

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

Mailing Address 12 High Meadow Ln

City Amherst State NH Zip Code 03031-2554

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 20100802105347-53

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 292.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 122
(check only one)

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

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

A.

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

Mailing Address N55W21701 Adamdale Dr

City State Zip Code
Menomonee Falls WI 53051-6272

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

Name of Employer NML Occupation VP Compliance/Bp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-694

Amount of Each Receipt this Period
57.00

B.

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

Mailing Address N55 W21701 Adamdale

City State Zip Code
Menomonee Fal WI 53051

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

Name of Employer NML Occupation VP Compliance/Bp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-693

Amount of Each Receipt this Period
57.00

C.

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

Mailing Address 923 E Kilbourn Ave

City State Zip Code
Milwaukee WI 53202-3493

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

Name of Employer NML Occupation Svp Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1640.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-668

Amount of Each Receipt this Period
112.00

SUBTOTAL of Receipts This Page (optional) ► 226.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 122

(check only one)

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

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

A.

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

Mailing Address 923 E Kilbourn Ave

City State Zip Code
Milwaukee WI 53202-3493

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

Name of Employer Occupation
NML Svp Real Estate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1640.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-667

Amount of Each Receipt this Period
112.00

B.

Full Name (Last, First, Middle Initial)
Richard M. Condrey

Mailing Address 907 Williamson Dr

City State Zip Code
Raleigh NC 27608-2307

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-14

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Richard M. Condrey

Mailing Address 907 Williamson Dr

City State Zip Code
Raleigh NC 27608-2307

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-14

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional)

528.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 122

(check only one)

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

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

A.

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

Mailing Address 2961 Belclaire Dr

City State Zip Code
Frisco TX 75034-5969

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-43

Amount of Each Receipt this Period

208.00

B.

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

Mailing Address 2961 Belclaire Dr

City State Zip Code
Frisco TX 75034-5969

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-43

Amount of Each Receipt this Period

208.00

C.

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

Mailing Address 6251 S Billings Way

City State Zip Code
Centennial CO 80111-6009

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-36

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

466.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Brian R. Cunningham
Mailing Address 6251 S Billings Way
City Centennial State CO Zip Code 80111-6009
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 700.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-36
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Jefferson V. De Angelis
Mailing Address 4449 W Donges Bay Rd
City Mequon State WI Zip Code 53092-4883
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation President Msa
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 2330.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-571
Amount of Each Receipt this Period 151.00

C. Full Name (Last, First, Middle Initial)
Jefferson V. De Angelis
Mailing Address 4449 W Donges Bay Rd
City Mequon State WI Zip Code 53092-4883
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation President Msa
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 2330.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-570
Amount of Each Receipt this Period 151.00

SUBTOTAL of Receipts This Page (optional) **352.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 122

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)

Lew D. Derrickson

Mailing Address 5799 Sunset Ln

City State Zip Code
Indianapolis IN 46228-1447

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-12

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)

Lew D. Derrickson

Mailing Address 5799 Sunset Ln

City State Zip Code
Indianapolis IN 46228-1447

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-12

Amount of Each Receipt this Period

208.00

C.

Full Name (Last, First, Middle Initial)

James S. Dobbs

Mailing Address RR 1 Box 51B

City State Zip Code
Ripley WV 25271-9705

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-8

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)

441.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) James S. Dobbs		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address RR 1 Box 51B		Transaction ID: 20100802105347-8		
	City Ripley	State WV	Zip Code 25271-9705	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

B.	Full Name (Last, First, Middle Initial) Richard P Dodd		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 7078 E Genesee St		Transaction ID: 2010071519050-40		
	City Fayetteville	State NY	Zip Code 13066-1123	Amount of Each Receipt this Period 208.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation General Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.00			

C.	Full Name (Last, First, Middle Initial) Richard P Dodd		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 7078 E Genesee St		Transaction ID: 20100802105347-40		
	City Fayetteville	State NY	Zip Code 13066-1123	Amount of Each Receipt this Period 208.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation General Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.00			

SUBTOTAL of Receipts This Page (optional)	▶	441.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 122
(check only one)

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

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

A.

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

Mailing Address 8420 N Pelican Ln

City State Zip Code
River Hills WI 53217-2058

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 ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-847

Amount of Each Receipt this Period
208.00

B.

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

Mailing Address 8420 N Pelican Ln

City State Zip Code
River Hills WI 53217-2058

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 ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-846

Amount of Each Receipt this Period
208.00

C.

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

Mailing Address 9 Falcon Dr

City State Zip Code
Mandeville LA 70471-2952

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

Name of Employer NML Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-41

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **624.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 122
(check only one)

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

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

A.

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

Mailing Address 9 Falcon Dr

City State Zip Code
Mandeville LA 70471-2952

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

Name of Employer NML Occupation Special Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-41

Amount of Each Receipt this Period
208.00

B.

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

Mailing Address N71W31034 Lower Club Cir W

City State Zip Code
Hartland WI 53029-8716

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

Name of Employer NML Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 518.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-622

Amount of Each Receipt this Period
37.00

C.

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

Mailing Address N71W31034 Lower Club Cir W

City State Zip Code
Hartland WI 53029-8716

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

Name of Employer NML Occupation VP & Ipas Cnsl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 518.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-621

Amount of Each Receipt this Period
37.00

SUBTOTAL of Receipts This Page (optional) ► 282.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 122

(check only one)

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

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

A.

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

Mailing Address 2520 Hanford Ln

City State Zip Code
Aurora IL 60502-6969

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-45

Amount of Each Receipt this Period

150.00

B.

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

Mailing Address 2520 Hanford Ln

City State Zip Code
Aurora IL 60502-6969

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-45

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
Ralph David Ells

Mailing Address 9927 N Valley Hill D

City State Zip Code
Mequon WI 53092

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

Name of Employer NML Occupation
NML Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 532.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-884

Amount of Each Receipt this Period

38.00

SUBTOTAL of Receipts This Page (optional)

338.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 122
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
Ralph David Ells

Mailing Address 9927 N Valley Hill D

City State Zip Code
Mequon WI 53092

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 532.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-883

Amount of Each Receipt this Period
38.00

B.

Full Name (Last, First, Middle Initial)
Keith A. Erhard

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-30

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Keith A. Erhard

Mailing Address 4807 Timberwood Ct

City State Zip Code
West Des Moines IA 50265-5447

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-30

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 122.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John C. Ertz
Mailing Address 18235 Shaker Blvd
City Shaker Heights State OH Zip Code 44120-1754
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 980.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-29
Amount of Each Receipt this Period 70.00

B. Full Name (Last, First, Middle Initial)
John C. Ertz
Mailing Address 18235 Shaker Blvd
City Shaker Heights State OH Zip Code 44120-1754
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 980.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-29
Amount of Each Receipt this Period 70.00

C. Full Name (Last, First, Middle Initial)
Christina H. Fiasca
Mailing Address 9230 N Fairway Dr
City Bayside State WI Zip Code 53217-1317
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Svp Agency Svcs
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1190.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-912
Amount of Each Receipt this Period 85.00

SUBTOTAL of Receipts This Page (optional) ► 225.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 122

(check only one)

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

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

A.

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

Mailing Address 9230 N Fairway Dr

City State Zip Code
Bayside WI 53217-1317

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

Name of Employer NML Occupation Svp Agency Svcs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1190.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-911

Amount of Each Receipt this Period

85.00

B.

Full Name (Last, First, Middle Initial)
Daniel M. Flesch

Mailing Address 369 Sunshine Dr

City State Zip Code
Hartland WI 53029-8559

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 ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-915

Amount of Each Receipt this Period

15.00

C.

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

Mailing Address 1638 Del Dayo Dr

City State Zip Code
Carmichael CA 95608-6052

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-33

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)

308.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) John E. Fobes, II		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 1638 del Dayo Dr		Transaction ID: 20100802105347-33
	City State Zip Code Carmichael CA 95608-6052	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 208.00
	Name of Employer Self-Employed Occupation General Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2912.00

B.	Full Name (Last, First, Middle Initial) Donald Forecki		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 208 Laurel Ln		Transaction ID: 2010072819050-775
	City State Zip Code South Milwaukee WI 53172-1071	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15.00
	Name of Employer NML Occupation Dir Inv Ops	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00

C.	Full Name (Last, First, Middle Initial) Lee M. Fortenberry		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 115 Hillside Rd		Transaction ID: 2010071519050-55
	City State Zip Code Mechanicsburg PA 17050-1728	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 42.00
	Name of Employer Self-Employed Occupation General Insurance Agent	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 588.00

SUBTOTAL of Receipts This Page (optional)	▶	265.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Lee M. Fortenberry

Mailing Address 115 Hillside Rd

City State Zip Code
Mechanicsburg PA 17050-1728

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
588.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-55

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Lance P. Franczyk

Mailing Address 2224 E 24th St

City State Zip Code
Tulsa OK 74114-2912

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-57

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Lance P. Franczyk

Mailing Address 2224 E 24th St

City State Zip Code
Tulsa OK 74114-2912

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
654.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-57

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **192.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 122
(check only one)

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

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

A.

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

Mailing Address 5 Gennaro Cir

City State Zip Code
Wayland MA 01778-4436

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-28

Amount of Each Receipt this Period
125.00

B.

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

Mailing Address 5 Gennaro Cir

City State Zip Code
Wayland MA 01778-4436

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-28

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Sheila M. Gavin

Mailing Address 5735 N Crestwood Blvd

City State Zip Code
Glendale WI 53209-4309

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

Name of Employer NML Occupation
NML Ast Gn Cnl/Ins

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-1038

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional) ▶ **277.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Sheila M. Gavin

Mailing Address 5735 N Crestwood Blvd

City State Zip Code
Glendale WI 53209-4309

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

Name of Employer NML Occupation
Ast Gn Cnl/Ins

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 378.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1037

Amount of Each Receipt this Period
27.00

B.

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

Mailing Address 5421 N Idlewild Ave

City State Zip Code
Whitefish Bay WI 53217-5331

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

Name of Employer NML Occupation
VP Field Comp & Plg

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-616

Amount of Each Receipt this Period
30.00

C.

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

Mailing Address 5421 N Idlewild Ave

City State Zip Code
Whitefish Bay WI 53217-5331

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

Name of Employer NML Occupation
VP Field Comp & Plg

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-615

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶

87.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 122
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 13040 W Hawthorne Ln

City State Zip Code
New Berlin WI 53151-8742

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

Name of Employer NML Occupation VP Acctg Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-610

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
Mitchell B. Glover

Mailing Address 6700 Old Darby Trl NE

City State Zip Code
Ada MI 49301-8360

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-26

Amount of Each Receipt this Period
125.00

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

Mailing Address 6700 Old Darby Trl NE

City State Zip Code
Ada MI 49301-8360

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-26

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 265.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Kimberley Goode		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 2485 W Fairy Chasm Rd		Transaction ID: 2010071319154-563		
	City River Hills	State WI	Zip Code 53217-1536	Amount of Each Receipt this Period 63.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP Comm			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 882.00			

B.	Full Name (Last, First, Middle Initial) Kimberley Goode		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 2485 W Fairy Chasm R		Transaction ID: 2010072819050-562		
	City River Hills	State WI	Zip Code 53217	Amount of Each Receipt this Period 63.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP Comm			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 882.00			

C.	Full Name (Last, First, Middle Initial) Tom Goris, Jr.		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 8042 Cheverny Dr		Transaction ID: 2010071519050-38		
	City Mequon	State WI	Zip Code 53097-2532	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1750.00			

SUBTOTAL of Receipts This Page (optional)	▶	251.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Tom Goris, Jr.	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 8042 Cheverny Dr	Transaction ID: 20100802105347-38
	City State Zip Code Mequon WI 53097-2532	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1750.00	

B.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur	Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 12895 N Cobblestone Ct	Transaction ID: 2010071319154-1102
	City State Zip Code Mequon WI 53097-1812	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation VP & Chief Tech Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

C.	Full Name (Last, First, Middle Initial) Karl G. Gouverneur	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 12895 N Cobblestone Ct	Transaction ID: 2010072819050-1101
	City State Zip Code Mequon WI 53097-1812	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation VP & Chief Tech Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional)	▶	165.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 122
(check only one)

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

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

A.

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

Mailing Address 706 W Acacia Rd

City State Zip Code
Glendale WI 53217-4008

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-1011

Amount of Each Receipt this Period
88.00

B.

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

Mailing Address 706 W Acacia Rd

City State Zip Code
Glendale WI 53217-4008

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

Name of Employer NML Occupation Pres & CEO Wealth Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1232.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-1010

Amount of Each Receipt this Period
88.00

C.

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

Mailing Address 2155 Hickory Ct

City State Zip Code
Oshkosh WI 54901-2581

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-7

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **218.00**

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

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

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

FOR LINE NUMBER: PAGE 41 / 122

(check only one)

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

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

A.

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

Mailing Address 2155 Hickory Ct

City State Zip Code
Oshkosh WI 54901-2581

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-7

Amount of Each Receipt this Period
42.00

B.

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

Mailing Address W73N377 Mulberry Ave

City State Zip Code
Cedarburg WI 53012-2648

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

Name of Employer Occupation
NML VP-New Business

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 756.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-638

Amount of Each Receipt this Period
54.00

C.

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

Mailing Address W73 N377 Mulberry Avenue

City State Zip Code
Cedarburg WI 53012

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

Name of Employer Occupation
NML VP-New Business

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 756.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-637

Amount of Each Receipt this Period
54.00

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 122
(check only one)

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

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

A.

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

Mailing Address 126 Waverly Cir

City Phoenixville State PA Zip Code 19460-2500

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071519050-52

Amount of Each Receipt this Period 42.00

B.

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

Mailing Address 126 Waverly Cir

City Phoenixville State PA Zip Code 19460-2500

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 20100802105347-52

Amount of Each Receipt this Period 42.00

C.

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

Mailing Address 804 Montparnasse PI

City Newtown Sq State PA Zip Code 19073-2623

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071519050-27

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► 209.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 122

(check only one)

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

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

A.

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

Mailing Address 804 Montparnasse Pl

City State Zip Code
Newtown Sq PA 19073-2623

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-27

Amount of Each Receipt this Period

125.00

B.

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

Mailing Address 4753 N Larkin St

City State Zip Code
Whitefish Bay WI 53211-1152

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

Name of Employer Occupation
NML Medical Dir/HR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 214.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1012

Amount of Each Receipt this Period

17.00

C.

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

Mailing Address 18443 Melissa Cir

City State Zip Code
Eden Prairie MN 55347-1058

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

Name of Employer Occupation
NML Special Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-51

Amount of Each Receipt this Period

208.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Mark J Heurung

Mailing Address 18443 Melissa Cir

City State Zip Code
Eden Prairie MN 55347-1058

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-51

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)

Gary M. Hewitt

Mailing Address 2045 Elm Tree Rd

City State Zip Code
Elm Grove WI 53122-1117

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

Name of Employer NML Occupation VP Treas & Inv Ops

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 976.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-906

Amount of Each Receipt this Period
68.00

C.

Full Name (Last, First, Middle Initial)

Gary M. Hewitt

Mailing Address 2045 Elm Tree Rd

City State Zip Code
Elm Grove WI 53122-1117

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

Name of Employer NML Occupation VP Treas & Inv Ops

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 976.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-905

Amount of Each Receipt this Period
68.00

SUBTOTAL of Receipts This Page (optional)

344.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 45 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael T. Holloway
Mailing Address 425 Lake Bluff Ln
City Grafton State WI Zip Code 53024-9764
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-872
Amount of Each Receipt this Period 12.00

B. Full Name (Last, First, Middle Initial)
Michael T. Holloway
Mailing Address 425 Lake Bluff Ln
City Grafton State WI Zip Code 53024-9764
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-871
Amount of Each Receipt this Period 12.00

C. Full Name (Last, First, Middle Initial)
Steve H. Holter
Mailing Address 11390 N Creekside Ct
City Mequon State WI Zip Code 53092-4377
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1916.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-59
Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 232.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 46 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Steve H. Holter
Mailing Address 11390 N Creekside Ct
City State Zip Code
Mequon WI 53092-4377
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1916.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-59
Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
Harry P. Hoopis
Mailing Address 1133 Elm Tree Rd
City State Zip Code
Lake Forest IL 60045-1413
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-1
Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Harry P. Hoopis
Mailing Address 1133 Elm Tree Rd
City State Zip Code
Lake Forest IL 60045-1413
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-1
Amount of Each Receipt this Period 208.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Brian J. Hubbell

Mailing Address 1701 E Westminster Ln

City State Zip Code
Spokane WA 99223-6712

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

Name of Employer Self-Employed
Occupation
General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-15

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Brian J. Hubbell

Mailing Address 1701 E Westminster Ln

City State Zip Code
Spokane WA 99223-6712

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

Name of Employer Self-Employed
Occupation
General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-15

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 5612 Enderly Rd

City State Zip Code
Baltimore MD 21212-2939

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

Name of Employer
NML
Occupation
General Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-32

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 122

(check only one)

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

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

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

A.

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

Mailing Address 5612 Enderly Rd

City State Zip Code
Baltimore MD 21212-2939

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

Name of Employer NML Occupation General Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-32

Amount of Each Receipt this Period

125.00

B.

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

Mailing Address 23702 Champe Ford Rd

City State Zip Code
Middleburg VA 20117-2940

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

Name of Employer NML Occupation Director-Field Production

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 962.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-934

Amount of Each Receipt this Period

25.00

C.

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

Mailing Address 23702 Champe Ford Rd

City State Zip Code
Middleburg VA 20117-2940

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

Name of Employer NML Occupation Director-Field Production

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 962.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-933

Amount of Each Receipt this Period

25.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 122
(check only one)

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

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

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

A. Full Name (Last, First, Middle Initial)
Shawn F. Kelley

Mailing Address 16 Vintage Walk

City State Zip Code
Cincinnati OH 45249-2101

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
670.66

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-70

Amount of Each Receipt this Period
83.33

B. Full Name (Last, First, Middle Initial)
Shawn F. Kelley

Mailing Address 16 Vintage Walk

City State Zip Code
Cincinnati OH 45249-2101

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
670.66

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-70

Amount of Each Receipt this Period
83.33

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

Mailing Address 5806 N Kent Ave

City State Zip Code
Whitefish Bay WI 53217-4612

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

Name of Employer NML Occupation
NML VP & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
854.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-608

Amount of Each Receipt this Period
61.00

SUBTOTAL of Receipts This Page (optional) ► **227.66**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 122
(check only one)

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

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

A.

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

Mailing Address 5806 N Kent Ave

City State Zip Code
Whitefish Bay WI 53217-4612

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

Name of Employer NML Occupation VP & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 854.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-607

Amount of Each Receipt this Period
61.00

B.

Full Name (Last, First, Middle Initial)
Troy B. Kemelgor

Mailing Address 8930 Dunn Ct

City State Zip Code
Dublin OH 43017-8880

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-67

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Troy B. Kemelgor

Mailing Address 8930 Dunn Ct

City State Zip Code
Dublin OH 43017-8880

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-67

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► 145.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mark E. Kishler

Mailing Address 720 E Wisconsin Ave

City Milwaukee State WI Zip Code 53202-4703

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-623
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Mark E. Kishler

Mailing Address 720 E Wisconsin Ave

City Milwaukee State WI Zip Code 53202-4703

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-622
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Pamela A. Knox

Mailing Address 6109 Audubon Manor Blvd # B

City Lithia State FL Zip Code 33547-5032

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

Name of Employer NML Occupation District Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-1041
Amount of Each Receipt this Period 16.00

SUBTOTAL of Receipts This Page (optional) ► 56.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 122
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

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

A.	Full Name (Last, First, Middle Initial) Pamela A. Knox		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 6109 Audubon Manor B		Transaction ID: 2010072819050-1040
	City Lithia	State FL	Zip Code 33547
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 16.00
	Name of Employer NML	Occupation District Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.00	

B.	Full Name (Last, First, Middle Initial) William S. Koch		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 4645 Swilcan Bridge Ln S		Transaction ID: 2010071519050-23
	City Jacksonville	State FL	Zip Code 32224-5621
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

C.	Full Name (Last, First, Middle Initial) William S. Koch		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 4645 Swilcan Bridge Ln S		Transaction ID: 20100802105347-23
	City Jacksonville	State FL	Zip Code 32224-5621
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
	Name of Employer Self-Employed	Occupation General Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1450.00	

SUBTOTAL of Receipts This Page (optional)	▶	266.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 122

(check only one)

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

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

A.

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

Mailing Address 2522 W Daphne Rd

City State Zip Code
Glendale WI 53209-3352

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

Name of Employer NML Occupation VP Disability Income

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 822.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-1044

Amount of Each Receipt this Period
63.00

B.

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

Mailing Address 2522 W Daphne Rd

City State Zip Code
Glendale WI 53209-3352

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

Name of Employer NML Occupation VP Disability Income

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 822.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1043

Amount of Each Receipt this Period
63.00

C.

Full Name (Last, First, Middle Initial)
Steven H. Kosnick

Mailing Address 5799 Windsona Cir

City State Zip Code
Fitchburg WI 53711-5839

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-17

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional)

168.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Steven H. Kosnick		Date of Receipt
	Mailing Address 5799 Windsona Cir		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 31 / 2010
	City	State	Zip Code
	Fitchburg	WI	53711-5839
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 20100802105347-17
Name of Employer Self-Employed		Occupation General Insurance Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 588.00	<input type="text"/> 42.00

B.	Full Name (Last, First, Middle Initial) Carol L. Kracht		Date of Receipt
	Mailing Address 449 E Cedar Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 15 / 2010
	City	State	Zip Code
	Mequon	WI	53092-6102
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 2010071319154-971
Name of Employer NML		Occupation VP Dep Gc/Sec & Board Rel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 442.00	<input type="text"/> 29.00

C.	Full Name (Last, First, Middle Initial) Carol L. Kracht		Date of Receipt
	Mailing Address 449 E Cedar Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 31 / 2010
	City	State	Zip Code
	Mequon	WI	53092-6102
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 2010072819050-970
Name of Employer NML		Occupation VP Dep Gc/Sec & Board Rel	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 442.00	<input type="text"/> 29.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 100.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 55 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Todd L. Laszewski

Mailing Address 2604 N 90th St

City State Zip Code
Milwaukee WI 53226-1813

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

Name of Employer NML Occupation Dir Lp Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-892
Amount of Each Receipt this Period 16.00

B. Full Name (Last, First, Middle Initial)
Michael K. Lawhon

Mailing Address 6952 Burnt Sienna Cir

City State Zip Code
Naples FL 34109-7826

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.66

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-62
Amount of Each Receipt this Period 83.33

C. Full Name (Last, First, Middle Initial)
Michael K. Lawhon

Mailing Address 6952 Burnt Sienna Cir

City State Zip Code
Naples FL 34109-7826

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.66

Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-62
Amount of Each Receipt this Period 83.33

SUBTOTAL of Receipts This Page (optional) ► 182.66

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

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

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

FOR LINE NUMBER: PAGE 56 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Werner Loots
Mailing Address 2664 N Summit Ave
City Milwaukee State WI Zip Code 53211-3849
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Strat Intel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 456.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-595
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Werner Loots
Mailing Address 2664 N Summit Ave
City Milwaukee State WI Zip Code 53211-3849
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Strat Intel
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 456.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-594
Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Robert D. Lowrey
Mailing Address 1108 W Goldthread Cir
City Sioux Falls State SD Zip Code 57108-2824
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 588.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-22
Amount of Each Receipt this Period 42.00

SUBTOTAL of Receipts This Page (optional) ► 102.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert D. Lowrey

Mailing Address 1108 W Goldthread Cir

City State Zip Code
Sioux Falls SD 57108-2824

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-22

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey J. Lueken

Mailing Address 1213 E Goodrich Ln

City State Zip Code
Fox Point WI 53217-2946

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

Name of Employer Occupation
NML Svp Securities

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1848.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-898

Amount of Each Receipt this Period

126.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey J. Lueken

Mailing Address 1213 E Goodrich Ln

City State Zip Code
Fox Point WI 53217-2946

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

Name of Employer Occupation
NML Svp Securities

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1848.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-897

Amount of Each Receipt this Period

126.00

SUBTOTAL of Receipts This Page (optional)

294.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 122

(check only one)

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

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

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

A.

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

Mailing Address N31W23910 Old Farm Ct

City State Zip Code
Pewaukee WI 53072-4090

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

Name of Employer NML Occupation IS Cons

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-535

Amount of Each Receipt this Period
20.00

B.

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

Mailing Address N31 W23910 Old Farm

City State Zip Code
Pewaukee WI 53072

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

Name of Employer NML Occupation IS Cons

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-534

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Jean M. Maier

Mailing Address 5432 N Diversey Blvd

City State Zip Code
Whitefish Bay WI 53217-5165

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

Name of Employer NML Occupation Svp Ent Ops & Cco

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-526

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶

190.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 122
(check only one)

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

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

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

A. Full Name (Last, First, Middle Initial)
Jean M. Maier

Mailing Address 5432 N Diversey Blvd

City State Zip Code
Whitefish Bay WI 53217-5165

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

Name of Employer NML Occupation Svp Ent Ops & Cco

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-525

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Raymond J. Manista

Mailing Address 7236 N Crossway Rd

City State Zip Code
Fox Point WI 53217-3519

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

Name of Employer NML Occupation Gen Cnsl & Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 986.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-559

Amount of Each Receipt this Period
73.00

C. Full Name (Last, First, Middle Initial)
Raymond J. Manista

Mailing Address 7236 N Crossway Rd

City State Zip Code
Fox Point WI 53217-3519

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

Name of Employer NML Occupation Gen Cnsl & Sec

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 986.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-558

Amount of Each Receipt this Period
73.00

SUBTOTAL of Receipts This Page (optional) ► 296.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Meridee J. Maynard

Mailing Address 809 E Lake Forest Ave

City State Zip Code
Whitefish Bay WI 53217-5377

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

Name of Employer NML Occupation Svp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1162.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-826

Amount of Each Receipt this Period
83.00

B.

Full Name (Last, First, Middle Initial)
Meridee J. Maynard

Mailing Address 809 E Lake Forest Ave

City State Zip Code
Whitefish Bay WI 53217-5377

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

Name of Employer NML Occupation Svp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1162.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-825

Amount of Each Receipt this Period
83.00

C.

Full Name (Last, First, Middle Initial)
David C. Mc Avoy

Mailing Address 11 Mountview Rd

City State Zip Code
Wellesley MA 02481-2757

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2816.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-11

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **374.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David C. Mc Avoy

Mailing Address 11 Mountview Rd

City State Zip Code
Wellesley Hills MA 02481-2757

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2816.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-11

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Roger M. Mc Queen

Mailing Address 5820 Twin Creek Rd

City State Zip Code
Salt Lake Cty UT 84108-3605

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-9

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Roger M. Mc Queen

Mailing Address 5820 Twin Creek Rd

City State Zip Code
Salt Lake Cty UT 84108-3605

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-9

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ▶

458.00

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

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

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

FOR LINE NUMBER: PAGE 62 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Brian W. McClure

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code
Champaign IL 61822-3349

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-72

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Brian W. McClure

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code
Champaign IL 61822-3349

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-72

Amount of Each Receipt this Period
42.00

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

Mailing Address 2571 N 86th St

City State Zip Code
Wauwatosa WI 53226-1921

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

Name of Employer NML Occupation
NML VP Inv Adv Svc

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-594

Amount of Each Receipt this Period
23.00

SUBTOTAL of Receipts This Page (optional) ► **107.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 122
(check only one)

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

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

A.

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

Mailing Address 2571 N 86th St

City Milwaukee State WI Zip Code 53226-1921

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

Name of Employer NML Occupation VP Inv Adv Svc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 2010072819050-593

Amount of Each Receipt this Period 23.00

B.

Full Name (Last, First, Middle Initial)
John W. McTigue

Mailing Address 205 E 4th St

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 15 / 2010

Transaction ID: 2010071519050-16

Amount of Each Receipt this Period 208.00

C.

Full Name (Last, First, Middle Initial)
John W. McTigue

Mailing Address 205 E 4th St

City Hinsdale State IL Zip Code 60521-4603

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 20100802105347-16

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► **439.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Joseph F. Meier

Mailing Address 208 Long Acres Ln

City State Zip Code
Oviedo FL 32765-7843

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-20

Amount of Each Receipt this Period

42.00

B.

Full Name (Last, First, Middle Initial)

Joseph F. Meier

Mailing Address 208 Long Acres Ln

City State Zip Code
Oviedo FL 32765-7843

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-20

Amount of Each Receipt this Period

42.00

C.

Full Name (Last, First, Middle Initial)

Robert G. Meilander

Mailing Address 6900 N Glen Shore Dr

City State Zip Code
Glendale WI 53209-2819

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

Name of Employer Occupation
NML VP-Corporate Actuary

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-551

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)

114.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert G. Meilander

Mailing Address 6900 N Glen Shore Dr

City State Zip Code
Glendale WI 53209-2819

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

Name of Employer Occupation
NML VP-Corporate Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-550

Amount of Each Receipt this Period
30.00

B.

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

Mailing Address 15712 Point Monroe Dr NE

City State Zip Code
Bainbridge Island WA 98110-1158

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-5

Amount of Each Receipt this Period
125.00

C.

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

Mailing Address 15712 Point Monroe Dr NE

City State Zip Code
Bainbridge Island WA 98110-1158

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-5

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ▶

280.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Ben Miller

Mailing Address 34 Storyteller Ct

City Sandia Park State NM Zip Code 87047-8542

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt MM / DD / YYYY 07 / 15 / 2010

Transaction ID: 2010071519050-65

Amount of Each Receipt this Period 42.00

B.

Full Name (Last, First, Middle Initial)
Ben Miller

Mailing Address 34 Storyteller Ct

City Sandia Park State NM Zip Code 87047-8542

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt MM / DD / YYYY 07 / 31 / 2010

Transaction ID: 20100802105347-65

Amount of Each Receipt this Period 42.00

C.

Full Name (Last, First, Middle Initial)
Kevin E. Miller

Mailing Address 214 Schenley Rd

City Pittsburgh State PA Zip Code 15217-1171

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt MM / DD / YYYY 07 / 15 / 2010

Transaction ID: 2010071519050-50

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 292.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Kevin E. Miller	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 214 Schenley Rd	Transaction ID: 20100802105347-50
	City State Zip Code Pittsburgh PA 15217-1171	Amount of Each Receipt this Period 208.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation General Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2912.00	

B.	Full Name (Last, First, Middle Initial) Scott J. Morris	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 4406 N Madero Drive	Transaction ID: 2010072819050-1056
	City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Ast Gn Cnl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Martin A. Moser	Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 378 Juniper Ct	Transaction ID: 2010071319154-591
	City State Zip Code Grafton WI 53024-2270	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 ▼ 308.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Martin A. Moser

Mailing Address 378 Juniper Ct

City State Zip Code
Grafton WI 53024-2270

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

Name of Employer NML Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 308.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-590

Amount of Each Receipt this Period
22.00

B. Full Name (Last, First, Middle Initial)
Ronald C. Nelson

Mailing Address 5275 N Lake Dr

City State Zip Code
Whitefish Bay WI 53217-5371

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

Name of Employer NML Occupation Dir Rsrch & Prod Spt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-599

Amount of Each Receipt this Period
2.00

C. Full Name (Last, First, Middle Initial)
Ronald C. Nelson

Mailing Address 5275 N Lake Dr

City State Zip Code
Whitefish Bay WI 53217-5371

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

Name of Employer NML Occupation Dir Rsrch & Prod Spt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-598

Amount of Each Receipt this Period
2.00

SUBTOTAL of Receipts This Page (optional) ► 26.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 122
(check only one)

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

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

A.

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

Mailing Address 22 Maple Ave

City State Zip Code
Larchmont NY 10538-4041

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-73

Amount of Each Receipt this Period
208.00

B.

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

Mailing Address 22 Maple Ave

City State Zip Code
Larchmont NY 10538-4041

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-73

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Jeremy D. Newman

Mailing Address 1140 Lone Tree Rd

City State Zip Code
Elm Grove WI 53122-2019

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

Name of Employer NML Occupation
NML Dir Corp Offices

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-1093

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ► 434.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Jeremy D. Newman
Mailing Address 1140 Lone Tree Rd
City Elm Grove State WI Zip Code 53122-2019
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Dir Corp Offices
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 276.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-1092
Amount of Each Receipt this Period 18.00

B. Full Name (Last, First, Middle Initial)
William H. Norton
Mailing Address 10145 Wavell Rd
City Fairfax State VA Zip Code 22032-2337
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Regional Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-524
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
William H. Norton
Mailing Address 10145 Wavell Rd
City Fairfax State VA Zip Code 22032-2337
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Regional Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-523
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 122

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Daniel J. O Meara

Mailing Address W70N385 Foxpointe Ave

City State Zip Code
Cedarburg WI 53012-2232

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

Name of Employer NML Occupation VP Agency Dev & Prgrms

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 374.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-709

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Daniel J. O Meara

Mailing Address W70 N385 Fox Pointe

City State Zip Code
Cedarburg WI 53012

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

Name of Employer NML Occupation VP Agency Dev & Prgrms

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 374.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-708

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Gregory C. Oberland

Mailing Address 4746 N Cumberland Blvd

City State Zip Code
Whitefish Bay WI 53211-1147

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

Name of Employer NML Occupation EVP Ins & Tech

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-579

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ▶

258.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

A. Full Name (Last, First, Middle Initial)
Gregory C. Oberland
 Mailing Address 4746 N Cumberland Blvd
 City State Zip Code
 Whitefish Bay WI 53211-1147
 Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2010
Transaction ID: 2010072819050-578
 Amount of Each Receipt this Period
 208.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NML Occupation EVP Ins & Tech
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2912.00

B. Full Name (Last, First, Middle Initial)
Eric S. Olson
 Mailing Address 127 Fairmount Rd
 City State Zip Code
 Ridgewood NJ 07450-1422
 Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2010
Transaction ID: 2010071519050-56
 Amount of Each Receipt this Period
 42.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

C. Full Name (Last, First, Middle Initial)
Eric S. Olson
 Mailing Address 127 Fairmount Rd
 City State Zip Code
 Ridgewood NJ 07450-1422
 Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2010
Transaction ID: 20100802105347-56
 Amount of Each Receipt this Period
 42.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation General Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

SUBTOTAL of Receipts This Page (optional) ► 292.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 122

(check only one)

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

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

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

A.

Full Name (Last, First, Middle Initial)
Kathleen A. Oman

Mailing Address S63W16495 College Ave

City State Zip Code
Muskego WI 53150-8303

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

Name of Employer NML Occupation VP Pos

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 726.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-738

Amount of Each Receipt this Period

51.00

B.

Full Name (Last, First, Middle Initial)
Kathleen A. Oman

Mailing Address S63W16495 College Ave

City State Zip Code
Muskego WI 53150-8303

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

Name of Employer NML Occupation VP Pos

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 726.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-737

Amount of Each Receipt this Period

51.00

C.

Full Name (Last, First, Middle Initial)
Christen L. Partleton

Mailing Address 4832 N Shoreland Ave

City State Zip Code
Whitefish Bay WI 53217-5821

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

Name of Employer NML Occupation VP Facility Ops

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 316.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-855

Amount of Each Receipt this Period

26.00

SUBTOTAL of Receipts This Page (optional)

128.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 122
	<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 PAC

A.	Full Name (Last, First, Middle Initial) Christen L. Partleton	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 4832 N Shoreland Ave	Transaction ID: 2010072819050-854
	City State Zip Code Whitefish Bay WI 53217-5821	Amount of Each Receipt this Period 26.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation VP Facility Ops	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 316.00	

B.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler	Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address 9185 N Rexleigh Dr	Transaction ID: 2010071319154-1052
	City State Zip Code Bayside WI 53217-1869	Amount of Each Receipt this Period 23.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Ast Gn Cnl/Ins	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00	

C.	Full Name (Last, First, Middle Initial) Harvey W. Pogoriler	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 9185 N Rexleigh Dr	Transaction ID: 2010072819050-1051
	City State Zip Code Bayside WI 53217-1869	Amount of Each Receipt this Period 23.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Ast Gn Cnl/Ins	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 334.00	

SUBTOTAL of Receipts This Page (optional)	72.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 122

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Gary A. Poliner		Date of Receipt																					
	Mailing Address 825 N Prospect Ave # U		<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>7</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7	/	1	5	/	2	0	1	0														
	City State Zip Code Milwaukee WI 53202-3979		Transaction ID: 2010071319154-530																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer NML Occupation EVP Ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2739.32																						

B.	Full Name (Last, First, Middle Initial) Gary A. Poliner		Date of Receipt																					
	Mailing Address 825 N Prospect Ave # U		<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>7</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	3	1	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7	/	3	1	/	2	0	1	0														
	City State Zip Code Milwaukee WI 53202-3979		Transaction ID: 2010072819050-529																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer NML Occupation EVP Ips Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2739.32																						

C.	Full Name (Last, First, Middle Initial) Michael E. Pritzl		Date of Receipt																					
	Mailing Address 572 Cottonwood Ln		<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>7</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	5	/	2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7	/	1	5	/	2	0	1	0														
	City State Zip Code Grafton WI 53024-9591		Transaction ID: 2010071319154-958																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
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 ▼ 238.00																						

SUBTOTAL of Receipts This Page (optional)	260.32
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 76 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Michael E. Pritzl

Mailing Address 572 Cottonwood Ln

City State Zip Code
Grafton WI 53024-9591

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

Name of Employer NML Occupation VP Agency Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-957

Amount of Each Receipt this Period
17.00

B. Full Name (Last, First, Middle Initial)
Charles R. Pruett

Mailing Address 224 Ensworth PI

City State Zip Code
Nashville TN 37205-1922

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-60

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Charles R. Pruett

Mailing Address 224 Ensworth PI

City State Zip Code
Nashville TN 37205-1922

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-60

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► 267.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John M. Qualy
Mailing Address 13 Brentmoor Park
City Clayton State MO Zip Code 63105-3067
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-2
Amount of Each Receipt this Period 208.00

B. Full Name (Last, First, Middle Initial)
John M. Qualy
Mailing Address 13 Brentmoor Park
City Clayton State MO Zip Code 63105-3067
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2912.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-2
Amount of Each Receipt this Period 208.00

C. Full Name (Last, First, Middle Initial)
Craig L. Quinlan
Mailing Address 2302 Court North Dr
City Melville State NY Zip Code 11747-8122
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation General Insurance Agent
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 588.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-35
Amount of Each Receipt this Period 42.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Craig L. Quinlan

Mailing Address 2302 Court North Dr

City State Zip Code
Melville NY 11747-8122

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-35

Amount of Each Receipt this Period
42.00

B.

Full Name (Last, First, Middle Initial)
Steven M. Radke

Mailing Address 9600 N Crestwood Ct

City State Zip Code
Mequon WI 53092-5355

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

Name of Employer Occupation
NML VP Leg & Reg Relations

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-819

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Steven M. Radke

Mailing Address 9600 N Crestwood Ct

City State Zip Code
Mequon WI 53092-5355

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

Name of Employer Occupation
NML VP Leg & Reg Relations

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 420.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-818

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)

102.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Randal W. Ralph

Mailing Address 3616 Turnberry Dr

City State Zip Code
Mequon WI 53092-6307

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

Name of Employer NML Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-1049

Amount of Each Receipt this Period
17.50

B.

Full Name (Last, First, Middle Initial)
Randal W. Ralph

Mailing Address 3616 Turnberry Dr

City State Zip Code
Mequon WI 53092-6307

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

Name of Employer NML Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-1048

Amount of Each Receipt this Period
17.50

C.

Full Name (Last, First, Middle Initial)
Jeff D. Reeter

Mailing Address 7 Williamsburg Ln

City State Zip Code
Houston TX 77024-5144

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-71

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jeff D. Reeter

Mailing Address 7 Williamsburg Ln

City State Zip Code
Houston TX 77024-5144

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

Name of Employer Self-Employed Occupation
General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-71

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
David R. Remstad

Mailing Address 2634 N Lake Dr

City State Zip Code
Milwaukee WI 53211-3837

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

Name of Employer NML Occupation
VP & Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 828.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-742

Amount of Each Receipt this Period
60.00

C.

Full Name (Last, First, Middle Initial)
David R. Remstad

Mailing Address 2634 N Lake Dr

City State Zip Code
Milwaukee WI 53211-3837

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

Name of Employer NML Occupation
VP & Chief Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 828.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-741

Amount of Each Receipt this Period
60.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 122
(check only one)

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

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

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

<p>A. Full Name (Last, First, Middle Initial) Peter K. Richardson</p> <p>Mailing Address 720 E Green Tree Rd</p> <p>City State Zip Code Fox Point WI 53217-3615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Ast Gn Cnl/Ipas</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 242.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 15 / 2010</p> <p>Transaction ID: 2010071319154-507</p> <p>Amount of Each Receipt this Period 19.00</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Peter K. Richardson</p> <p>Mailing Address 720 E Green Tree Rd</p> <p>City State Zip Code Fox Point WI 53217-3615</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Ast Gn Cnl/Ipas</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 242.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 31 / 2010</p> <p>Transaction ID: 2010072819050-506</p> <p>Amount of Each Receipt this Period 19.00</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Daniel A. Riedl</p> <p>Mailing Address 6604 Cedar St</p> <p>City State Zip Code Wauwatosa WI 53213-3252</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation VP Dist Pol & Ops</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 350.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 15 / 2010</p> <p>Transaction ID: 2010071319154-663</p> <p>Amount of Each Receipt this Period 25.00</p>
--	--

SUBTOTAL of Receipts This Page (optional)	63.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Daniel A. Riedl

Mailing Address 6604 Cedar St

City State Zip Code
Milwaukee WI 53213-3252

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

Name of Employer NML Occupation VP Dist Pol & Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2010

Transaction ID: 2010072819050-662

Amount of Each Receipt this Period
25.00

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

Mailing Address 4100 N Lake Dr

City State Zip Code
Shorewood WI 53211-1719

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

Name of Employer NML Occupation EVP & Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2010

Transaction ID: 2010071319154-620

Amount of Each Receipt this Period
208.00

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

Mailing Address 4100 N Lake Dr

City State Zip Code
Shorewood WI 53211-1719

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

Name of Employer NML Occupation EVP & Chief Admin Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2010

Transaction ID: 2010072819050-619

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ► **441.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
John D. Rivers, Jr.

Mailing Address 3601 River Ridge Cv

City Prospect State KY Zip Code 40059-8038

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1916.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-34

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
John D. Rivers, Jr.

Mailing Address 3601 River Ridge Cv

City Prospect State KY Zip Code 40059-8038

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1916.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-34

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Bethany M. Rodenhuis

Mailing Address 3900 N Lake Dr

City Shorewood State WI Zip Code 53211-2448

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

Name of Employer NML Occupation VP Corp Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-621

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► **476.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 122
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Bethany M. Rodenhuis

Mailing Address 3900 N Lake Dr

City Shorewood State WI Zip Code 53211-2448

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

Name of Employer NML Occupation VP Corp Plng

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 840.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-620
 Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
Tammy M. Roou

Mailing Address N99W14710 Amber Dr

City Germantown State WI Zip Code 53022-6611

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

Name of Employer NML Occupation VP & Ins Prod & Dist Cnl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-806
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Tammy M. Roou

Mailing Address N99 W14710 Amber Drive

City Germantown State WI Zip Code 53022

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

Name of Employer NML Occupation VP & Ins Prod & Dist Cnl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-805
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Matt Russo		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
Mailing Address 139 Deep Valley Rd		Transaction ID: 2010071519050-64
City New Canaan	State Zip Code CT 06840-2804	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 2912.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Matt Russo		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
Mailing Address 139 Deep Valley Rd		Transaction ID: 20100802105347-64
City New Canaan	State Zip Code CT 06840-2804	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 2912.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) R. P. Sarnecki		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
Mailing Address 16004 King St		Transaction ID: 2010071519050-46
City Overland Park	State Zip Code KS 66062-7508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 1500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	566.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
R. P. Sarnecki

Mailing Address 16004 King St

City State Zip Code
Overland Park KS 66062-7508

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-46

Amount of Each Receipt this Period
150.00

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

Mailing Address 8 Benedek Rd

City State Zip Code
Princeton NJ 08540-2227

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-4

Amount of Each Receipt this Period
208.00

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

Mailing Address 8 Benedek Rd

City State Zip Code
Princeton NJ 08540-2227

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-4

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional) ▶ **566.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Timothy G. Schaefer

Mailing Address 1013 E Lexington Blvd

City State Zip Code
Whitefish Bay WI 53217-5381

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

Name of Employer NML Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 982.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-854

Amount of Each Receipt this Period
71.00

B.

Full Name (Last, First, Middle Initial)
Timothy G. Schaefer

Mailing Address 1013 E Lexington Blvd

City State Zip Code
Whitefish Bay WI 53217-5381

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

Name of Employer NML Occupation Chief Information Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 982.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-853

Amount of Each Receipt this Period
71.00

C.

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

Mailing Address 1500 Greenway Ter

City State Zip Code
Elm Grove WI 53122-1611

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

Name of Employer NML Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-760

Amount of Each Receipt this Period
208.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 122

(check only one)

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

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

A.

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

Mailing Address 1500 Greenway Ter

City State Zip Code
Elm Grove WI 53122-1611

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

Name of Employer NML Occupation President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-759

Amount of Each Receipt this Period

208.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey S. Schlinsog

Mailing Address W73N412 Greystone Dr

City State Zip Code
Cedarburg WI 53012-2281

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

Name of Employer NML Occupation Dir Research

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 332.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-964

Amount of Each Receipt this Period

22.00

C.

Full Name (Last, First, Middle Initial)
Jeffrey S. Schlinsog

Mailing Address W73N412 Greystone Dr

City State Zip Code
Cedarburg WI 53012-2281

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

Name of Employer NML Occupation Dir Research

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 332.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-963

Amount of Each Receipt this Period

22.00

SUBTOTAL of Receipts This Page (optional)

252.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 89 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Kathleen H. Schluter
Mailing Address 5057 N Palisades Rd
City State Zip Code
Whitefish Bay WI 53217-5756
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP & Tax Cnsl
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 434.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-762
Amount of Each Receipt this Period 31.00

B. Full Name (Last, First, Middle Initial)
Kathleen H. Schluter
Mailing Address 5057 N Palisades Rd
City State Zip Code
Whitefish Bay WI 53217-5756
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP & Tax Cnsl
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 434.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-761
Amount of Each Receipt this Period 31.00

C. Full Name (Last, First, Middle Initial)
Calvin R. Schmidt
Mailing Address W205 Allen Rd
City State Zip Code
Oconomowoc WI 53066-9048
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Inv Prod Ops
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 802.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-788
Amount of Each Receipt this Period 59.00

SUBTOTAL of Receipts This Page (optional) ► 121.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 90 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Calvin R. Schmidt

Mailing Address W205 Allen Rd

City Oconomowoc State WI Zip Code 53066-9048

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

Name of Employer NML Occupation VP Inv Prod Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 802.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-787
Amount of Each Receipt this Period 59.00

B. Full Name (Last, First, Middle Initial)
Rodd Schneider

Mailing Address 1415 E Fairy Chasm Rd

City Bayside State WI Zip Code 53217-1433

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

Name of Employer NML Occupation VP & Lit Cnsl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-521
Amount of Each Receipt this Period 27.00

C. Full Name (Last, First, Middle Initial)
Rodd Schneider

Mailing Address 1415 E Fairy Chasm R

City Bayside State WI Zip Code 53217

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

Name of Employer NML Occupation VP & Lit Cnsl

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-520
Amount of Each Receipt this Period 27.00

SUBTOTAL of Receipts This Page (optional) ► 113.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Todd M. Schoon

Mailing Address 923 E Kilbourn Ave
U

City State Zip Code
Milwaukee WI 53202-3493

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

Name of Employer NML Occupation
Sr VP Agencies

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-1072

Amount of Each Receipt this Period
208.00

B.

Full Name (Last, First, Middle Initial)
Todd M. Schoon

Mailing Address 923 E Kilbourn Ave # U

City State Zip Code
Milwaukee WI 53202-3493

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

Name of Employer NML Occupation
Sr VP Agencies

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1071

Amount of Each Receipt this Period
208.00

C.

Full Name (Last, First, Middle Initial)
Brad P. Seitzinger

Mailing Address 1672 Chieftan Cir

City State Zip Code
Oxford MI 48371-6095

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

Name of Employer Self-Employed Occupation
General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 774.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-49

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ▶

491.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 122

(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Brad P. Seitzinger		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 1672 Chieftan Cir		Transaction ID: 20100802105347-49		
	City Oxford	State MI	Zip Code 48371-6095	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation General Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 774.00			

B.	Full Name (Last, First, Middle Initial) David W. Simbro		Date of Receipt MM / DD / YYYY 07 / 15 / 2010		
	Mailing Address 311 E Erie St Unit 4		Transaction ID: 2010071319154-1061		
	City Milwaukee	State WI	Zip Code 53202-6040	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP Life Products			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) David W. Simbro		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 311 E Erie St Unit 4		Transaction ID: 2010072819050-1060		
	City Milwaukee	State WI	Zip Code 53202-6040	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NML	Occupation VP Life Products			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional) ▶

155.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 122
(check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Paul W. Skalecki</p> <p>Mailing Address W69N463 Fox Pointe A</p> <p>City Cedarburg State WI Zip Code 53012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation VP Uw Standards</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 354.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 15 / 2010</p> <p>Transaction ID: 2010071319154-875</p> <p>Amount of Each Receipt this Period 27.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Paul W. Skalecki</p> <p>Mailing Address W69N463 Fox Pointe A</p> <p>City Cedarburg State WI Zip Code 53012</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation VP Uw Standards</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 354.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 31 / 2010</p> <p>Transaction ID: 2010072819050-874</p> <p>Amount of Each Receipt this Period 27.00</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Mark W. Smith</p> <p>Mailing Address 614 Park Crest Dr</p> <p>City Thiensville State WI Zip Code 53092-1423</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NML Occupation Ast Gen Cnl & Sec</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 346.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 15 / 2010</p> <p>Transaction ID: 2010071319154-877</p> <p>Amount of Each Receipt this Period 23.00</p>
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SUBTOTAL of Receipts This Page (optional)	77.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 94 / 122
	(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 PAC

A.	Full Name (Last, First, Middle Initial) Mark W. Smith		Date of Receipt
	Mailing Address 614 Park Crest Dr		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Thiensville	WI	53092-1423
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation Ast Gen Cnl & Sec	Transaction ID: 2010072819050-876
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="346.00"/>	<input type="text" value="23.00"/>

B.	Full Name (Last, First, Middle Initial) Richard P. Snyder		Date of Receipt
	Mailing Address 909 Fairview Ave		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	South Milwaukee	WI	53172-1719
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation Dir Field Comp	Transaction ID: 2010072819050-641
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="208.00"/>	<input type="text" value="14.00"/>

C.	Full Name (Last, First, Middle Initial) Steve P. Sperka		Date of Receipt
	Mailing Address S67W17735 Copper Oaks Ct		<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Muskego	WI	53150-7503
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer NML		Occupation VP Ltc	Transaction ID: 2010071319154-793
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="232.00"/>	<input type="text" value="26.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="63.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Steve P. Sperka

Mailing Address S67W17735 Copper Oaks Ct

City State Zip Code
Muskego WI 53150-7503

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 ▼ 232.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-792

Amount of Each Receipt this Period
26.00

B.

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

Mailing Address 305 Waterbury Cv

City State Zip Code
Jackson MS 39232-8692

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-10

Amount of Each Receipt this Period
42.00

C.

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

Mailing Address 305 Waterbury Cv

City State Zip Code
Jackson MS 39232-8692

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-10

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **110.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Paul J. Steffen

Mailing Address 10502 N Stone Creek Dr

City State Zip Code
Mequon WI 53092-5463

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

Name of Employer NML Occupation VP Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-522

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Paul J. Steffen

Mailing Address 10502 N Stone Creek Dr

City State Zip Code
Mequon WI 53092-5463

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

Name of Employer NML Occupation VP Agencies

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-521

Amount of Each Receipt this Period
50.00

C.

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

Mailing Address 2301 E Newton Ave

City State Zip Code
Shorewood WI 53211-2617

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

Name of Employer NML Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-602

Amount of Each Receipt this Period
17.00

SUBTOTAL of Receipts This Page (optional) ► **117.00**

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

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

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

FOR LINE NUMBER: PAGE 97 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)

Jason Steigman

Mailing Address 2301 E Newton Ave

City State Zip Code
Shorewood WI 53211-2617

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

Name of Employer NML Occupation
Managing Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 394.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	0

Transaction ID: 2010072819050-601

Amount of Each Receipt this Period

17.00

B.

Full Name (Last, First, Middle Initial)

David G. Stoeffel

Mailing Address 6311 N Lake Dr

City State Zip Code
Whitefish Bay WI 53217-4343

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

Name of Employer NML Occupation
VP Invest Prod Ln

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	1	0

Transaction ID: 2010071319154-878

Amount of Each Receipt this Period

31.00

C.

Full Name (Last, First, Middle Initial)

David G. Stoeffel

Mailing Address 6311 N Lake Dr

City State Zip Code
Whitefish Bay WI 53217-4343

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

Name of Employer NML Occupation
VP Invest Prod Ln

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	0

Transaction ID: 2010072819050-877

Amount of Each Receipt this Period

31.00

SUBTOTAL of Receipts This Page (optional)

79.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 98 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Stephen R. Stone

Mailing Address N58 W24851 Cardinal

City State Zip Code
Sussex WI 53089

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

Name of Employer NML Occupation Dir Inv Acctg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 214.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-666

Amount of Each Receipt this Period
17.00

B. Full Name (Last, First, Middle Initial)
Richard A. Strait

Mailing Address 9086 N Tennyson Dr

City State Zip Code
Bayside WI 53217-1967

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-1059

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Richard A. Strait

Mailing Address 9086 N Tennyson Dr

City State Zip Code
Bayside WI 53217-1967

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

Name of Employer NML Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1058

Amount of Each Receipt this Period
25.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Peter F. Striano, III

Mailing Address 11050 NW 78th Pl

City State Zip Code
Parkland FL 33076-4723

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-61

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Steven J. Stribling

Mailing Address 11830 W Whitaker Ave

City State Zip Code
Greenfield WI 53228-2455

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

Name of Employer Occupation
NML Director - Di Benefits

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1074

Amount of Each Receipt this Period
15.00

C.

Full Name (Last, First, Middle Initial)
Stephen J. Strommen

Mailing Address 7410 N Range Line Rd

City State Zip Code
Glendale WI 53209-2028

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

Name of Employer Occupation
NML Senior Actuary

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 252.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-761

Amount of Each Receipt this Period
18.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Stephen J. Strommen

Mailing Address 7410 N Range Line Rd

City State Zip Code
Glendale WI 53209-2028

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

Name of Employer NML Occupation Senior Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-760

Amount of Each Receipt this Period
18.00

B.

Full Name (Last, First, Middle Initial)
Daphne C. Stroud

Mailing Address 150 Fernwood Dr

City State Zip Code
East Greenwich RI 02818-1616

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-66

Amount of Each Receipt this Period
42.00

C.

Full Name (Last, First, Middle Initial)
Daphne C. Stroud

Mailing Address 150 Fernwood Dr

City State Zip Code
East Greenwich RI 02818-1616

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-66

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional) ► **102.00**

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

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

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

FOR LINE NUMBER: PAGE 101 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Theodore H. Strupp

Mailing Address 9411 Harding Blvd

City State Zip Code
Milwaukee WI 53226-1722

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

Name of Employer NML Occupation Dir Corp & Exec Com

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-786
Amount of Each Receipt this Period 15.00

B. Full Name (Last, First, Middle Initial)
Rachel L. Tahnint

Mailing Address 4733 N Cumberland Blvd

City State Zip Code
Whitefish Bay WI 53211-1140

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

Name of Employer NML Occupation VP Info Risk Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-824
Amount of Each Receipt this Period 24.00

C. Full Name (Last, First, Middle Initial)
Rachel L. Tahnint

Mailing Address 4733 N Cumberland Blvd

City State Zip Code
Whitefish Bay WI 53211-1140

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

Name of Employer NML Occupation VP Info Risk Mgmt

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-823
Amount of Each Receipt this Period 24.00

SUBTOTAL of Receipts This Page (optional) ▶ 63.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial) Joe P. Teague		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
Mailing Address 2613 N Dundee St		Transaction ID: 2010071519050-13
City Tampa	State Zip Code FL 33629-7516	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 980.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Joe P. Teague		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
Mailing Address 2613 N Dundee St		Transaction ID: 20100802105347-13
City Tampa	State Zip Code FL 33629-7516	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 980.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Michael F. Tews		Date of Receipt MM / DD / YYYY 07 / 15 / 2010
Mailing Address 609 S 249th Cir		Transaction ID: 2010071519050-31
City Waterloo	State Zip Code NE 68069-4432	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer Self-Employed	Occupation General Insurance Agent	Aggregate Year-to-Date ▼ 588.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	182.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 122
(check only one)

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

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

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

A. Full Name (Last, First, Middle Initial)
Michael F. Tews

Mailing Address 609 S 249th Cir

City Waterloo State NE Zip Code 68069-4432

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-31
Amount of Each Receipt this Period 42.00

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

Mailing Address 12505 Ventana Mesa Cir

City Castle Rock State CO Zip Code 80108-9148

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-42
Amount of Each Receipt this Period 208.00

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

Mailing Address 12505 Ventana Mesa Cir

City Castle Rock State CO Zip Code 80108-9148

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

Name of Employer NML Occupation Special Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-42
Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 458.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Douglas D. Timmer

Mailing Address 633 W McIntosh Ln

City State Zip Code
Mequon WI 53092-6022

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

Name of Employer NML Occupation Ast Gn Cnl/Secur

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-989

Amount of Each Receipt this Period

17.00

B.

Full Name (Last, First, Middle Initial)
Douglas D. Timmer

Mailing Address 633 W McIntosh Ln

City State Zip Code
Mequon WI 53092-6022

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

Name of Employer NML Occupation Ast Gn Cnl/Secur

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-988

Amount of Each Receipt this Period

17.00

C.

Full Name (Last, First, Middle Initial)
Alessandro J. Tronco

Mailing Address 5 N Point Dr

City State Zip Code
Cohoes NY 12047-3823

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 588.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-68

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)

76.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 105 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Alessandro J. Tronco

Mailing Address 5 N Point Dr

City State Zip Code
Cohoes NY 12047-3823

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

Name of Employer Self-Employed Occupation
General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-68

Amount of Each Receipt this Period
42.00

B. Full Name (Last, First, Middle Initial)
Chris G. Trost

Mailing Address 1218 E Olive St

City State Zip Code
Shorewood WI 53211-1825

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

Name of Employer NML Occupation
Senior Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-601

Amount of Each Receipt this Period
18.00

C. Full Name (Last, First, Middle Initial)
Chris G. Trost

Mailing Address 1218 E Olive St

City State Zip Code
Shorewood WI 53211-1825

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

Name of Employer NML Occupation
Senior Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 252.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-600

Amount of Each Receipt this Period
18.00

SUBTOTAL of Receipts This Page (optional) ▶ **78.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 106 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Leo C. Tucker

Mailing Address 605 Potomac River Rd

City State Zip Code
Mc Lean VA 22102-1402

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-58

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
Leo C. Tucker

Mailing Address 605 Potomac River Rd

City State Zip Code
Mc Lean VA 22102-1402

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-58

Amount of Each Receipt this Period

75.00

C.

Full Name (Last, First, Middle Initial)
Sean P. Twohig

Mailing Address 762 Country Club Ln

City State Zip Code
Fond Du Lac WI 54935-8313

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

Name of Employer NML Occupation
NML Director li

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-1031

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 107 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Sean P. Twohig
Mailing Address 762 Country Club Ln
City State Zip Code
Fond Du Lac WI 54935-8313
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation Director li
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-1030
Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Patricia L. Van Kampen
Mailing Address 4520 N Lake Dr
City State Zip Code
Whitefish Bay WI 53211-1252
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Public Equities
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 820.00
Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-610
Amount of Each Receipt this Period 38.00

C. Full Name (Last, First, Middle Initial)
Patricia L. Van Kampen
Mailing Address 4520 N Lake Dr
City State Zip Code
Whitefish Bay WI 53211-1252
FEC ID number of contributing federal political committee. **C**
Name of Employer NML Occupation VP Public Equities
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 820.00
Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-609
Amount of Each Receipt this Period 38.00

SUBTOTAL of Receipts This Page (optional) ► 86.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 108 / 122

(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robert J. Waltos, Jr.

Mailing Address 7 Castaways N

City State Zip Code
Newport Beach CA 92660-8403

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-25

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Robert J. Waltos, Jr.

Mailing Address 7 Castaways N

City State Zip Code
Newport Beach CA 92660-8403

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-25

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
P. Andrew Ware

Mailing Address 7900 N Berwyn Ave

City State Zip Code
Glendale WI 53209-1810

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

Name of Employer NML Occupation
NML VP Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-504

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional) ▶

235.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 109 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
P. Andrew Ware

Mailing Address 7900 N Berwyn Ave

City State Zip Code
Glendale WI 53209-1810

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

Name of Employer NML Occupation VP Actuary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-503

Amount of Each Receipt this Period
35.00

B.

Full Name (Last, First, Middle Initial)
Alison F. Watson

Mailing Address 629 Constitution Ave NE

City State Zip Code
Washington DC 20002-6086

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

Name of Employer NML Occupation Dir Fed Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071319154-1039

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Alison F. Watson

Mailing Address 420 Independence Ave SE

City State Zip Code
Washington DC 20003-1046

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

Name of Employer NML Occupation Dir Fed Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1038

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Jeffrey B. Williams

Mailing Address 2004 N 72nd St

City State Zip Code
Wauwatosa WI 53213-1828

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

Name of Employer NML Occupation VP Corp Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-568

Amount of Each Receipt this Period
24.00

B.

Full Name (Last, First, Middle Initial)
Jeffrey B. Williams

Mailing Address 2004 N 72nd St

City State Zip Code
Milwaukee WI 53213-1828

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

Name of Employer NML Occupation VP Corp Risk Mgmt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 2010072819050-567

Amount of Each Receipt this Period
24.00

C.

Full Name (Last, First, Middle Initial)
Brian D. Wilson

Mailing Address 11128 N Whilton Rd

City State Zip Code
Mequon WI 53097-3439

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

Name of Employer NML Occupation Dir Ips Mkt & Sls

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-1083

Amount of Each Receipt this Period
19.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 122
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Brian D. Wilson

Mailing Address 11128 N Whilton Rd

City State Zip Code
Mequon WI 53097-3439

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

Name of Employer NML Occupation Dir Ips Mkt & Sls

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-1082

Amount of Each Receipt this Period 19.00

B.

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

Mailing Address 2218 Hopedale Ave

City State Zip Code
Charlotte NC 28207-2130

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-3

Amount of Each Receipt this Period 208.00

C.

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

Mailing Address 2218 Hopedale Ave

City State Zip Code
Charlotte NC 28207-2130

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-3

Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ▶ 435.00

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

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

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

FOR LINE NUMBER: PAGE 112 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
John W. Wright, II
Mailing Address 4463 Jett Rd NW

City Atlanta State GA Zip Code 30327-3563

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071519050-48
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
John W. Wright, II
Mailing Address 4463 Jett Rd NW

City Atlanta State GA Zip Code 30327-3563

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

Name of Employer Self-Employed Occupation General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 20100802105347-48
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Conrad C. York
Mailing Address 522 Heather Ln

City Wales State WI Zip Code 53183-9768

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

Name of Employer NML Occupation VP Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 776.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-766
Amount of Each Receipt this Period 58.00

SUBTOTAL of Receipts This Page (optional) ► 258.00

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

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

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

FOR LINE NUMBER: PAGE 113 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Conrad C. York

Mailing Address 1313 N Franklin Pl

City Milwaukee State WI Zip Code 53202-2980

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

Name of Employer NML Occupation VP Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 776.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-765
Amount of Each Receipt this Period 58.00

B. Full Name (Last, First, Middle Initial)
Catherine M. Young

Mailing Address 929 N Astor St

City Milwaukee State WI Zip Code 53202-7000

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

Name of Employer NML Occupation Ast Gn Cnl/Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-1096
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Catherine M. Young

Mailing Address 929 N Astor St Unit

City Milwaukee State WI Zip Code 53202-7000

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

Name of Employer NML Occupation Ast Gn Cnl/Re

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-1095
Amount of Each Receipt this Period 20.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 122
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Mailing Address 6630 Country Creek Ln

City State Zip Code
Cedar Rapids IA 52403-7023

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071519050-63

Amount of Each Receipt this Period
42.00

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

Mailing Address 6630 Country Creek Ln

City State Zip Code
Cedar Rapids IA 52403-7023

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

Name of Employer Self-Employed Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 588.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 20100802105347-63

Amount of Each Receipt this Period
42.00

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

Mailing Address 2818 E Menlo Blvd

City State Zip Code
Shorewood WI 53211-2652

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

Name of Employer NML Occupation
NML Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2010

Transaction ID: 2010071319154-794

Amount of Each Receipt this Period
50.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 122
	(check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) Thomas D. Zale	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 2818 E Menlo Blvd	Transaction ID: 2010072819050-793
	City State Zip Code Shorewood WI 53211-2652	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00	

B.	Full Name (Last, First, Middle Initial) Diana M. Zawada	Date of Receipt MM / DD / YYYY 07 / 15 / 2010
	Mailing Address N1 W311143 Wildwood	Transaction ID: 2010071319154-768
	City State Zip Code Delafield WI 53018	Amount of Each Receipt this Period 17.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Dir-Enterprise Vendor Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00	

C.	Full Name (Last, First, Middle Initial) Diana M. Zawada	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address N1 W311143 Wildwood	Transaction ID: 2010072819050-767
	City State Zip Code Delafield WI 53018	Amount of Each Receipt this Period 17.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NML Occupation Dir-Enterprise Vendor Mgmt Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00	

SUBTOTAL of Receipts This Page (optional)	84.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 122
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Rick T. Zehner

Mailing Address 203 W Ravine Baye Rd

City Bayside State WI Zip Code 53217-1334

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

Name of Employer NML Occupation VP Special Projects

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-972
 Amount of Each Receipt this Period 29.00

B. Full Name (Last, First, Middle Initial)
Rick T. Zehner

Mailing Address 203 W Ravine Baye Rd

City Bayside State WI Zip Code 53217-1334

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

Name of Employer NML Occupation VP Special Projects

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 07 / 31 / 2010
Transaction ID: 2010072819050-971
 Amount of Each Receipt this Period 29.00

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

Mailing Address 2505 W Dean Rd

City River Hills State WI Zip Code 53217-2010

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

Name of Employer NML Occupation Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt 07 / 15 / 2010
Transaction ID: 2010071319154-1005
 Amount of Each Receipt this Period 208.00

SUBTOTAL of Receipts This Page (optional) ► 266.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 117 / 122

(check only one)

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

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

A.

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

Mailing Address 2505 W Dean Rd

City State Zip Code
River Hills WI 53217-2010

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

Name of Employer Occupation
NML Chairman & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 2010072819050-1004

Amount of Each Receipt this Period
208.00

B.

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

Mailing Address 104 Wildwood Dr

City State Zip Code
Avon CT 06001-4413

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 15 / 2010

Transaction ID: 2010071519050-24

Amount of Each Receipt this Period
208.00

C.

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

Mailing Address 104 Wildwood Dr

City State Zip Code
Avon CT 06001-4413

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

Name of Employer Occupation
Self-Employed General Insurance Agent

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2912.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 20100802105347-24

Amount of Each Receipt this Period
208.00

SUBTOTAL of Receipts This Page (optional)

624.00

TOTAL This Period (last page this line number only)

25833.64

**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 118 / 122

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

A.

Full Name (Last, First, Middle Initial)

US Bank

Mailing Address 777 E. Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement
Service Charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: ACE5C8C51E8C3DEE9BD

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

67.46

SUBTOTAL of Disbursements This Page (optional)

67.46

TOTAL This Period (last page this line number only)

67.46

**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

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 PAC

A. Full Name (Last, First, Middle Initial) Bennett Election Committee Inc <hr/> Mailing Address 175 South West Temple Suite 650 <hr/> City Salt Lake City State UT Zip Code 84101 <hr/> Purpose of Disbursement 2010 Primary Debt Retirement Candidate Name Robert F. Bennett <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CDB64C30993290F4AF4 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Duffy for Congress <hr/> Mailing Address PO Box 186 <hr/> City Ashland State WI Zip Code 54806 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Sean P. Duffy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9CCA97DF0519DF06EC5 Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ed Royce for Congress <hr/> Mailing Address PO Box 2525 <hr/> City Orange State CA Zip Code 92859 <hr/> Purpose of Disbursement 2010 General Candidate Name Edward R. Royce <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 40 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 772809BBC38FA60C350 Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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 PAC

<p>A. Full Name (Last, First, Middle Initial) Freedom Project, The</p> <p>Mailing Address 631-B Pennsylvania Ave., SE Basement Unit</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement 2010 Contribution</p> <p>Candidate Name Freedom Project, The</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution</p>	<p>Transaction ID: 838BE689AC80CCE4FB7</p> <p>Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Julie Lassa for Congress</p> <p>Mailing Address PO Box 112</p> <p>City Stevens Point State WI Zip Code 54481</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Julie M. Lassa</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 07</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 9579EDF09B29692067A</p> <p>Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Larson for Congress</p> <p>Mailing Address 29 Ruff Circle</p> <p>City Glastonbury State CT Zip Code 06033</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name John B. Larson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 000B41278CE332D580C</p> <p>Date of Disbursement 07 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6500.00

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 121 / 122

<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 PAC

A. Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress <hr/> Mailing Address PO Box 1441 <hr/> City Topeka State KS Zip Code 66601 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Lynn Jenkins <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70FF12E9CAB6E2F9759 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Madison PAC, The <hr/> Mailing Address 235 State Street #206 <hr/> City Springfield State MA Zip Code 01103 <hr/> Purpose of Disbursement 2010 Contribution Candidate Name Madison PAC, The <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: E79AA0411872D8740D4 Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution
C. Full Name (Last, First, Middle Initial) Melissa Bean for Congress <hr/> Mailing Address PO Box 3068 <hr/> City Barrington State IL Zip Code 60010 <hr/> Purpose of Disbursement 2010 General Candidate Name Melissa Luburich Bean <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EBB74350A31585E6525 Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2010
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

8500.00

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 PAC

A. Full Name (Last, First, Middle Initial) Scott Garrett for Congress <hr/> Mailing Address PO Box 905 <hr/> City Newton State NJ Zip Code 07860 <hr/> Purpose of Disbursement 2010 General Candidate Name E. Scott Garrett <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B20CF03144BADFCCAFA Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Shelley Moore Capito for Congress <hr/> Mailing Address PO Box 11519 <hr/> City Charleston State WV Zip Code 25339 <hr/> Purpose of Disbursement 2010 General Candidate Name Shelley Moore Capito <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: FFDFC08D85E2B52BC76 Date of Disbursement 07 / 13 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Stutzman for Congress <hr/> Mailing Address 0250 W 600 N <hr/> City Howe State IN Zip Code 46746 <hr/> Purpose of Disbursement 2010 General Candidate Name Marlin A. Stutzman <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7D024EEE7CF5AE931E6 Date of Disbursement 07 / 01 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" 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)	21500.00